# 2019 Area Plan Update



# <u> Area II – North Central Idaho Area Agency on Aging</u> <u>Community Action Partnership</u>

# CAP Agency Executive Director Lisa Stoddard

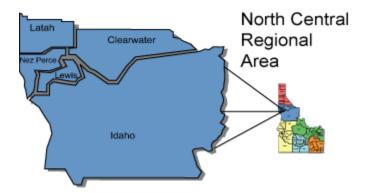
124 New 6th Street Lewiston, ID 83501

Information and Referral Phone Number: 1-208-743-5580 or 1-800-877-3206

Website - <a href="http://www.cap4action.org/PSAgencyOnAging.html">http://www.cap4action.org/PSAgencyOnAging.html</a>

**Counties –** Clearwater, Idaho, Latah, Lewis, Nez Perce

**PSAII** 



#### **Geographic Information:**

The region in PSA II covers 13,403 square miles in five north-central Idaho counties: Lewis, Idaho, Clearwater, Latah, and Nez Perce. PSA II is mostly rural except for the major university cities of Lewiston and Moscow. Students come from all over the nation and several foreign countries to enroll at Lewis-Clark State College or the University of Idaho. Their presence has a strong influence on the character of the metropolitan area.

Beyond urbanized Lewiston, Idaho's only inland port city, the region's five counties present a diverse topography which includes expanses of prairie and farmland as well as rugged mountainous terrain. Isolated communities tucked into the region's mountains and valleys are difficult to reach at any time; during the snowy winters, these tiny settlements are virtually inaccessible.

#### **Demographic Information:**

Based on the 2017 American Community Survey Estimates, the total population in PSA II was 108,520 of which 28,055 (25.9%) individuals were over the age of 60. The at risk populations which factors in Idahoans of 65 + living in poverty, Idahoans of 65 + living alone, Idahoans living in a rural county, racial minorities, Persons 60 + and Hispanic, Idahoans aged 75 and older & also 85 and older is 29,748. The Area Agency on Aging and Adult Services (AAA II) is a department within Community Action Partnership and has its office in Lewiston.

# Focus Area A:

# Older Americans Act (OAA) Core Programs

## **ICOA Goal:** Increase OAA core services by:

- Utilizing financial and operational data to increase services to older individuals and standardizing proven best practices for service delivery throughout the Planning and Service Area.
- Coordinating with health and social service partners to broaden access for long-term care services.

## **Administration**

Funding Source: (Actual expenditures for completed

years and budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	\$0
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	\$0
SFY 2018 (July 2017 – June 2018) Actual	\$37,015	\$52,476	\$89,491
SFY 2019 (July 2018 – June 2019) Actual	\$36,011	\$45,369	\$81,380
SFY 2020 (July 2019 – June 2020) Budget	\$35,710	\$54,040	\$89,750

## **Coordination and Planning**

Funding Source: (Actual expenditures for completed years and

budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	\$0
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	\$0
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$18,876	\$18,876
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$0	\$0
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$15,175	\$15,175

#### **SFY 2019 Planning and Coordination Projects**

#### **SFY19 Progress**

Conduct consumer satisfaction surveys for all AAA services	Move to SFY2020
Assess and refer community resources in urban and rural communities, related to the availability and services for veterans	Move to SFY2020
Conduct, assess and report on gaps in services for Veterans in Area II	Move to SFY2020
Conduct, assess and report on community partner programming to avoid program duplication	Coordinated with Disability Action Center to support their loan closet
Pursue Life span respite and family caregiver PTC classes	Could not identify master trainers. Coordinated with Washington to hold a class in Coeur d'Alene
Review and evaluate the effectiveness and resources of the AAA Disaster Plan and plan for disaster concerns with disaster planners to address (more specifically) the special needs population in the PSA with the Local Emergency Planning Coalition	In progress: worked with the Idaho Inclusive Emergency Coalition to help coordinate services with the disability community.
Establish one new meal site in the PSA	Move to SFY2020

# **1: Transportation Objective:** To utilize best available data and resources from current transportation systems to maximize available services to older individuals.

<u>Service Description:</u> Transportation funds are used for operating expenses only and are designed to transport older persons to and from community facilities and resources for the purpose of applying for and receiving services, reducing isolation, or otherwise promoting independent living. The funds need to be used in conjunction with local transportation service providers, public transportation agencies, and other local government agencies, that result in increased provision. Service is provided to: congregate meal sites, supportive services (health services, programs that promote physical and mental well-being and shopping) community facilities and resources for the purpose of applying for and receiving services, which include comprehensive counseling and legal assistance.

Service Eligibility: Individual 60 years of age or older.

#### **Service Implemented by:**

• COAST Transportation: M-F, 8:00 -4:30, (509) 397-2935;

• Interlink: M-Th 9:00 - 4:00, (509) 751-9143;

Salmon River Transit: M-F, 8:00 - 5:00, (208) 628-2394, and,

• SMART Transit: M-F: 8:00 -5:00, (208) 883-7747.

Funding Source: (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$13,900	\$16,850	\$30,750
SFY 2017 (July 2016 – June 2017) Actual	\$29,089	\$22,592	\$51,681
SFY 2018 (July 2017 – June 2018) Actual	\$46,907	\$1,834	\$48,741
SFY 2019 (July 2018 – June 2019) Actual	\$22,195	\$17,845	\$40,040
SFY 2020 (July 2019 – June 2020) Budget	\$18,214	\$13,321	\$31,535

A. <u>Transportation Service Delivery Strategy:</u> Identify best practices in conjunction with local transportation service providers, public transportation agencies and/or private, not-for-profit community organizations that result in an increase in service provision in North-central Idaho.

#### **Performance Measure:**

- Effectiveness = Number of boardings.
- Quality = Consumer satisfaction (use ACL's POMP-Performance Outcome Management Project).

#### **Baseline:**

State Fiscal Year (SFY)	Annual Boardings	Average Cost per Boarding	Consumer Satisfaction %
SFY 2016 (July 2015 – June 2016) Actual	4,416	\$6.96	N/A
SFY 2017 (July 2016 – June 2017) Actual	7,383	\$7.00	95.83%
SFY 2018 (July 2017 – June 2018) Actual	6,963	\$7.00	N/A
SFY 2019 (July 2018 – June 2019) Actual	4,251	\$9.42	N/A
SFY 2020 (July 2019 – June 2020)			N/A

#### Benchmark:

- Increase the number of boardings by 2% annually.
- Identify 2 new transportation providers with emphasis in underserved communities.
- Maintain consumer satisfaction at 75% or higher.
- **B.** <u>Transportation Coordination Strategy:</u> Collaborate with the Metropolitan Planning Organization (MPO) and transportation provider network to improve access to senior transportation information and resources.

#### **Performance Measure:** Senior transportation provider resources in each county.

#### **Baseline:**

<u>County</u>	Current Senior	Available Transportation Referral Resources
	Transportation Provider	
Clearwater	COAST	Appaloosa Express, Blue Mountain Action Council, VEYO
Idaho	Salmon River Seniors	Prairie Transportation, COAST, Blue Mountain Action Council, VEYO
Latah	SMART Transit, COAST	VEYO
Lewis		Appaloosa Express, VEYO, Blue Mountain Action Council
Nez Perce	Interlink, COAST	Lewiston Transit, Dial-a-Ride, VEYO, Blue Mountain Action Council,
		Appaloosa Express

Benchmark: Identify additional senior and disabled transportation provider resources.

