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Dr. Laura Trejo
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Kelly LoBianco
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Aging & Adult Information & Assistance Line: (800) 510-2020
Report Elder Abuse: (877) 477-3646
Report Hate: 211
America's Job Centers: (888) 226-6300
Community & Senior Centers: (323) 260-2003
Office of Small Business: (800) 432-4900

April 5, 2022

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:

LOS ANGELES COUNTY PLANNING AND SERVICE AREA (PSA) 19 AREA AGENCY ON AGING 2022-2023 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) 2022-2023 Area Plan Update. The FY 2022-23 Area Plan Update is required by the California Department of Aging (CDA), and it provides an opportunity to revise the FY 2020-24 Area Plan approved by your Board on March 31, 2020. This year's Area Plan Update reflects minor adjustments to the projected units of service for several AAA programs.

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve the FY 2022-23 Area Plan Update (Attachment I).

2. 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 2022-23 Area Plan Update to 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. In this capacity, WDACS is responsible for delivering comprehensive services to promote the health, independence, and well-being of older adults

and adults with disabilities in Los Angeles County. We provide a range of services (as mandated by the Older Americans Act) that include: Congregate and Home-Delivered Meals, Supportive Services, Legal Assistance, Health Insurance Counseling and Advocacy, Nutrition Education, Family Caregiver Support Program, and Health Promotion - Evidence-Based services.

The Older Americans Act (OAA) mandates all AAAs to have a four (4) year Area Plan that outlines key priorities, goals, and objectives for delivering comprehensive services. Los Angeles County's (County) FY 2020-24 Area Plan is based on a robust needs assessment and extensive stakeholder engagement, including 13 public hearings. We also held a virtual public hearing on October 14, 2021, to obtain public feedback on the FY 2022-23 Area Plan Update.

The annual Area Plan Update process enables the County to reexamine its direction and progress because of changing circumstances. This year's Area Plan Update reflects minor adjustments to the projected units of service for several AAA programs, based on the 3-year averages for service units provided. There are minor adjustments to units of service in categories such as personal care, respite care, homemaker, Alzheimer's day care, and case management. The recommended actions are necessary to allow WDACS to submit the FY 2022-23 Area Plan Update to CDA for approval.

As directed by your Board, WDACS is transitioning to a new department of aging and disabilities. Once it is officially created later this year, the new department will assume responsibility for AAA services and implementation of the Area Plan.

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 2022-23 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.

FISCAL IMPACT/FINANCING

The activities described in the FY 2022-23 Area Plan Update are financed by federal OAA, State, and local funds and are included in the Department's FY 2022-23 Budget. No additional County funds are requested as part of the recommended actions.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The recommended actions are necessary to allow WDACS to submit the Area Plan Update to CDA for approval. CDA approval of the Area Plan Update is a required condition of the State's agreement with WDACS (designated by the State as Planning Service Area 19). County Counsel has reviewed and approved the Area Plan Update.

IMPACT ON CURRENT SERVICES

Approval of the FY 2022-23 Area Plan Update will enable WDACS to continue to provide its home and community-based programs and services. These programs provide opportunities for functionally impaired and older adults to live their lives with maximum independence and dignity in their own homes and communities.

CONCLUSION

Upon your approval of the recommended actions, WDACS will submit the Area Plan Update to CDA for approval. Should you have any questions, you may contact me directly, or your staff may contact Kevin Anderson, Special Assistant, at kanderson@wdacs.lacounty.gov.

Respectfully submitted,

Otto Solórzano
Acting Director

OS:LT:AA:ag

Attachment

c: Executive Office, Board of Supervisors
Chief Executive Office
County Counsel

PLANNING SERVICE AREA (PSA) 19 LOS ANGELES COUNTY

ENGAGE & AGE WITH US

Area Agency on Aging 2022-23 Area Plan Update

wdacs
workforce development aging & community services

LOS ANGELES COUNTY AREA AGENCY ON AGING
WORKFORCE DEVELOPMENT, AGING AND COMMUNITY SERVICES

LOS ANGELES PURPOSEFUL AGING AN AGE-FRIENDLY INITIATIVE

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Letter from Dr. Laura Trejo, Executive Director

As the newly appointed Executive Director to the Aging and Community Service Branch of the Workforce Development, Aging and Community Services and soon to be a new department in Los Angeles County, it is my great honor to share the Fiscal Year (FY) 2022-23 Area Plan update with you. The updates provided in this report reflect the continual efforts of Los Angeles County to support and uphold older adults, adults with disabilities, and their caregivers. Los Angeles County maintains a robust and comprehensive expansion and adaptation of programs and services to keep our clients, and the community at large, safe and healthy during the current COVID-19 pandemic.

Los Angeles County swiftly responded to the needs of older adults during the pandemic. The County developed a regional coordination with the City of Los Angeles to combine forces for a seamless distribution of aid and services among various programs. To date, the City and County of Los Angeles delivered over 28 million meals to eligible clients. Los Angeles County still provides grab and go, and home-delivered meals to older adults while Elderly Nutrition Program Congregate Meal sites remain closed. The City and County of Los Angeles also participated in the Great Plates Delivered Program with over 150 restaurants and transportation organizations provided three (3) home delivered meals a day to older adults. Los Angeles County alone provided over 6,855,000 meals.

Los Angeles County and the City of Los Angeles Area Agencies on Aging also partnered with the Los Angeles County Department of Public Health to launch a vaccine information and distribution campaign in partnership with faith-based organizations to increase older adults trust of and access to the COVID-19 vaccine. This campaign reached over 30,000 homebound older adults. Los Angeles County also partnered with the Los Angeles Service Homeless Authority in Project Roomkey, a shelter program that secured housing for older adults experiencing homelessness and who were at a high risk of hospitalization if they contracted COVID-19.

While Los Angeles County remains dedicated to emergency response efforts and servicing older adults during the pandemic, we also found ways to grow the aging network within the Los Angeles region and build strong strategic partnerships to ensure aging services in the Los Angeles region flourish and adapt with the growing older adult population. Los Angeles County and the City of Los Angeles are coordinating efforts to align PSA 19 and 25 operations and develop a single area plan for 2024-2028. Collaborations like this embody the dedication of Los Angeles in becoming the most age-friendly region in the world. Los Angeles County Area Agency on Aging is also an integral component of the Los Angeles regions age-friendly initiative, Purposeful Aging Los Angeles (PALA). PALA is dedicated to prepare Los Angeles for a rapidly growing aging population through an innovative, sustained initiative that unites public and private leadership, resources, ideas and strategies to improve the lives of older Los Angelinos.

We strive to implement strategies and services that support the independence and dignity of older adults, adults with disabilities and their family caregivers. I am privileged to submit this update as it reflects the significant progress Los Angeles County is making to support older adults during the COVID-19 pandemic, and how these updates represent the ways Los Angeles is growing aging services to make our region the most age-friendly in the world.

AREA PLAN UPDATE (APU) CHECKLIST PSA 19

Check one: ☐ **FY21-22** ☒ **FY 22-23** ☐ **FY 23-24**

Use for APUs only

AP Guidance Section	APU Components (To be attached to the APU)	Check if Included	
	➢ *Update/Submit **A)** through **I)** ANNUALLY:*		
n/a	**A) Transmittal Letter-** *(requires hard copy with original ink signatures or official signature stamp-**no 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	☒	
n/a	**E)** Annual Budget	☐	
10	**F)** Service Unit Plan (SUP) Objectives and LTC Ombudsman Program Outcomes	☒	
18	**G)** Legal Assistance	☒	
	➢ *Update/Submit the following only if there has been a CHANGE or the section was not included in the 2020-2024*	Mark Changed/Not Changed (C or N/C) **C**	**N/C**
5	Minimum Percentage/Adequate Proportion	☐	☒
5	Needs Assessment	☐	☒
9	AP Narrative Objectives:	☐	☒
9	• System-Building and Administration	☐	☒
9	• Title IIIB-Funded Programs	☒	☐
9	• Title IIIB-Transportation	☐	☒
9	• Title IIIB-Funded Program Development/Coordination (PD or C)	☐	☒
9	• Title IIIC-1	☒	☐
9	• Title IIIC-2	☒	☐
9	• Title IIID	☒	☐
20	• Title IIIE-Family Caregiver Support Program	☒	☐
9	• HICAP Program	☒	☐
12	Disaster Preparedness	☐	☒
14	Notice of Intent-to Provide Direct Services	☐	☒
15	Request for Approval-to Provide Direct Services	☐	☒
16	Governing Board	☒	☐
17	Advisory Council	☒	☐
21	Organizational Chart(s)	☐	☒

TRANSMITTAL LETTER

2020-2024 Four-Year Area Plan/Annual Update
☐ FY 20-24/ ☐ FY 21-22 ☒ FY 22-23 ☐ FY 23-24

AAA Name: Los Angeles County **PSA** 19

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

Signature: _____ _____
Supervisor Holly J. Mitchell Date
Governing Board Chair [1]

Signature: _____ _____
Kim M Bowman, President Date
Los Angeles County Commission for Older Adults

Signature: _____ _____
Laura Trejo, DSW, Executive Director Date
Aging and Community Services Branch

[1] Original signatures or official signature stamps are required.

SECTION 6

TARGETING

SECTION 6: TARGETING

Estimated Number of Lower Income Minority Older Individuals

The Older Americans Act (OAA) defines a number of "target populations" that the Area Agency on Aging (AAA) includes in the planning and delivery of community-based services. In particular, service delivery is targeted to those with the greatest economic or social need. Those with the "greatest economic need" are older adults with service needs resulting from an income level at or below the Federal Poverty Guideline or Elder Economic Index. Second, older adults with the "greatest social need" have a service need resulting from non-economic factors that restricts a person's ability to perform normal daily tasks or threatens their capacity to live independently. This includes isolation caused by racial, ethnic, social, disability, cultural, or geographic factors, and in 2019 Assembly Bill 2719 revised the definition to include cultural and social isolation caused by sexual orientation, gender identify or gender expression.

These targeted groups also consist of older individuals with any of the following characteristics:

- Alzheimer's Disease or Related Disorders
- At risk for institutional placement
- Disability
- Frailty
- Homelessness
- Informal Caregiver
- Isolated, Neglected, and/or Exploited
- Sexual Orientation, Gender Identity, or Gender Expression
- Limited English Proficiency
- Native American
- Reside in a Rural Area
- Unemployed

The AAA's main focus is to serve those with the greatest economic and social needs in addition to older adults with the characteristics identified. Thus, the AAA makes it a priority for all AAA-funded providers to serve this target population. Addressing these issues is primarily done through a network of partners.

The AAA subcontracts with numerous community-based organizations that are required to conduct targeted outreach and provide services in a culturally sensitive manner. The AAA continuously works toward expanding services in rural areas and identifying methods to reach the target population. WDACS also administers Adult Protective Services, which assists the AAA and its direct service providers identify and serve the most vulnerable populations. Informal caregivers play a critical role in assisting older adults and individuals with functional impairments continue to live in their own homes for as long as possible. Thus, the AAA continues to work with its Family Caregivers' network in order to provide the much-needed support and services to informal caregivers of older adults and grandparents raising grandchildren. The Senior Community Service Employment Program also remains a priority for the AAA in order to provide essential services to older adults who are unemployed.

In our efforts to serve those with the greatest economic and social need, the AAA requires its contractors to meet minimum goals. The AAA also provides resources and assistance to help achieve these goals.

The Los Angeles County AAA is estimated to serve the following number of lower income minority older individuals for the FY 2022-23:

- Minority clients – 24,400 (61%)
- Rural clients – 1,600 (4%)
- Low-income clients (below poverty level) – 13,600 (34%)

SECTION 7

PUBLIC HEARINGS

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, Older Americans Act Reauthorization Act of 2016, Section 314(c)(1).