#### 2: Outreach Objective: To target outreach efforts that increase OAA core services.

Service Description: Outreach funds are used to seek out older persons, identify their service needs, and provide them with information and assistance to link them with appropriate services. Outreach efforts must emphasize the following: (i) older individuals residing in rural areas. (ii)&(iii) older individuals with greatest economic and social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas). (iv) older individuals with severe disabilities; (v) older individuals with limited English-speaking ability; (vi) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals).

**Service Eligibility:** General public needing long-term care services and supports.

#### Service Implemented by:

Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

#### Funding Source: (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$0	\$0
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$8,327	\$8,327
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$5,963	\$5,963
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$1,118	\$1,118
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$2,031	\$2,031

- A. Outreach Service Delivery Strategy: Identify best practice through tracking core performance data for each OAA Core service prior to and for a period after outreach events to see if outreach was successful. Each outreach activity should emphasis reaching the six target areas:
  - 1. Seniors residing in rural areas
  - 2. Greatest economic need
  - 3. Greatest social need
  - 4. Seniors with limited English ability
  - 5. Seniors with severe disabilities
  - 6. Seniors with Alzheimer's disease and related disorders

Performance Measure: Outreach units for each OAA service.

#### Baseline:

State Fiscal Year (SFY)	One-to-one Contacts
SFY 2016 (July 2015 - June 2016) Actual	5,341
SFY 2017 (July 2016 - June 2017) Actual	41
SFY 2018 (July 2017 - June 2018) Actual	15
SFY 2019 (July 2018 - June 2019) Actual	0
SFY 2020 (July 2019 - June 2020)	

<u>Benchmark:</u> Target outreach to specific services based on performance data. Outreach efforts must show a direct impact to the targeted service.

**B.** Outreach Coordination Strategy: The AAA will coordinate efforts with health care providers to increase "access to" and "participation in" OAA core services, specifically focusing on increasing participation in homemaker, home delivered meals, and national family caregiver support program through direct referrals from hospital and clinic discharge planners.

**Performance Measure:** The number of referrals received from health care providers.

<u>Baseline:</u> Creating partnerships with healthcare providers to increase number of referrals to homemaker, home delivered meals, and national family caregiver support programs.

State Fiscal Year (SFY)	<u>Homemaker</u>	HDM Referrals	NFCSP Referrals	
	<u>Referrals</u>			
SFY 2016 (July 2015 – June 2016)	N/A	N/A	N/A	
SFY 2017 (July 2016 – June 2017)	36	48	6	
SFY 2018 (July 2017 – June 2018)	29	90	9	
SFY 2019 (July 2018 – June 2019)	0	124	0	
SFY 2020 (July 2019 – June 2020)				

**Benchmark:** Increase the number of referrals received from health care providers following outreach efforts.

**3: Information and Assistance (I&A) Objective:** To provide older individuals with statewide access to comprehensive long-term care resource assistance and OAA core service eligibility determination in coordination with Aging and Disability Resource Center (ADRC) partners.

<u>Service Description:</u> Information and assistance (I&A) funds are used to: (1) Provide older individuals with current information on long-term care supports, services and opportunities available within their communities, including information relating to assistive technology; (2) Assess older individual's problems and capacities; (3) Link older individuals to long-term care supports, services and opportunities that are available; (4) To the maximum extent practicable, ensure that older individuals receive needed services, and are aware of available opportunities by establishing follow-up procedures; and (5) Serve the entire community of older individuals, particularly: (i) Older individuals with the greatest social need; (ii) Older individuals with the greatest economic need; and (iii) Older individuals at risk for institutional placement.

**Service Eligibility:** General public needing long-term care services and supports.

#### Service Implemented by:

Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

Funding Source: (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$31,964	\$31,964
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$37,775	\$37,775
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$42,423	\$42,423
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$44,315	\$44,315
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$33,315	\$33,315

**<u>A.</u> <u>I&A Service Delivery Strategy:</u>** Expand I&A contacts to increase cost effectiveness.

#### **Performance Measure:**

- Efficiencies = Cost per contact, average contact per Full Time Equivalent/I&A staff.
- Effectiveness = Total contacts, total costs.

#### Baseline:

State Fiscal Year (SFY)	Total Annual Contacts	Average Cost per Contact	Allocated Number of I&A Staff	Average Monthly Contact per I&A Staff
SFY 2016 (July 2015 – June 2016) Actual	1,852	\$17.26	0.52	154
SFY 2017 (July 2016 – June 2017) Actual	2,139	\$17.66	0.62	178
SFY 2018 (July 2017 – June 2018) Actual	1,289	\$32.91	0.61	107
SFY 2019 (July 2018 – June 2019) Actual	1,857	\$23.86	0.57	155
SFY 2020 (July 2019 – June 2020)				

Benchmark: Increase the number of I&A contacts by 10% each year.

**B. I&A Coordination Strategy:** Coordinate with identified focal points in each county in Region 2, to increase public awareness of AAA services by distributing literature to increase awareness of I&A services.

<u>Performance Measure:</u> The number of community partners identified as focal points.

#### Baseline:

State Fiscal	SFY 2016 (July	SFY 2017 (July	SFY 2018 (July	SFY 2019 (July	SFY 2020 (July
Year (SFY)	2015 – June	2016 – June	2017 – June 2018)	2018 – June 2019)	2019 – June
	2016) Focal	2017) Focal	Focal Points	Focal Points	2020) Focal
	Points	Points			Points
Clearwater	4	5	5	N/A	
<u>Idaho</u>	4	6	5	N/A	
<u>Latah</u>	4	7	5	N/A	
<u>Lewis</u>	0	3	2	N/A	
<u>Nez Perce</u>	16	15	15	N/A	

**Benchmark:** Establish community partners and focal points to increase awareness and referrals to I&A services.

**4: Case Management Objective:** To provide statewide access to Case Management service for older individuals who need an optimum package of long-term care services.

<u>Service Description:</u>: Case Management funds are used for eligible older individuals and disabled adults, at the direction of the older individual or a family member of the older individual, to assess the needs of the person and to arrange, coordinate, and monitor an optimum package of services to meet those needs. Activities of case management

include: comprehensive assessment of the older individual; development and implementation of a service plan with the individual to mobilize formal and informal resources and services; coordination and monitoring of formal and informal service delivery; and periodic reassessment.

Service Eligibility: Individuals 60 years of age or older who cannot manage services on their own.

#### Service Implemented by:

Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

**Funding Source:** (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$10,892	\$0	\$10,892
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$0	\$0
SFY 2018 (July 2017 – June 2018) Actual	\$99	\$0	\$99
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$0	\$0
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$0	\$0

<u>A.</u> <u>Case Management Service Delivery Strategy:</u> Utilize AAA staff for those cased where no other Case Management service is available and an individual is unable to manage multiple services for his or her self. If Case Management is needed, cost and corresponding units of service will be accounted for under Case Management.

#### **Performance Measure:**

- Efficiencies = Cost per consumer, average cost per unit.
- Effectiveness = Total consumers, total costs, total unit hours.