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
2020-2021	9/30/2019	Antelope Valley Senior Center 777 W. Jackman Street Lancaster, CA 93534	39	Yes	No
2020-2021	10/1/2019	Sunland Senior Citizens Center 8640 Fenwick Street Sunland, CA 91040	22	Yes	No
2020-2021	10/3/2019	Los Angeles LGBT Center Harry & Jeanette Weinberg Senior Ctr. 1118 N. McCadden Place Los Angeles, CA 90038	46	Yes	No
2020-2021	10/4/2019	San Pedro Service Center 769 W 3rd Street San Pedro, CA 90731	38	Yes	No
2020-2021	10/7/2019	Estelle Van Meter 7600 S. Avalon Blvd. Los Angeles, CA 90003	42	Yes	No
2020-2021	10/8/2019	Wilmington Jaycees 1371 Eubanks Ave. Wilmington, CA 90744	85	Yes	No
2020-2021	10/9/2019	St. Barnabas Senior Services 675 S. Carondelet St. Los Angeles, CA 90057	43	Yes	No
2020-2021	10/10/2019	El Monte Senior Citizens Center 3120 N. Tyler Avenue El Monte, CA 91731	79	Yes	No
2020-2021	10/15/2019	The Event Center of Agoura Hills 29900 Lady face Court Agoura Hills, CA 91301	18	Yes	No
2020-2021	10/16/2019	United American Indian Involvement 1125 W 6th Street Los Angeles, CA 90017	19	Yes	No
2020-2021	10/18/2019	Santa Clarita Valley Senior Center 27180 Golden Valley Road Santa Clarita, CA 91350	32	Yes	No
2020-2021	10/22/2019	Lynwood Senior Citizen Center 11329 Ernestine Ave. Lynwood, CA 90262	32	Yes	No
2020-2021	11/14/2019	Topanga Library 122 N Topanga Canyon Blvd Topanga, CA 90290	29	Yes	No
2021-2022	2/25/2021	Zoom Meeting	69	Yes	No
2022-2023	10/14/2021	Zoom Meeting	69	Yes	No
2023-2024					

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.

   Due to COVID and the stay-at-home guidance, one (1) virtual public hearing event was held on October 14, 2021. A notice of the public hearing was advertised through a newspaper in the County and City of Los Angeles. Furthermore, the public hearing notice was sent to the Board offices, County departments, 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 the public hearing were also informed that written statements can be submitted to the AAA.

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

   ☐ Yes. Go to question #3

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

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

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

   ☒ Yes. Go to question #5

   ☐ No, Explain:

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

   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.

   ALZHEIMER'S: Provide trained care management services that enable families to navigate the legal, financial, and health challenges that come with an Alzheimer's diagnosis.

   Family Caregiver Support Services: More caregiver support services (caregiver outreach, education, respite services, care management for people with dementia and their caregivers, etc.).

   Elder Abuse: More outreach/community education needs to be conducted to inform the public about elder abuse and how to report it.

Emergency and Disaster Preparedness: Provide more emergency and disaster services to support older adults and those with disabilities.

Funding for Older Adult Programs: More funding needed to help with housing and transportation needs, senior centers, nutrition services, family caregiver support services and Evidence-Based disease prevention health promotion programs.

Health Services: More services needed to educate older adults on how to age well and age healthy.

Homelessness: More services needed to provide housing for older adults experiencing homelessness.

Legal Services: More legal services needed to assist older adults with wills, estates, power of attorney, and end-of-life planning as they are increasingly isolated.

Mental Health: Support services to mentally ill and homeless older adults needed.

Nutrition: More fresh food and meals to help with special diet needs; expand nutrition services for the weekend (Saturday and Sunday); reopening of community centers and meal sites is needed; food insecurity issues are and issue with older adults in the community.

Rural, Remote, and Isolated Areas: Expand services in areas such as Lancaster and Palmdale; ensure rural areas are not neglected or overlooked; research and prepare a list of vulnerable at-risk people in rural and remote unincorporated areas.

Senior Centers: Provide more services (Computer classes, education and exercise classes, financial education classes, peer support group services, lifelong learning and social engagement programs.

Technology: Digital Divide access and technology education is needed for older adults.

Transportation: Better access to transportation (more taxi vouchers, coupons, and bus tokens; assistance with wheelchairs; and expand the New Freedom Transportation program).

Vulnerable Population Needs: Provide culturally competent services that protect the quality of life of LGBTQ older adults.

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

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

Feedback from public hearing attendees justified the need to expand existing services and adjust unit rates that are used to reimburse sub-recipients for the increasing cost of services. However, this Area plan is prepared with the assumption that Older Americans Act funding will remain about the same and service expansion is not assumed. Therefore, there were no changes in Area Plan which were the result of the input by attendees.

SECTION 9

AREA PLAN NARRATIVE GOALS AND OBJECTIVES

SECTION 9: AREA PLAN NARRATIVE GOALS AND OBJECTIVES

Goal #1

Goal: Promote community support and health services

Rationale: The need for home and community-based services is substantially increasing as the older adult population continues to exponentially grow. Access to health and community support services that promote wellness and active aging have shown to enhance the quality of life for older adults and family caregivers. The Area Agency on Aging and its partners strive toward providing proven ways to promote health and prevent disease among older adults and their caregivers.

[Refer to CCR Article 3, Section 7300 (c)]	**Projected Start and End Dates**	**Title IIIB Funded PD or C**[4]	**Update Status**[5]
1.1 Health Promotion: Evidence-Based a) Provide the Health Promotion: Evidence-Based 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. At least four of the following programs may be offered: • *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 Personal de la Diabetes* • *Arthritis Foundation Exercise Program* • *Arthritis Foundation Walk with Ease* • *A Matter of Balance/Bingocize* b) Ensure DPHP Programs meet the following criteria: • Proven effective with the older adult population, using experimental or quasi-experimental research design; • Research results published in a peer-reviewed 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).	7/01/2020 to 6/30/2024		Continued

Goal #2

Goal: Promote respect and social participation/inclusion of older adults.			
Rationale: Several studies show that initiatives that promote social inclusion and respect for older people have the potential to significantly improve health and wellbeing. PSA 19 is committed to promoting age-friendly environments to help support and encourage older adults to live independently and in good health for longer and can also optimize health and well-being for the wider community.			
[Refer to CCR Article 3, Section 7300 (c)]	**Projected Start and End Dates**	**Title IIIB Funded PD or C**[4]	**Update Status**[5]
2.1 Elder Abuse Prevention 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. b) Improve and coordinate elder abuse prevention efforts with other County departments and community-based organizations.	7/01/2020 to 6/30/2024		**Continued**
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. 2.2 Ombudsman a) Improve collaborative efforts with the AAA Ombudsman service provider to ensure comprehensive and coordinated service 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.	7/01/2020 to 6/30/2024		

Goal #3

Goal: Provide accessible and affordable transportation options for older adults and individuals with disabilities.			
Rationale: The need for accessible transportation options is essential to maintaining independence and an adequate quality of life for individuals with disabilities and older adults.			
[Refer to CCR Article 3, Section 7300 (c)]	**Projected Start and End Dates**	**Title IIIB Funded PD or C**[4]	**Update Status**[5]
3.1 Transportation and Mobility Management a) Implement the Taxicab Service Program (TSP), the Volunteer Driver Mileage Reimbursement (VDMR) Program, and the Door Assistance Transportation Program (DATP) 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 technological enhancements and extension of the three (3) successful pilot programs. c) Develop and provide mobility management services, which will include travel training and travel options counseling, for older adults throughout Los Angeles County.	7/01/2020 to 6/30/2024		Continued

Goal #4

Goal: Coordinate communication and information outreach measures.			
Rationale: 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. 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 IIIB Funded PD or C**[4]	**Update Status**[5]
4.1 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 Angeles County Commission on Older Adults.	7/01/2020 to 6/30/2024		**Continued**
b) Collaborate with the Los Angeles City Department of Aging 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. 4.2 Information and Referral a) Provide outreach to targeted populations, which includes the Lesbian, Gay, Bisexual, and Transgender (LGBT) community. b) Strengthen the awareness of AAA programs and services by distributing comprehensive outreach materials at senior centers, health fairs, and various community events.	7/01/2020 to 6/30/2024		Continued

[4] Indicate if Program Development (PD) **or** Coordination (C) – **cannot be both**. If a PD objective is not completed and is continued the following year, the objective must be revised and restated with the remaining or additional tasks.
[5] Use for Area Plan Updates only: Indicate if objective is **New, Continued, Revised, Completed**, or **Deleted.**

SECTION 10

SERVICE UNIT PLAN (SUP) OBJECTIVES

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 (SPR)

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

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

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	9,500	4	4.1, 4.2
2021-2022	10,000	4	4.1, 4.2
2022-2023	10,000	4	4.1, 4.2
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	22,800	4	4.1, 4.2
2021-2022	22,800	4	4.1, 4.2
2022-2023	16,000	4	4.1, 4.2
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021			
2021-2022			
2022-2023			
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	950,000	4	4.1, 4.2
2021-2022	950,000	4	4.1, 4.2
2022-2023	950,000	4	4.1, 4.2
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021			
2021-2022			
2022-2023			
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	38,000	4	4.1, 4.2
2021-2022	36,500	4	4.1, 4.2
2022-2023	39,000	4	4.1, 4.2
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021			
2021-2022			
2022-2023			
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	1,200,000	4	4.1, 4.2
2021-2022	1,200,000	4	4.1, 4.2
2022-2023	1,200,000	4	4.1, 4.2
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	2,000	4	4.1, 4.2
2021-2022	2,000	4	4.1, 4.2
2022-2023	2,200	4	4.1, 4.2
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021			
2021-2022			
2022-2023			
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	6,000	4	4.1, 4.2
2021-2022	6,000	4	4.1, 4.2
2022-2023	6,000	4	4.1, 4.2
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	55,000	4	4.1, 4.2
2021-2022	55,000	4	4.1, 4.2
2022-2023	27,500	4	4.1, 4.2
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	7,200	4	4.1, 4.2
2021-2022	7,200	4	4.1, 4.2
2022-2023	7,500	4	4.1, 4.2
2023-2024			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	11,000	4	4.1, 4.2
2021-2022	11,000	4	4.1, 4.2
2022-2023	11,000	4	4.1, 4.2
2023-2024			

2. NAPIS Service Category – "Other" Title III Services

- Each **Title IIIB** "Other" service must be an approved NAPIS Program service listed above on the "Schedule of Supportive Services (III B)" page of the Area Plan Budget (CDA 122) and the CDA Service Categories and Data Dictionary.

- Identify **Title IIIB** services to be funded that were not reported in NAPIS categories. (Identify the specific activity under the Other Supportive Service Category on the "Units of Service" line when applicable.)

Title III B, Other Priority and Non-Priority Supportive Services
For all Title IIIB "Other" Supportive Services, use the appropriate Service Category name and Unit of Service (Unit Measure) listed in the CDA Service Categories and Data Dictionary.

- Other **Priority Supportive Services include**: Alzheimer's Day Care, Comprehensive Assessment, Health, Mental Health, Public Information, Residential Repairs/Modifications, Respite Care, Telephone Reassurance, and Visiting

- Other **Non-Priority Supportive Services include**: Cash/Material Aid, Community Education, Disaster Preparedness Materials, Emergency Preparedness, Employment, Housing, Interpretation/Translation, Mobility Management, Peer Counseling, Personal Affairs Assistance, Personal/Home Security, Registry, Senior Center Activities, and Senior Center Staffing

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

Alzheimer's Day Care **Unit of Service = 1 Day of Attendance**

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers
2020-2021	7,500	4	4.1, 4.2
2021-2022	7,500	4	4.1, 4.2
2022-2023	6,000	4	4.1, 4.2
2023-2024			

In-Home Respite **Unit of Service = 1 Hour**

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers
2020-2021	2,200	4	4.1, 4.2
2021-2022	2,800	4	4.1, 4.2
2022-2023	2,500	4	4.1, 4.2
2023-2024			

Registry **Unit of Service = 1 Hour**

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers
2020-2021	9,000	4	4.1, 4.2
2021-2022	7,500	4	4.1, 4.2
2022-2023	5,000	4	4.1, 4.2
2023-2024			

Telephone Reassurance **Unit of Service = 1 Contact**

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers
2020-2021	58,000	4	4.1, 4.2
2021-2022	58,000	4	4.1, 4.2
2022-2023	62,000	4	4.1, 4.2
2023-2024			

Senior Center Activities **Unit of Service = 1 Hour**

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers
2020-2021	75,000	4	4.1, 4.2
2021-2022	75,000	4	4.1, 4.2
2022-2023	40,000	4	4.1, 4.2
2023-2024			

3. Title IIID/ Health Promotion: Evidence-Based

Instructions for Title IIID Health Promotion: Evidence-Based: Enter the name of the proposed program to be implemented, proposed units of service and the Program Goal and Objective number(s) that provide a narrative description of the program and explain how the service activity meets the criteria for evidence-based programs described in PM 15-10 if not ACL approved.