#### **Baseline:**

State Fiscal Year (SFY)	<u>Total</u> <u>Unduplicated</u>	Average Cost per	<u>Total</u> <u>Annual</u>	Average cost per
	Clients Served	<u>Client</u>	Units (hrs.)	<u>Unit (hr.)</u>
SFY 2016 (July 2015 – June 2016) Actual	Not Available	Not	Not	Not
3F1 2010 (July 2013 – Julie 2010) Actual	NOT Available	Available	Available	Available
SFY 2017 (July 2016 – June 2017) Actual	Not Applicable	Not	Not	Not
3F1 2017 (July 2016 – Julie 2017) Actual	Not Applicable	Applicable	Applicable	Applicable
SFY 2018 (July 2017 – June 2018) Actual	Not Applicable	Not	Not	Not
3F1 2018 (July 2017 – Julie 2018) Actual	Not Applicable	Applicable	Applicable	Applicable
SFY 2019 (July 2018 – June 2019) Actual	Not Applicable	Not	Not	Not
3F1 2019 (July 2016 – Julie 2019) Actual	Not Applicable	Applicable	Applicable	Applicable
SFY 2020 (July 2019 – June 2020)				

**Benchmark:** Account for Case Management costs and units provided by the AAA.

B. Case Management Coordination Strategy: Coordinate a standardized referral protocol between case management providers who serve the following: dual eligible (care coordinators); veterans (veterans service officer); health and welfare (IDHW navigators); facility residents (discharge planners); people with disabilities (independent living specialists); identified person centered medical home consumers (case manager), and seniors who are unable to manage multiple services (AAA).

**<u>Performance Measure:</u>** Standardized MOU that includes case management protocols.

#### **Baseline:**

Case Management Focus Area	<u>Agency</u>	SFY 2019: Protocol in Place
Dual Eligible	Blue Cross True Blue	No
Veterans	Veterans Service Officer	No
Health and Welfare	Idaho Department of Health Welfare	No
Facility Residents	Idaho Home Choice	No
People with Disabilities	Disability Action Center	No
Identified PCMH consumers	Catalyst Medical Group/St. Mary's/CHAS	No

#### Benchmark:

Each year increase case management referral protocols.

**5: Homemaker Objective:** To provide statewide access to Homemaker services for eligible individuals.

<u>Service Description:</u> Homemaker funds are used to assist an eligible person with housekeeping, meal planning and preparation, essential shopping and personal errands, banking and bill paying, medication management, and, with restrictions, bathing and washing hair.

**Service Eligibility:** Seniors 60 years of age or older and meets any of the following requirements:

- a. They have been assessed to have Activities of Daily Living (ADL) deficits, and/or Instruments of Activities of Daily Living (IADL) deficits, which prevent them from maintaining a clean and safe home environment.
- b. Clients aged 60 years or older, who have been assessed to need homemaker service, may be living in the household of a family member (of any age) who is the primary caregiver.
- c. They are Adult Protection referrals and homemaker service is being requested as a component of a Supportive Service Plan (SSP) to remediate or resolve an adult protection complaint.
- d. They are home health service or hospice clients who may be eligible for emergency homemaker service.

#### Service Implemented by:

Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

**Funding Source:** (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$83,082	\$0	\$83,082
SFY 2017 (July 2016 – June 2017) Actual	\$116,482	\$0	\$116,482
SFY 2018 (July 2017 – June 2018) Actual	\$127,182	\$0	\$127,182
SFY 2019 (July 2018 – June 2019) Actual	\$70,976	\$0	\$70,976
SFY 2020 (July 2019 – June 2020) Budget	\$102,442	\$0	\$102,442

<u>Cost Share:</u> Both federal and state funds are eligible; however different requirements apply: If only federal funds are used, the AAA must use individual income when determining cost-share and participants cannot be terminated for refusal to pay. If only using state funds, the AAA must use household income when determining cost-share and person can be terminated for refusal to pay. If a combination of federal and state funds is used, the AAA follows federal requirements.

<u>A.</u> <u>Homemaker Service Delivery Strategy:</u> Standardize Homemaker services by utilizing data that shows the efficiency, effectiveness and quality.

#### **Performance Measure:**

- Efficiencies = Cost per consumer, average units per consumer.
- Effectiveness = Total consumers, total unit hours, total costs, and registered consumers by at risk factor.
- Quality= Consumer Satisfaction

#### Baseline:

State Fiscal Year (SFY)	<u>Total</u> <u>Unduplicated</u> <u>Clients Served</u>	Total Annual Units (hrs.)	Average cost per Unit (hr.)	Annual Units (hrs.) per Client	Annual Expense per Client
SFY 2016 (July 2015 – June 2016) Actual	133	5,526	\$15.03	42	\$625
SFY 2017 (July 2016 – June 2017) Actual	160	7,353	\$15.84	46	\$728
SFY 2018 (July 2017 – June 2018) Actual	175	8,519	\$14.93	49	\$727
SFY 2019 (July 2018 – June 2019) Actual	161	4,618	\$15.37	29	\$441
SFY 2020 (July 2019 – June 2020)					

#### **Demographic Baseline:**

Homemaker State Fiscal Year	Census Data: % of Population Living in	% of Registered	Census Data: % of Population in	% of Registered Consumers with	Census Data: <u>% of</u>	% of Registered
(SFY)	Rural Areas	<u>Consumers</u>	*Greatest	<u>Greatest</u>	Population in	<u>Consumers</u>
		living in Rural	Economic Need	Economic Need	**Greatest	with Greatest
		<u>Areas</u>			Social Need	Social Need
SFY 2016 (July 2015	9,179/25,245 = 36%	129/346 = 37%	1,487/25,245=	242/346 = 70%	5,061/25,245 =	219/346 =
– June 2016)			5.89%		20.05%	63%
SFY 2017 (July 2016	9,179/25,245 = 36%	159/384 = 41%	1,487/25,245=	274/384 = 71%	5,061/25,245 =	249/384 =
– June 2017)			5.89%		20.05%	65%
SFY 2018 (July 2017	9,179/25,245 = 36%	114/265 = 43%	1,487/25,245=	185/265 = 70%	5,061/25,245 =	196/265 =
– June 2018)			5.89%		20.05%	74%
SFY 2019 (July 2018	9,832/27,459 = 36%	65/161 = 40%	1,622/27,459 =	94/161 = 58%	4,926/27,459 =	112/161 =
– June 2019)			6%		18%	70%
SFY 2020 (July 2019						
– June 2020)						

<sup>\*</sup>Greatest Economic Need: 65 or older living in Poverty

#### Benchmark:

- Maintain a standardized number of units per consumer.
- Increase the number of total consumers by 5% per year.
- Maintain consumer satisfaction scores above 80%.
- **B.** Homemaker Coordination Strategy: Coordinate with ICOA to establish standardized service units. Utilize targeted outreach efforts to health care communities to increase effectiveness.

<u>Performance Measure:</u> Average units per consumer, number of consumers with emphasis on at risk populations.

#### Baseline:

State Fiscal Year (SFY)	Developed Average Units	Registered Consumers living in Poverty	Registered Consumers Living Alone	Registered Consumers Living in Rural Counties	Registered Consumers who are Minorities	Registered Consumers over 75
SFY 2016 (July 2015 – June 2016)	N/A	242	219	129	15	272
SFY 2017 (July 2016 – June 2017)	N/A	274	249	159	15	287
SFY 2018 (July 2017 – June 2018)	N/A	185	196	114	6	167
SFY 2019 (July 2018 – June 2019)	N/A	144	169	106	6	160
SFY 2020 (July 2019 – June 2020)						

#### Benchmark:

- Implement ICOA approved service units.
- Ensure at risk populations continue to be served based on population demographics.

<sup>\*\*</sup>Greatest Social Need: 65 or older living alone

#### **6: Chore Objective:** To expand chore services statewide.

<u>Service Description:</u> Chore funds are used to improve the client's or older individual's safety at home or to enhance the client's use of existing facilities in the home. These objectives shall be accomplished through one-time or intermittent service to the client. Providing assistance with routine yard work, sidewalk maintenance, heavy cleaning, or minor household maintenance to persons who have functional limitations that prohibit them from performing these tasks.

Service Eligibility: Seniors 60 years of age or older.