Unit of Service = 1 contact

Service Activities: (1) Chronic Disease Self-Management/Tomando Control de su Salud, (2) Chronic Pain Self-Management, (3) Diabetes Self-Management/Programa de Manejo Personal de la Diabetes, (4) A Matter of Balance/Bingocize, (5) Arthritis Foundation Exercise, (6) Arthritis Foundation Walk with Ease.

- **Title III D/ Health Promotion: Evidence-Based:** 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 (Required)
2020-2021	9,500	1	1.1
2021-2022	9,500	1	1.1
2022-2023	6,800	1	1.1
2023-2024			

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

2020-2024 Four-Year Planning Cycle

As mandated by the Older Americans Act Reauthorization Act of 2016, 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 ensuring their dignity, quality of life, and quality of care.

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

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

Complete all Measures and Targets for Outcomes 1-3;

Outcome 1. The problems and concerns of long-term care residents are solved through complaint resolution and other services of the Ombudsman Program. Older Americans Act Reauthorization Act of 2016, Section 712(a)(3), (5)]

Measures and Targets:

A. Complaint Resolution Rate (NORS Element CD-08) (Complaint Disposition). The average California complaint resolution rate for FY 2017-2018 was 73%.

1. FY 2018-2019 Baseline Resolution Rate: Number of complaints resolved 2,536 + number of partially resolved complaints 723 divided by the total number of complaints received 8,810 = Baseline Resolution Rate 37 % FY 2020-2021 Target Resolution Rate 50 %
2. FY 2019-2020 Baseline Resolution Rate: Number of complaints partially or fully resolved 3197 divided by the total number of complaints received 8784 = Baseline Resolution Rate 36 % FY 2021-2022 Target Resolution Rate 45 %

3. FY 2020 - 2021 Baseline Resolution Rate: Number of complaints partially or fully resolved_____divided by the total number of complaints received_____= Baseline Resolution Rate_____% FY 2022-2023 Target Resolution Rate_____%
4. FY 2021-2022 Baseline Resolution Rate: Number of complaints partially or fully resolved_____divided by the total number of complaints received_____= Baseline Resolution Rate_____% FY 2023-2024 Target Resolution Rate_____
Program Goals and Objective Numbers: **Goal 2. Objective 2.2**

B. Work with Resident Councils (NORS Elements S-64 and S-65)

1. FY 2018-2019 Baseline: Number of Resident Council meetings attended 60 FY 2020-2021 Target: 80
2. FY 2019-2020 Baseline: Number of Resident Council meetings attended 19 FY 2021-2022 Target: 15
3. FY 2020-2021 Baseline: Number of Resident Council meetings attended _____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Resident Council meetings attended _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: **Goal 2. Objective 2.2**

C. Work with Family Councils (NORS Elements S-66 and S-67)

1. FY 2018-2019 Baseline: Number of Family Council meetings attended 0 FY 2020-2021 Target: 3
2. FY 2019-2020 Baseline: Number of Family Council meetings attended 1 FY 2021-2022 Target: 2
3. FY 2020-2021 Baseline: Number of Family Council meetings attended _____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Family Council meetings attended _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: **Goal 2. Objective 2.2**

D. Information and Assistance to Facility Staff (NORS Elements S-53 and S-54) Count of instances of Ombudsman representatives' interactions with facility staff for the purpose of providing general information and assistance unrelated to a complaint. Information and Assistance may be accomplished by telephone, letter, email, fax, or in-person.

1. FY 2018-2019 Baseline: Number of Instances 340 FY 2020-2021 Target: 350
2. FY 2019-2020 Baseline: Number of Instances 2,431 FY 2021-2022 Target: 1,800

3. FY 2020-2021 Baseline: Number of Instances_____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Instances_____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: **Goal 2. Objective 2.2**

E. Information and Assistance to Individuals (NORS Element S-55) 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. Information and Assistance may be accomplished by: telephone, letter, email, fax, or in person.

1. FY 2018-2019 Baseline: Number of Instances 2,056 FY 2020-2021 Target: 2,000
2. FY 2019-2020 Baseline: Number of Instances 2,717 FY 2021-2022 Target: 2,000
3. FY 2020-2021 Baseline: Number of Instances_____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Instances_____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: **Goal 2. Objective 2.2**

F. Community Education (NORS Element S-68) LTC Ombudsman Program participation in public events planned to provide information or instruction to community members aboutthe LTC Ombudsman Program or LTC issues. The number of sessions refers to the number of events, not the number of participants. This cannot include sessions that are counted as Public Education Sessions under the Elder Abuse Prevention Program.

1. FY 2018-2019 Baseline: Number of Sessions 5 FY 2020-2021 Target: 4
2. FY 2019-2020 Baseline: Number of Sessions 18 FY 2021-2022 Target: 6 3. FY 2020-2021 Baseline: Number of Sessions _____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Sessions _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: **Goal 2. Objective 2.2**

G. Systems Advocacy (NORS Elements S-07, S-07.1)

One or more new systems advocacy efforts must be provided for each fiscal year Area Plan Update. In the relevant box below for the current Area Plan year, in narrative format, please provide at least one new priority systems advocacy effort the local LTC Ombudsman Program will engage in during the fiscal year. The systems advocacy effort may be a multi-year initiative,

but for each year, describe the results of the efforts made during the previous year and what specific new steps the local LTC Ombudsman program will be taking during the upcoming year. Progress and goals must be separately entered each year of the four (4) year cycle in the appropriate box below.

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.) Be specific about the actions planned by the local LTC Ombudsman Program.
Enter information in the relevant box below.

FY 2020-2021
FY 2020-2021 Systems Advocacy Effort(s): Work on a legislation to require residential care facilities to give eviction notices in the resident's primary language. Current law does not require this. Identify an author, assist with writing the legislation, provide testimony at hearings if necessary.
FY 2021-2022
Outcome of FY 2020-2021 Efforts: **FY 2021-2022 Systems Advocacy Effort(s):** (Provide one (1) or more new systems advocacy efforts). Work on COVID-19 mitigation, vaccination, and family visitation efforts with LA Public Health, Community Care Licensing, and other partner organizations.
FY 2022-2023
Outcome of FY 2021-2022 Efforts: **FY 2022-2023 Systems Advocacy Effort(s):** (Provide one or more new systems advocacy efforts)
FY 2023-2024
Outcome of 2022-2023 Efforts: **FY 2023-2024 Systems Advocacy Effort(s):** (Provide one or more new systems advocacy efforts)

Outcome 2. Residents have regular access to an Ombudsman. [(Older Americans Act Reauthorization Act of 2016), Section 712(a)(3)(D), (5)(B)(ii)]

Measures and Targets:

A. Routine Access: Nursing Facilities (NORS Element S-58) 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 2018-2019 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 113 divided by the total number of Nursing Facilities 250 = Baseline 4.52% FY 2020-2021 Target: 70%
2. FY 2019-2020 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 0 divided by the total number of Nursing Facilities 245 = Baseline 0 % FY 2021-2022 Target: 75% (Note: Ombudsman not able to visit facilities in 1st Quarter of 2021 due to COVID-19)
3. FY 2020-2021 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint divided by the total number of Nursing Facilities = Baseline_____% FY 2022-2023 Target: %
4. FY 2021-2022 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint divided by the total number of Nursing Facilities = Baseline_____% FY 2023-2024 Target: %
Program Goals and Objective Numbers: **Goal 2. Objective 2.2**

B. Routine access: Residential Care Communities (NORS Element S-61) 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 onceeach quarter not in response to a complaint by the total number of RCFEs in the PSA. NOTE: This is not a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no RCFE can be counted more than once.

1. FY 2018-2019 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint 50 divided by the total number of RCFEs 807 = Baseline 6.2 % FY 2020-2021 Target: 70 %

2. FY 2019-2020 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint 0 divided by the total number of RCFEs 811 = Baseline 0% FY 2021-2022 Target: 30% (Note: Ombudsman may not able to visit facilities in 1st Quarter of 2021 due to COVID-19)
3. FY 2020-2021 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint_____divided by the total number of RCFEs_____= Baseline _____%
4. FY 2021-2022 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint_____divided by the total number of RCFEs_____= Baseline _____%
Program Goals and Objective Numbers: **Goal 2. Objective 2.2**

C. Number of Full-Time Equivalent (FTE) Staff (NORS Element S-23) 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 2018-2019 Baseline:12.59 FTEs FY 2020-2021 Target: 16.7 FTEs
2. FY 2019-2020 Baseline: 23.08 FTEs FY 2021-2022 Target: 22 FTEs
3. FY 2020-2021 Baseline:_____FTEs FY 2022-2023 Target:_____FTEs
4. FY 2021-2022 Baseline:_____FTEs FY 2023-2024 Target:_____FTEs
Program Goals and Objective Numbers: **Goal 2. Objective 2.2**

D. Number of Certified LTC Ombudsman Volunteers (NORS Element S-24)

1. FY 2018-2019 Baseline: Number of certified LTC Ombudsman volunteers 30 FY 2020-2021 Projected Number of certified LTC Ombudsman volunteers 55
2. FY 2019-2020 Baseline: Number of certified LTC Ombudsman volunteers 32 FY 2021-2022 Projected Number of certified LTC Ombudsman volunteers 10

3. FY 2020-2021 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2022-2023 Projected Number of certified LTC Ombudsman volunteers _____
4. FY 2021-2022 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2023-2024 Projected Number of certified LTC Ombudsman volunteers _____
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. [Older Americans Act Reauthorization Act of 2016, Section 712(c)]

Measures and Targets:
In the box below, in narrative format, describe one (1) or more specific efforts your program will undertake in the upcoming year to increase the accuracy, consistency, and timeliness of your National Ombudsman Reporting System (NORS) data reporting.

Some examples could include:

- 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 WISE & Healthy Aging Long-Term Care Ombudsman Program has created a central intake department for all intakes that come into the ombudsman program. This team will help to ensure that there is consistency and accountability in the intake process. All intake staff are trained on NORS date reporting. Regional supervisors will increase the sample of cases reviewed each month to ensure accuracy in data reporting in addition to ensuring that all case management steps have been taken.

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. Activities reported for the Title VII Elder Abuse Prevention Program must be distinct from activities reported for the LTC Ombudsman Program. No activity can be reported for both programs.

AAAs must provide one or more of the service categories below.

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

- **Public Education Sessions** –Indicate the total number of projected education sessions for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.

- **Training Sessions for Professionals** –Indicate the total number of projected training sessions for professionals (service providers, nurses, social workers) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.

- **Training Sessions for Caregivers Served by Title IIIE** –Indicate the total number of projected training sessions for unpaid family caregivers who are receiving services under Title IIIE of the Older Americans Act (OAA) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation. Older Americans Act Reauthorization Act of 2016, Section 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: PSA 19

Fiscal Year	Total # of Public Education Sessions
2020-2021	15
2021-2022	15
2022-2023	
2023-2024	

Fiscal Year	Total # of Training Sessions for Professionals
2020-2021	20
2021-2022	15
2022-2023	
2023-2024	

Fiscal Year	Total # of Training Sessions for Caregivers served by Title IIIE
2020-2021	0
2021-2022	0
2022-2023	
2023-2024	

Fiscal Year	Total # of Hours Spent Developing a Coordinated System
2020-2021	500
2021-2022	700
2022-2023	
2023-2024	

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2020-2021	2,000	Elder Justice Resource Guides, Mandatory Reporting Flow Charts, and other related materials.
2021-2022	2,000	Elder Justice Resource Guides, Mandatory Reporting Flow Charts, and other related materials.
2022-2023		
2023-2024		

Fiscal Year	Total Number of Individuals Served
2020-2021	2,000
2021-2022	2,000
2022-2023	
2023-2024	

TITLE III E SERVICE UNIT PLAN OBJECTIVES

CCR Article 3, Section 7300(d)

2020 – 2024 Four-Year Planning Period

This Service Unit Plan (SUP) uses the five broad federally mandated service categories. Refer to the CDA Service Categories and Data Dictionary Revisions Effective July 2018 for eligible activities and service unit measures. Specify proposed audience size or units of service for ALL budgeted funds.