#### Service Implemented by:

- Interlink; 509-751-4193; 817 6<sup>th</sup> St. Clarkston, WA 99403; Monday-Thursday 8am-5pm
- Palouse Habitat for Humanity; 208-882-5246; 304 North Main St. Moscow, ID 83843 Tuesday-Saturday 9am-5pm
- LC Crew; 208-818-4846; 850 Main St. Lewiston, ID 83501 Monday-Friday 8am-5pm

<u>Funding Source:</u> (Actual expenditures for completed year and Budget for current year) Note, if AAA only refers consumers to other organization and does not fund this service, place N/A (Not Applicable) in SFY16 and SFY17 below.

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	N/A
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	N/A
SFY 2018 (July 2017 – June 2018) Actual	N/A	N/A	N/A
SFY 2019 (July 2018 – June 2019) Actual	N/A	N/A	N/A
SFY 2020 (July 2019 – June 2020) Budget	N/A	N/A	N/A

<u>Cost Share:</u> Both federal and state funds are eligible; however different requirements apply: If only federal funds are used, the AAA must use individual income when determining cost-share and participants cannot be terminated for refusal to pay. If only using state funds, the AAA must use household income when determining cost-share and person can be terminated for refusal to pay. If a combination of federal and state funds is used, the AAA follows federal requirements.

**<u>A.</u>** Chore Service Delivery Strategy: Expand Chore through community referrals.

**Performance Measure:** The number of referrals to volunteer based chore organizations.

#### **Baseline:**

State Fiscal Year (SFY)	Referral or	<u>Total</u>	Total Annual	Average Cost
	Contracted	<u>Unduplicated</u>	Units (hrs.)	per Unit (hr.)
	<u>Service</u>	Clients Served		and materials
SFY 2016 (July 2015 – June 2016) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2017 (July 2016 – June 2017) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2018 (July 2017 – June 2018) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2019 (July 2018 – June 2019) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2020 (July 2019 – June 2020)	Referral	Not Applicable	Not Applicable	Not Applicable

**Benchmark:** Increase the number of referrals by 5%.

**B.** Chore Coordination Strategy: Coordinate with community partners to meet the need of chore services through volunteer groups.

**<u>Performance Measure:</u>** The number of identified volunteer based chore providers.

#### **Baseline:** Current partners:

- Interlink
- Palouse Habitat for Humanity
- LC Crew

**Benchmark:** Increase the number of volunteer chore providers by 1 annually.

#### 7: Minor Home Modification Objective: Expand minor home modification statewide.

<u>Service Description:</u> Minor home modification funds are used to facilitate the ability of older individuals to remain at home where funding is not available under another program. Not more than \$150 per client may be expended under this part for such modification. Types of modification: bathroom grab bars, handrails for outdoor steps, materials to help build wheelchair ramps, etc.

Service Eligibility: Seniors 60 years of age or older.

#### Service Implemented by:

- USDA; 208-762-4939; 7830 Meadowlark Way, Suite C3 Coeur d'Alene, ID Monday-Friday 8am-5pm
- Habitat for Humanity (Lewiston/Clarkston) 509-758-7396; 1242 Highland Ave. Clarkston, WA 99403 Monday-Friday 8am-5pm
- Disability Action Center; 800-475-0070; 330 5<sup>th</sup> St. Lewiston, ID Monday-Friday 8:30am-4:30pm

<u>Funding Source:</u> (Actual expenditures for completed year and Budget for current year) Note, if AAA only refers consumers to other organization and does not fund this service, place N/A (Not Applicable) in SFY16 and SFY17 below.

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	N/A
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	N/A
SFY 2018 (July 2017 – June 2018) Actual	N/A	N/A	N/A
SFY 2019 (July 2018 – June 2019) Actual	N/A	N/A	N/A
SFY 2020 (July 2019 – June 2020) Budget	N/A	N/A	N/A

<u>Cost Share:</u> Both federal and state funds are eligible; however different requirements apply: If only federal funds are used, the AAA must use individual income when determining cost-share and participants cannot be terminated for refusal to pay. If only using state funds, the AAA must use household income when determining cost-share and person can be terminated for refusal to pay. If a combination of federal and state funds is used, the AAA follows federal requirements.

<u>A.</u> <u>Minor Home Modification Service Delivery Strategy:</u> Expand Minor Home Modifications through community referrals.

**<u>Performance Measure:</u>** The number of referrals to minor home modification organizations.

#### **Baseline:**

State Fiscal Year (SFY)	Referral or <u>Total</u>		Total Annual	Average Cost
	Contracted	<u>Unduplicated</u>	Units (hrs.)	per Unit (hr.)
	<u>Service</u>	Clients Served		and materials
SFY 2016 (July 2015 – June 2016) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2017 (July 2016 – June 2017) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2018 (July 2017 – June 2018) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2019 (July 2018 – June 2019) Budgeted	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2020 (July 2019 – June 2020)	Referral	Not Applicable	Not Applicable	Not Applicable

**Benchmark:** Increase the number of referrals by 5%.

**B.** Minor Home Modification Coordination Strategy: Coordinate with community partners to meet the need of minor home modifications.

**<u>Performance Measure:</u>** The number of identified minor home modification providers.

#### **Baseline:**

- USDA
- Habitat for Humanity
- Disability Action Center

**Benchmark:** Increase the number of minor home modification providers by 1 annually.

#### 8: Legal Assistance Objective: Provide access to legal information resources and legal assistance to priority services.

<u>Service Description:</u> Legal Assistance funds are used for the following priority of legal issues related to: income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse or neglect, and age discrimination.

Service Eligibility: Seniors 60 years of age or older.

Service Implemented by: Idaho Legal Aid Services Inc. Mon-Fri 8:30am-5:00pm (208)743-1556

**<u>Funding Source:</u>** (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$4,739	\$4,739
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$3,815	\$3,815
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$3,990	\$3,990
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$3,010	\$3,010
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$3,010	\$3,010

**A.** Legal Assistance Service Delivery Strategy: Track reported cases and analyze service delivery to maximize access to legal services.

<u>Performance Measure:</u> Effectiveness = Number of cases, number of hours and total costs.

Older Americans Act Service Priority	SFY16 Cases	SFY17Cases	SFY18 Cases	SFY19 Cases	SFY20 Cases
Income	3	4	6	1	
Health Care	7	3	4		
Long-term care	3	6	4	4	
Nutrition					
Housing			6	4	
Utilities					
Protective Services			1		
Defense of Guardianship		1			
Abuse					
Neglect					
Age Discrimination					
Total	13	14	21	9	
Older Americans Act Service Priority	SFY16 Hours	SFY17 Hours	SFY18 Hours	SFY19 Hours	SFY20 Hours
Income	12	21.7	12.3	56.7	

Health Care	3.6	5.7	9.3		
Long-term care	13.2	13.5	9.5	28.8	
Nutrition	0				
Housing	37.4	10.2	25	116.6	
Utilities	0				
Protective Services	1.5	3.4	0.9		
Defense of Guardianship	0				
Abuse	0				
Neglect	0				
Age Discrimination	0				
Total	67.7	54.5	57	202.1	

#### **Benchmark:**

- Analyze billed service categories for service delivery compliance.
- **B.** Legal Assistance Coordination Strategy: Collaborate with Idaho Legal Aid to promote hotline usage.

<u>Performance Measure:</u> Number of calls to the Idaho Senior Legal Hotline.