Direct and/or Contracted III E Services

CATEGORIES	1	2	3
Services to Caregivers of Older Adults	***Proposed* Units of Service**	***Required* Goal #(s)**	***Optional* Objective #(s)**
Information Services	**# of activities and Total est. audience for above**		
2020-2021	# of activities: 4,500 Total est. audience for above: 100,000	3	3.1, 3.2
2021-2022	# of activities: 4,500 Total est. audience for above: 100,000	3	3.1, 3.2
2022-2023	# of activities: 4,500 Total est. audience for above: 100,000	3	3.1, 3.2
2023-2024	# of activities: 4,500 Total est. audience for above: 100,000	3	3.1, 3.2
Access Assistance	**Total contacts**		
2020-2021	18,000	3	3.1, 3.2
2021-2022	18,000	3	3.1, 3.2
2022-2023	12,000	3	3.1, 3.2
2023-2024	18,000	3	3.1, 3.2
Support Services	**Total hours**		
2020-2021	16,500	3	3.1, 3.2

2021-2022	15,000	3	3.1, 3.2
2022-2023	13,000	3	3.1, 3.2
2023-2024			
Respite Care	**Total hours**		
2020-2021	26,000	3	3.1,3.2
2021-2022	24,000	3	3.1, 3.2
2022-2023	20,000	3	3.1, 3.2
2023-2024			
Supplemental Services	**Total occurrences**		
2020-2021	1,200	3	3.1,3.2
2021-2022	1,200	3	3.1, 3.2
2022-2023	1,200	3	3.1, 3.2
2023-2024			

Direct and/or Contracted III E Services

Services to Older Elderly Relative	*Proposed* Units of Service	*Required* Goal #(s)	*Optional* Objective #(s)
Information Services	**# of activities and Total est. audience for above**		
2020-2021	# of activities: 60 Total est. audience for above: 500	3	3.1, 3.2
2021-2022	# of activities: 70 Total est. audience for above: 1,000	3	3.1, 3.2
2022-2023	# of activities: 70 Total est. audience for above: 2800	3	3.1, 3.2
2023-2024			
Access Assistance	**Total contacts**		
2020-2021	2,500	3	3.1,3.2
2021-2022	2,310	3	3.1, 3.2
2022-2023	1,100	3	3.1, 3.2
2023-2024			
Support Services	**Total hours**		
2020-2021	5,000	3	3.1,3.2
2021-2022	4,500	3	3.1, 3.2
2022-2023	1,400	3	3.1, 3.2
2023-2024			
Respite Care	**Total hours**		
2020-2021	350	3	3.1,3.2
2021-2022	320	3	3.1, 3.2
2022-2023	300	3	3.1, 3.2
2023-2024			
Supplemental Services	**Total occurrences**		
2020-2021	15	3	3.1,3.2
2021-2022	15	3	3.1, 3.2
2022-2023	15	3	3.1, 3.2
2023-2024			

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 (2) or more AAAs enter into an agreement with one "Managing AAA," to deliver HICAP services on their behalf to eligible persons in their AAA, then each AAA is responsible for providing HICAP services in the covered PSAs in a way that is agreed upon and equitable among the participating parties.

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

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

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

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

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

- o PM 2.4a Low-income (LIS)
- o PM 2.4b Rural
- o PM 2.4c English Second Language (ESL)

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

AAA's should demonstrate progress toward meeting or improving on the Performance requirements established by CDA and ACL as is displayed annually on the HICAP State and Federal Performance Measures tool located online at:
https://www.aging.ca.gov/ProgramsProviders/AAA/Planning/
(Reference CDA PM 17-11 for further discussion, including current HICAP Performance Measures and Definitions).

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**
2020-2021	300	4
2021-2022	300	4
2022-2023	300	4
2023-2024		

Fiscal Year (FY)	**3.2 Estimated Number of Legal Representation Hours Per FY (Unit of Service)**	**Goal Numbers**
2020-2021	350	4
2021-2022	350	4
2022-2023	350	4
2023-2024		

Fiscal Year (FY)	**3.3 Estimated Number of Program Consultation Hours Per FY (Unit of Service)**	**Goal Numbers**
2020-2021	200	4
2021-2022	200	4
2022-2023	200	4
2023-2024		

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

SECTION 13

PRIORITY SERVICES

SECTION 13: PRIORITY SERVICES

2020-2024 Four-Year Planning Cycle

Funding for Access, In-Home Services, and Legal Assistance

The CCR, Article 3, Section 7312, requires the AAA to allocate an "adequate proportion" of federal funds to provide Access, In-Home Services, and Legal Assistance in the PSA. The annual minimum allocation is determined by the AAA through the planning process. The minimum percentages of applicable Title III B funds[7] listed below have been identified for annual expenditure throughout the four-year planning period. These percentages are based on needs assessment findings, resources available within the PSA, and discussions at public hearings on the Area Plan.

Category of Service and the Percentage of Title III B Funds expended in/or to be expended in FY 2020-21 through FY 2023-2024

Access:

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

2020-21 30% 21-22 30%% 22-23 30% 23-24_____%

In-Home Services:

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

2020-21 17% 21-22 17%% 22-23 10% 23-24_____%

Legal Assistance Required Activities:[8]

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

2020-21 5% 21-22 5% 22-23 5% 23-24_____%

Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA.

The percentages were based on target populations and service needs.

[7] Minimum percentages of applicable funds are calculated on the annual Title III B baseline allocation, minus Title III B administration and minus Ombudsman. At least one percent of the final Title III B calculation must be allocated for each "Priority Service" category or a waiver must be requested for the Priority Service category(s) that the AAA does not intend to fund.

[8] Legal Assistance must include all of the following activities: Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar.

SECTION 16

GOVERNING BOARD

SECTION 16: GOVERNING BOARD

GOVERNING BOARD MEMBERSHIP
2020-2024 Four-Year Area Plan Cycle

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

Total Number of Board Members: 5

Name and Title of Officers:	Office Term Expires:
Holly J. Mitchell – Chair of the Board of Supervisors	December 2024

Names and Titles of All Members:	Board Term Expires:
Hilda L. Solis - 1st District Supervisor	December 2022
Holly J. Mitchell - 2nd District Supervisor	December 2024
Sheila Kuehl - 3rd District Supervisor	December 2022
Janice Hahn - 4th District Supervisor	December 2024
Kathryn Barger - 5th District Supervisor	December 2024

Explain any expiring terms – have they been replaced, renewed, or other?