#### **Baseline:**

	State Fiscal Year (SFY)	Number of Calls to Senior
		<u>Legal Hotline</u>
	SFY 2016 (July 2015 – June 2016) Actual	110
	SFY 2017 (July 2016 – June 2017) Actual	71
	SFY 2018 (July 2017 – June 2018) Actual	N/A
	SFY 2019 (July 2018 – June 2019) Actual	N/A
ľ	SFY 2020 (July 2019 – June 2020)	

Benchmark: Increase utilization of the Idaho Senior Legal Hotline by 3% annually.

#### 9: Congregate Meals Objective: Increase participation at meal sites to reduce isolation and increase socialization.

<u>Service Description:</u> Congregate Meal program funds are used to prepare and serve meals in a congregate setting (mostly at Senior Centers), which provide older persons with assistance in maintaining a well-balanced diet, including diet counseling and nutrition education. The purpose of the program is to reduce hunger and food insecurity, promote socialization and the health and well-being of older individuals in Idaho. This service assists seniors to gain access to nutrition and other disease prevention and health promotion services to delay the onset of adverse health conditions resulting from poor nutritional health or sedentary behavior.

<u>Service Eligibility:</u> Seniors 60 years of age or older. Additional eligibility: An adult under 60, whose spouse is 60 or older and receives a meal <u>(must attend together)</u>, Person with a disability under 60 living in the home with a person 60 or older <u>(must attend together)</u>, Person under 60 providing volunteer services during the meal hours.

#### **Service Implemented by:**

- Cottonwood Meal Site Tues. Noon (208)962-3231
- Grangeville Meal Site Mon., Fri. Noon (208)983-2033
- Kamiah Meal Site Mon., Wed., Fri. Noon (208)935-0244
- Kendrick Meal Site Mon., Wed., Fri. Noon (208)289-5031
- Lewiston Meal Site Mon., Tues., Wed. Noon (208)743-6983
- Lewiston Orchards Meal Site Mon., Tues., Wed. Noon (208)743-9201

- Moscow Meal Site Tues., Thurs. Noon (208)882-1562
- Nezperce Meal Site Mon., Thurs. Noon (208)937-2465
- Orofino Meal Site Tues., Fri. Noon (208)476-4238
- Potlatch Meal Site Tues., Fri. Noon (208)875-1071
- Riggins Meal Site Tues. Noon (208)628-4147
- Weippe Meal Site Mon., Thurs. Noon (208)435-4553
- Winchester Meal Site Wed. Noon (208)924-6581

Funding Source: (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$15,384	\$160,002	\$175,386
SFY 2017 (July 2016 – June 2017) Actual	\$25,883	\$127,812	\$153,695
SFY 2018 (July 2017 – June 2018) Actual	\$25,883	\$133,826	\$159,709
SFY 2019 (July 2018 – June 2019) Actual	\$44,764	\$131,844	\$176,608
SFY 2020 (July 2019 – June 2020) Budget	\$21,083	\$181,196	\$202,279

<u>A.</u> <u>Congregate Meal Service Delivery Strategy:</u> Enhance senior participation by increasing participation at meal sites, expanding service provision at existing sites and/or establishing new meal sites to meet needs in identified underserved communities.

#### **Performance Measure:**

- Efficiencies = Average cost per meal, current AAA reimbursement, average consumer contribution, average other contribution.
- Effectiveness = Total consumers, total meals, to visitor meals, and total eligible meals.
- Quality = Consumer satisfaction (ACL's POMP (Performance Outcome Management Project).

#### **Baseline:**

State Fiscal Year (SFY)	Total Unduplicated Clients Served	Total Congregate Meals	*Average cost per Congregate Meal	AAA Contracted Meal Reimbursement Rate	<u>Consumer</u> <u>Satisfaction</u>
SFY 2016 (July 2015 – June 2016) Actual	1,672	53,804	\$3.26	\$3.07	71%
SFY 2017 (July 2016 – June 2017) Actual	1,714	49,813	\$3.09	\$3.07	94%
SFY 2018 (July 2017 – June 2018) Actual	1,682	47,939	\$3.33	\$3.15	N/A
SFY 2019 (July 2018 – June 2019) Actual	1,653	48,409	\$3.65	\$3.65	N/A
SFY 2020 (July 2019 – June 2020)					

#### \*Cost includes AAA wages, nutritionist and provider reimbursement.

#### Benchmark:

- Increase meal sites by 1 in PSA II.
- Maintain consumer satisfaction at 70% or higher.
- Increase number of participants at congregate meal site by 2%.
- Increase number of meals served at meal sites by 2%.
- **B.** Congregate Meal Coordination Strategy: Coordinate with meal sites to determine barriers to participation.

  Conduct meal site cost analyses to ensure site efficiency. Conduct town meetings in Communities not currently being served to educate about the benefit of senior nutrition and establishing a senior nutrition site.

#### **Performance Measure:**

- Number of town meetings.
- Consumer participation per meal site.
- Average meal site cost per meal.

# Baseline:

## SFY 2016 Number of town meetings: 0

Meal Site/County	Number of	Number of Registered	Average meal Site
	<u>Meals</u>	<u>Consumers</u>	Cost Per Meal
Cottonwood/Idaho	2,366	124	N/A
Grangeville/Idaho	6,886	274	N/A
Kamiah/Lewis	4,405	130	N/A
Kendrick/Latah	3,469	107	N/A
Lewiston/Nez Perce	11,399	363	N/A
Moscow/Latah	5,953	245	N/A
Nezperce/Lewis	2,642	93	N/A
Orofino/Clearwater	4,980	151	N/A
Potlatch/Latah	3,701	96	N/A
Riggins/Idaho	2,087	84	N/A
Weippe/Clearwater	4,023	91	N/A
Winchester /Lewis	1,893	104	N/A

# SFY 2017 Number of town meetings: 1

Meal Site/County	Number of	Number of Registered	Average Cost Per
	<u>Meals</u>	<u>Consumers</u>	<u>Meal</u>
Cottonwood/Idaho	2,701	153	7.32
Grangeville/Idaho	6,977	295	6.32
Kamiah/Lewis	4,702	138	Not available
Kendrick/Latah	3,156	119	6.73
Lewiston/Nez Perce	8,920	288	8.47
Moscow/Latah	5,777	263	7.02
Nezperce/Lewis	2,193	111	8.75
Orofino/Clearwater	5,393	196	4.58
Potlatch/Latah	3,452	116	8.02
Riggins/Idaho	1,596	91	5.90
Weippe/Clearwater	1,887	81	Not available
Winchester /Lewis	1,783	101	10.69

# SFY 2018 Number of town meetings: 1

Meal Site/County	Number of Meals	Number of Registered Consumers	Average Cost Per Meal
Cottonwood/Idaho	2,856	142	6.18
Grangeville/Idaho	8,512	312	6.92
Kamiah/Lewis	4,633	155	5.98
Kendrick/Latah	2,178	109	11.98
Lewiston/Nez Perce	8,293	347	12.45
Moscow/Latah	5,464	216	9.35
Nezperce/Lewis	1,848	108	11.50
Orofino/Clearwater	4,951	163	13.09
Potlatch/Latah	3,804	108	8.83
Riggins/Idaho	1,670	84	5.74
Weippe/Clearwater	2,031	64	25.20
Winchester /Lewis	1,699	111	9.95

# SFY 2019 Number of town meetings: N/A

Meal Site/County	Number of Meals	Number of Registered Consumers	Average Cost Per Meal
Cottonwood/Idaho	2,726	220	\$12.39
Grangeville/Idaho	9,566	486	\$19.68
Kamiah/Lewis	5,401	227	\$23.79
Kendrick/Latah	2,274	159	\$14.30
Lewiston/Nez Perce	8,142	598	\$13.61
Moscow/Latah	5,176	412	\$12.56
Nezperce/Lewis	2,344	167	\$14.03
Orofino/Clearwater	4,913	264	\$18.60
Potlatch/Latah	4,520	163	\$27.73
Riggins/Idaho	1,687	105	\$16.06
Weippe/Clearwater	2,304	126	\$18.28
Winchester /Lewis	1,476	150	\$9.94

#### Benchmark:

- Conduct 3 town meetings in SFY 2018.
- Increase consumer participation per meal site by 5%.
- Monitor average cost per meal to establish a standardized reimbursement rate.

**10: Home Delivered Meals Objective:** To utilize best available resources to identify potential consumers or older individuals who could benefit from the program.

<u>Service Description:</u> Home Delivered Meal funds are used to provide meals five or more days a week (except in a rural area where such frequency is not feasible) and at least one meal per day, which may consist of hot, cold, frozen, dried, canned, fresh, or supplemental foods and any additional meals that the recipient of a grant or contract under this subpart elects to provide.

<u>Service Eligibility:</u> Seniors 60 years of age or older. Additional Requirements: (a) Persons age 60 or over who are frail, homebound by reason of illness or incapacitating disability, or otherwise isolated, shall be given priority in the delivery of services under this part. (b) The spouse of the older person, regardless of age or condition, may receive a home delivered meal if, according to criteria determined by the area agency, receipt of the meal is in the best interest of the homebound older person. Also, a client's eligibility to receive home delivered meals shall be based upon the degree to which Activities of Daily Living (ADLs)/Instrumental Activities of Daily Living (IADLs) limit ability to independently prepare meals.

#### Service Implemented by:

Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

Funding Source: (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$85,191	\$65,452	\$150,643
SFY 2017 (July 2016 – June 2017) Actual	\$50,672	\$131,150	\$181,822
SFY 2018 (July 2017 – June 2018) Actual	\$49,664	\$172,555	\$222,219
SFY 2019 (July 2018 – June 2019) Actual	\$76,759	\$159,855	\$236,614
SFY 2020 (July 2019 – June 2020) Budget	\$43,500	\$91,934	\$135,434

**<u>A.</u>** Home Delivered Meal Service Delivery Strategy: Enhance participation in the home delivered meal program.

#### **Performance Measure:**

- Efficiencies = Average cost per meal, current AAA reimbursement, average consumer contribution, average other contribution.
- Effectiveness = Total consumers, total meals, and total eligible meals and registered consumers by at risk factor.
- Quality = Consumer satisfaction (ACL's POMP (Performance Outcome Management Project).

#### **Baseline:**

State Fiscal Year (SFY)	Total Unduplicated Clients Served	<u>Total Home</u> <u>Delivered</u> <u>Meals</u>	*Average cost per Home Delivered Meal	AAA Contracted HDM Reimbursement Rate
SFY 2016 (July 2015 – June 2016) Actual	298	41,891	\$3.60	\$3.32
SFY 2017 (July 2016 – June 2017) Actual	343	51,044	\$3.56	\$3.32
SFY 2018 (July 2017 – June 2018) Actual	407	60,515	\$3.67	\$3.56
SFY 2019 (July 2018 – June 2019) Actual	393	63,493	\$3.73	\$3.56
SFY 2020 (July 2019 – June 2020)				

<sup>\*</sup>Cost includes AAA wages, nutritionist and provider reimbursement.

#### **Demographic Baseline:**

Home Delivered Meals State Fiscal Year (SFY)	Census Data:  % of Population Living in Rural Areas	% of Registered Consumers living in Rural Areas	Census Data: % of Population in *Greatest Economic Need	% of Registered Consumers with Greatest Economic Need	Census Data: % of Population in **Greatest Social Need	% of Registered Consumers with Greatest Social Need
SFY 2016 (July 2015 – June 2016)	9,179/25,245 = 36%	149/298 = 50%	1,487/25,245= 5.89%	167/298 = 56%	5,061/25,245 = 20.05%	163/298 = 55%
SFY 2017 (July 2016 – June 2017)	9,179/25,245 = 36%	320/633 = 51%	1,487/25,245= 5.89%	349/633 = 55%	5,061/25,245 = 20.05%	305/633 = 48%
SFY 2018 (July 2017 – June 2018)	9,179/25,245 = 36%	232/452 = 51%	1,487/25,245= 5.89%	266/452 = 59%	5,061/25,245 = 20.05%	214/452 = 47%
SFY 2019 (July 2018 – June 2019)	9,832/27,459 = 36%	201/393 = 51%	1,622/27,459 = 6%	199/393 = 51%	4,926/27,459 = 18%	174/393 = 44%
SFY 2020 (July 2019 – June 2020)						

<sup>\*</sup>Greatest Economic Need: 65 or older living in Poverty

#### **Benchmark:**

- Maintain consumer satisfaction at 75% or higher.
- Increase number of participants at congregate meal site by 2%.
- Increase number of meals served at meal sites by 2%.
- Maintain or exceed the number of at-risk consumers as identified in the demographic baseline.
- **B.** Home Delivered Meal Coordination Strategy: Coordinate with existing meal sites and community members to identify consumers who could most benefit from the home delivered meal program.

<u>Performance Measure:</u> Numbers of home delivered meal consumers.

<sup>\*\*</sup>Greatest Social Need: 65 or older living alone

# Baseline:

SFY 2016

Meal Site/County	Number of Meals	Number of Registered
		<u>Consumers</u>
Cottonwood/Idaho	779	10
Grangeville/Idaho	5,082	44
Kamiah/Lewis	8,337	57
Kendrick/Latah	939	8
Lewiston/Nez Perce	17,716	113
Moscow/Latah	2,144	21
Nezperce/Lewis	72	2
Orofino/Clearwater	2,738	24
Potlatch/Latah	237	9
Riggins/Idaho	0	0
Weippe/Clearwater	7,237	37
Winchester /Lewis	138	3

SFY 2017

Meal Site/County	Number of Meals	Number of Registered
		<u>Consumers</u>
Cottonwood/Idaho	965	11
Grangeville/Idaho	4,407	41
Kamiah/Lewis	10,617	72
Kendrick/Latah	1,265	12
Lewiston/Nez Perce	19,925	117
Moscow/Latah	1,967	15
Nezperce/Lewis	0	0
Orofino/Clearwater	3,202	33
Potlatch/Latah	275	4
Riggins/Idaho	30	2
Weippe/Clearwater	8,316	34
Winchester /Lewis	75	4

SFY 2018

Meal Site/County	Number of Meals	Number of Registered Consumers
Cottonwood/Idaho	1,251	15
Grangeville/Idaho	4,331	35
Kamiah/Lewis	13,180	91
Kendrick/Latah	1,525	12
Lewiston/Nez Perce	20,279	133
Moscow/Latah	3,166	35
Nezperce/Lewis	0	0
Orofino/Clearwater	4,791	38
Potlatch/Latah	472	9
Riggins/Idaho	8	2
Weippe/Clearwater	10,894	37
Winchester /Lewis	618	4

SFY 2019

Meal Site/County	Number of Meals	Number of Registered Consumers
Cottonwood/Idaho	1,539	19
Grangeville/Idaho	6,867	66
Kamiah/Lewis	18,842	122
Kendrick/Latah	1,438	12
Lewiston/Nez Perce	30,792	195
Moscow/Latah	6,612	45
Nezperce/Lewis	15	1
Orofino/Clearwater	5,643	43
Potlatch/Latah	1,480	16
Riggins/Idaho	8	4
Weippe/Clearwater	12,997	57
Winchester /Lewis	813	5

**Benchmark:** Increase home delivered meal participants by 5% annually.

**11: Disease Prevention and Health Promotions Objective:** Improve the wellness of seniors by ensuring that Disease Prevention and Health Promotion programs are delivered according to the evidence-based guidelines.