Members with expiring terms are always replaced on time.

SECTION 17

ADVISORY COUNCIL

SECTION 17: ADVISORY COUNCIL

ADVISORY COUNCIL MEMBERSHIP
2020-2024 Four-Year Planning Cycle
Updated June 28, 2018

Older Americans Act Reauthorization Act of 2016 Section 306(a)(6)(D)
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 26

Race/Ethnic Composition	% of PSA's 60+Population[1]	% on Advisory Council (check percentages)
White	56.7%	40.9%
Hispanic (of any race)	32.1%	22.7%
Black	9.1%	18.2%
Asian/Pacific Islander	19.2%	13.6%
Native American/Alaskan Native	0.2%	0.0%
Other/Two or more races	13.9%	4.5%

[1]Source: American Community Survey 2019: https://api.census.gov/data/2019/acs/acs1/subject

Name and Title of Officers:	Office Term Expires:
Kim M Bowman, President	06.30.2022
VACANT, 1st Vice President	06.30.2022
Kiera Pollock, 2nd Vice President	06.30.2022
Cathy McClure, Secretary	06.30.2022
VACANT, Fiscal Officer	06.30.2022

Name and Title of other members:	Office Term Expires:
Robert Boller	06.30.2024
Louis Dominguez	06.30.2023
Jerry Gaines	06.30.2024

Paul Kyo Jhin	06.30.2024
John Kotick	06.30.2024
Kimberly Lewis	06.30.2024
Barbara Meltzer	06.30.2022
Sheila Moore	06.30.2022
Michael Neely	06.30.2024
Arlene Okamoto	06.30.2023
Teresa Palacios	06.30.2023
Ernie Powell	06.30.2023
Fran Sereseres	06.30.2023
Helen Romero Shaw	06.30.2024
Theodore Smith	06.30.2022
Lavada Theus	06.30.2023
Elvia Torres	06.30.2022
Sandra Tung	06.30.2023
Maria Wiest	06.30.2023

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

	Yes	No
Low Income Representative	☒	☐
Disabled Representative	☒	☐
Supportive Services Provider Representative	☒	☐
Health Care Provider Representative	☒	☐
Family Caregiver Representative	☒	☐
Local Elected Officials	☐	☒
Individuals with Leadership Experience in Private and Voluntary Sectors	☒	☐

Explain any **"No"** answer(s):

Explain any expiring terms – have they been replaced, renewed, or other?
They have been replaced

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

25 Commissioners are appointed by the Board of Supervisors.

SECTION 18

LEGAL ASSISTANCE

SECTION 18: LEGAL ASSISTANCE

2020-2024 Four-Year Area Planning Cycle

This section must be completed and submitted annually. The Older Americans Act Reauthorization Act of 2016 designates legal assistance as a priority service under Title III B [42 USC §3026(a)(2)] [12] CDA developed *California Statewide Guidelines for Legal Assistance* (Guidelines), which are to be used as best practices by CDA, AAAs and LSPs in the contracting and monitoring processes for legal services, and located at: https://aging.ca.gov/Providers_and_Partners/Legal_Services/#pp-gg

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

   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 IIIB funding is allocated to Legal Services? **Discuss: 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). **Yes/No, Discuss:**

   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.

[12] For Information related to Legal Services, contact Chisorom Okwuosa at 916 419-7500 or chisorom.okwuosa@aging.ca.gov

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.

4. Specific to Legal Services, does the AAA's contract/agreement with the Legal Services Provider(s) (LSPs) specify that the LSPs are expected to use the California Statewide Guidelines in the provision of OAA legal services? **Yes/No, Discuss**:

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 Community and Senior Services Program Memoranda/Directives, which includes the California Statewide Guidelines.

5. Does the AAA collaborate with the Legal Services Provider(s) to jointly establish specific priorities issues for legal services? If so, what are the top four (4) priority legal issues in your PSA? **Yes/No, Discuss**:

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 Provider(s) to jointly identify the target population? If so, what is the targeted senior population in your PSA **AND** what mechanism is used for reaching the target population? **Yes/No, Discuss:**

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? **Discuss:**

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
2020-2021	1
2021-2022	1
2022-2023	1
2023-2024	

9. Does your PSA have a hotline for legal services? **Yes/No, Discuss:**

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 Community and Senior Services (CSS) 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
2020-2021	a. Bet Tzedek Legal Services b. c.	a. Los Angeles County b. c.
2021-2022	a. Bet Tzedek Legal Services b. c.	a. Los Angeles County b. c.
2022-2023	a. Bet Tzedek Legal Services b. c.	a. Los Angeles County b. c.
2023-2024	a. b. c.	a. b. c.

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

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, WDACS' website, 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): **Discuss:**

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 survivorsthat 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? **Yes/No, 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. Following the COVID-19 pandemic and the Guidance provided by CDA about OAA funded services under Titles IIIB and IIIE that are usually delivered in-person, Bet Tzedek had also to quickly transition to a remote work model, including switching from in-person client appointments to conducting meetings remotely by telephone or other virtual means. In addition, the legal services provider, Bet Tzedek was unable to rely on partners for referrals as senior centers were closed throughout Los Angeles County.

Overcoming these barriers is a challenge, but efforts are continuously made. Prior to Covid-19 Social Distancing order, Bet Tzedek conducted, home visits to older adults who cannot travel to service sites. However, during the onset of Covid-19 pandemic, Bet Tzedek switch momentum and successfully developed a model of connecting with clients through case managers at the centers by phone and email, as well as reaching out to the community through outreach materials and presentations, and continuing to directly connect with clients for services through remote access. During COVID-19, Bet Tzedek opened two different intake portals (phone/e-mail) and responded to new inquires daily. 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 aiding 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 solder adults and caregivers. Given the current pandemic, the websiteposting of legal services to address caregiver issues, elder and fraud abuse, tax, guardianship, foreclosure matters, etc., became a vital connection to isolated older adults and caregivers. Staff members speak a number of languages and Bet Tzedek draws uponits 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 from 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.