<u>Service Description:</u> Disease Prevention and Health Promotion funds are for evidence-based programs selected by the Area Agencies on Aging based on input from the consumers in the Planning and Service Area (PSA). Evidence-based programs support healthy lifestyles and promote healthy behaviors and reduce the need for more costly medical interventions. The purpose of the Aging and Disability Evidence-Based Programs and Practices (ADEPP) is to help the public learn more about available evidence-based programs and practices in the areas of aging and disability and determine which of these may best meet their needs.

**Service Eligibility:** Seniors 60 years of age or older.

#### Service Implemented by:

Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

Funding Source: (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$7,613	\$7,613
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$3,317	\$3,317
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$4,036	\$4,036
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$47	\$47
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$10,169	\$10,169

A. <u>Disease Prevention and Health Promotion Service Delivery Strategy:</u> Increase the availability and awareness of Chronic Disease Self-Management (CDSMP) and Chronic Pain Self-Management (CPSMP) classes in PSA II.

#### **Performance Measure:**

- Efficiencies = Cost per consumer.
- Effectiveness = Total program cost and numbers of consumers.

#### **Baseline:**

#### **Chronic Pain Self-Management Program**

### **Chronic Disease Self-Management Program**

State Fiscal Year (SFY)	Evidence Based Program Expenses	Total Unduplicated Clients	Average cost per Client
SFY 2016 (July 2015 – June 2016) Actual	\$7,613	39	\$195
SFY 2017 (July 2016 – June 2017) Actual	\$2,927	45	\$65
SFY 2018 (July 2017 – June 2018) Actual	Not Available	Not Available	Not Available
SFY 2019 (July 2018 – June 2019) Actual	Not Available	Not Available	Not Available
SFY 2020 (July 2019 – June 2020)	Not Available	Not Available	Not Available
Budget	NOT Available	NOT Available	Not Available

**Chronic Pain Self-Management Program** 

State Fiscal Year (SFY)	Evidence Based Program Expenses	Total Unduplicated Clients	Average cost per Client
SFY 2016 (July 2015 – June 2016)	Not Available	Not Available	Not Available
SFY 2017 (July 2016 – June 2017) Actual	\$390	6	\$65
SFY 2018 (July 2017 – June 2018) Actual	Not Available	Not Available	Not Available
SFY 2019 (July 2018 – June 2019) Actual	Not Available	Not Available	Not Available
SFY 2020 (July 2019 – June 2020) Budget	Not Available	Not Available	Not Available

#### Benchmark:

- Increase the number of CDSMP consumers by 32 in SFY2018.
- Increase the number of CPSMP consumers by 16 in SFY2018.
- B. Disease Prevention and Health Promotion Coordination Strategy: Collaborate with Community Health
  Association of Spokane (CHAS), Partnership for Healthy Communities, University of Idaho Extension, and Patient
  Centered Medical Home Clinics to expand the CDSMP and CPSMP classes throughout the region. Identify other
  partnerships to increase trained lay-leaders and sustainability.

#### **Performance Measure:**

- Number of collaborative partners.
- Number of classes.
- Number of trained lay-leaders.

**Baseline:** Current MOU with Partnership for Healthy Communities. Reporting and training partnership with CHAS.

State Fiscal Year (SFY)	Number of	Number of	Location of Classes
	CDSMP Classes	CPSMP Classes	
SFY 2016 (July 2015 – June 2016)	2	0	Lenore, Lewiston
SFY 2017 (July 2016 – June 2017)	8	1	Moscow, Lewiston, White Bird,
			Grangeville, Cottonwood, Riggins
SFY 2018 (July 2017 – June 2018)	3	0	Grangeville, Cottonwood, Lewiston
SFY 2019 (July 2018 – June 2019)	N/A	N/A	N/A
SFY 2020 (July 2019 – June 2020)			

State Fiscal Year (SFY)	Number of Trained CDSMP	Number of Trained CPSMP
	<u>Lay-Leaders</u>	<u>Lay-Leaders</u>

SFY 2016 (July 2015 – June 2016)	3	0
SFY 2017 (July 2016 – June 2017)	8	3
SFY 2018 (July 2017 – June 2018)	8	7
SFY 2019 (July 2018 – June 2019)	N/A	N/A
SFY 2020 (July 2019 – June 2020)	N/A	N/A

#### Benchmark:

- Increase the number of collaborative partners by one in SFY2018
- Increase the number of CDSMP classes by 4 in SFY2018
- Increase the number of CPSMP classes by 2 in SFY2018
- Increase the number of trained lay-leaders by 3 in SFY2018

# **12: National Family Caregiver Support Program (NFCSP) Objective:** To strengthen the Idaho's Family Caregiver Support Program.

<u>Service Description:</u> NFCSP funds must be used to support and train caregivers to make decisions, resolve problems, and develop skills to carry out their caregiving responsibilities:

- 1. Caregiver information (large group presentations, printed materials, media);
- 2. Caregiver access assistance (assisting caregiver to access resources);
- 3. Caregiver Counseling including caregiver support groups and training;
- 4. Respite provides a brief period of relief to a full-time caregiver. The care recipient must have physical or cognitive impairments that require 24-hour care or supervision;
- 5. Supplemental Services.

Service Eligibility: (1) family caregivers who provide care for individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction, the State involved shall give priority to caregivers who provide care for older individuals with such disease or disorder, (2) grandparents or older individuals who are relative caregivers, the State involved shall give priority to caregivers who provide care for children with severe disabilities, (3) caregivers who are older individuals with greatest social need, and older individuals with greatest economic need (with particular attention to low-income older individuals), and (4) older individuals providing care to individuals with severe disabilities, including children with severe disabilities.

#### Service Implemented by:

• Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

Funding Source: (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$57,646	\$44,729	\$102,375
SFY 2017 (July 2016 – June 2017) Actual	\$39,072	\$53,216	\$92,288
SFY 2018 (July 2017 – June 2018) Actual	\$14,975	\$106,547	\$121,522
SFY 2019 (July 2018 – June 2019) Actual	\$40,329	\$11,997	\$52,326
SFY 2020 (July 2019 – June 2020) Budget	\$58,000	\$66,531	\$124,531

<u>Cost Share:</u> Both federal and state funds are eligible; however different requirements apply: If only federal funds are used, the AAA must use individual income when determining cost-share and participants cannot be terminated for refusal to pay. If only using state funds, the AAA must use household income when determining cost-share and person can be terminated for refusal to pay. If a combination of federal and state funds is used, the AAA follows federal requirements.

A. National Family Caregiver Support Program (NFCSP) Service Delivery Strategy: Through community presentations, increase awareness of and referral to available family caregiver support services. Develop an interagency caregiver workforce marketing plan to address the shortage and retention of in-home caregivers.

#### **Performance Measure:**

- Efficiencies = Average cost per consumer.
- Effectiveness = Total consumers, total program cost, average # of hours, and number of caregiver presentations.
- Quality=Consumer satisfaction.

## 1. Caregiver Information Services

#### **Baseline:**

State Fiscal Year (SFY)	<u>Federal</u>	Number of Activities
SFY 2016 (July 2015 – June 2016) Actual	\$6,713	Not Available
SFY 2017 (July 2016 – June 2017) Actual	\$7,404	Not Available
SFY 2018 (July 2017 – June 2018) Actual	\$6,328	Not Available
SFY 2019 (July 2018 – June 2019) Actual	\$6,474	Not Available
SFY 2020 (July 2019 – June 2020) Budget	\$0	

#### 2. Access Assistance (I&A)

#### Baseline:

State Fiscal Year (SFY)	<u>Federal</u>	Number of Contacts	Program Expense per Contact
SFY 2016 (July 2015 – June 2016) Actual	\$17,193	75	\$229.24
SFY 2017 (July 2016 – June 2017) Actual	\$22,524	169	\$133.28
SFY 2018 (July 2017 – June 2018) Actual	\$27,813	185	\$150.34
SFY 2019 (July 2018 – June 2019) Actual	\$1,873	77	\$24.32
SFY 2020 (July 2019 – June 2020) Budget	\$12,926		

## 3. <u>Caregiver Counseling and Group Programs</u>

#### Baseline:

State Fiscal Year (SFY)	<u>Federal</u>	Number of Unduplicated Clients Served	Number of Sessions	Program Expense per Client
SFY 2016 (July 2015 – June 2016) Actual	\$3,169	Not Available	Not Available	Not Available
SFY 2017 (July 2016 – June 2017) Actual	\$8,434	Not Available	Not Available	Not Available
SFY 2018 (July 2017 – June 2018) Actual	\$2,835	Not Available	28	Not Available
SFY 2019 (July 2018 – June 2019) Actual	\$3,088	Not Available	49	Not Available
SFY 2020 (July 2019 – June 2020) Budget	\$20,657			

#### 4. Respite

#### Baseline:

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>	Number of Unduplicated Clients Served	Number of Hours	Program Expense per Client
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	\$62,347	16	5,176	\$3,897
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	\$53,360	22	3,809	\$2,425
SFY 2018 (July 2017 – June 2018) Actual	\$14,975	\$68,381	\$83,356	41	5,210	\$2,033

SFY 2019 (July 2018 – June 2019) Actual	\$40,329	\$298	\$40,627	36	2,837	\$1,129
SFY 2020 (July 2019 – June 2020) Budget	\$58,000	\$29,728	\$87,728			

#### 5. Supplemental Service (Limited Basis)

#### **Supplemental caregiver Legal Assistance**

#### Baseline:

State Fiscal Year (SFY)	<u>Federal</u>	<u>Cases</u>	<u>Hours</u>
SFY 2016 (July 2015 – June 2016) Actual	\$2,056	N/A	N/A
SFY 2017 (July 2016 – June 2017) Actual	\$567	N/A	N/A
SFY 2018 (July 2017 – June 2018) Actual	\$1,190	N/A	N/A
SFY 2019 (July 2018 – June 2019) Actual	\$217	4	11.1
SFY 2020 (July 2019 – June 2020) Budget	\$3,220		

## **Supplemental Caregiver Nutritional Service**

#### **Baseline:**

State Fiscal Year (SFY)	<u>Federal</u>
SFY 2016 (July 2015 – June 2016) Actual	\$10,897
SFY 2017 (July 2016 – June 2017) Actual	Not Applicable
SFY 2018 (July 2017 – June 2018) Actual	Not Applicable
SFY 2019 (July 2018 – June 2019) Actual	Not Applicable
SFY 2020 (July 2019 – June 2020) Budget	Not Applicable

#### **Benchmark:**

- Increase the number of NFCSP contacts by 5% annually.
- Increase the number of community presentations by 5 annually.
- Increase the number of NFCSP consumers by 2% annually.
- Maintain consumer satisfaction at 80% or higher.
- B. NFCSP Coordination Strategy: Collaborate with the University of Idaho Extension (U of I), the Alzheimer Association, AARP Idaho, the Bellevue Health Center, Disability Action Center (DAC), Idaho DHW Children Services, Idaho Legal Aid, Monastery of St. Gertrude, 211 Idaho Careline, The Nez Perce Tribe, and contracted service providers to provide access to National Family Caregiver Resource Support Program resources and support.

**Performance Measure**: The number of collaborative partners.

#### **Baseline:**

<u>Service</u>	<u>Partner</u>
Information Services	DAC, AARP Idaho, 211 Idaho Careline, The Nez Perce Tribe
Access Assistance	DAC, The Alzheimer's Association,
Counseling	U of I, Bellevue Health Center, IDHW Children's Services, Monastery of St.
	Gertrude, DAC
Respite	Addus, Seuberts, ANS, Compassionate Care, Devins, Sundance
Supplemental Services	Idaho Legal Aid

#### **Benchmark:**

Increase in coordinated efforts by identifying 2 new partners each year.

# Focus Area B:

# Older Americans Act (OAA) Discretionary Programs

ICOA Goal: To collaborate with aging network partners to implement discretionary programs that enhance Title III Core Services.

**1: Senior Medicare Patrol (SMP) Objective:** To have well educated and knowledgeable consumers who know how to identify, report, and prevent Medicare and Medicaid Fraud.

<u>Service Description:</u> SMP funds are used to educate Medicare and Medicaid beneficiaries to detect, report, and prevent health care fraud. Trained SMP staff and volunteers conduct group education sessions, provide one-to-one counseling with Medicare beneficiaries, and hold regional Scam Jams co-sponsored by the Idaho Scam Jam Alliance which includes the SMP, Idaho Attorney General's Office, Idaho Department of Insurance, Idaho Department of Finance, Idaho Legal Aid Services, AARP, Better Business Bureau and other valued partners to help consumers learn to protect against fraud.

**Service Eligibility:** Medicare beneficiaries and their Caregivers.

#### **Service Implemented by:**

Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

Funding Source: (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$18,000	\$18,000
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$20,000	\$20,000
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$20,000	\$20,000
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$20,000	\$20,000
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$21,000	\$21,000

**A. SMP Service Delivery Strategy:** Expand the efficiency of the SMP program by increasing the number of volunteers, group presentations, community events, and one-to-one counseling sessions.

#### **Performance Measure:**

• Effectiveness = # of Volunteers, # of group presentation, # of community events, # of one-to-one counseling sessions and total program cost.

#### **Baseline:**

State Fiscal Year (SFY)	<u>Volunteers</u>	Group Presentations	Community Events	One-to-one Counseling
SFY 2016 (July 2015 – June 2016) Actual	2	60	14	133
SFY 2017 (July 2016 – June 2017) Actual	1	61	25	120
SFY 2018 (July 2017 – June 2018) Actual	2	46	11	22
SFY 2019 (July 2018 – June 2019) Actual	0	39	15	90
SFY 2020 (July 2019 – June 2020)				

#### Benchmark: Meet or exceed the following:

- Recruit and retain 2 additional volunteer positions per year.
- 80 group presentations per year.
- Increase one-on-one counseling sessions by 5% per year.
- Increase community events by 2 each year.
- **B. SMP Coordination Strategy:** Identify new area partners to collaborate with to present day-long community fraud events, which include education about Medicare fraud prevention, identity theft, and exploitation. Coordinate with

the Senior Health Insurance Benefits Advisors (SHIBA) to train volunteers and staff to achieve efficient SMP program education about Medicare fraud prevention.

<u>Performance Measure:</u> Number of SMP partners, number of trained volunteers and consumer survey results from community fraud events.

Baseline: Current SHIBA partnership and fraud event survey results.

Contract Year	Total Volunteer Hours	Total Partners	Consumer Survey
2016 (May 2015 – May 2016)	338.5	30	78%
2017 (May 2016 – May 2017)	74	52	80%
2018 (May 2017 – May 2018)	41	72	93%
2019 (May 2018 – May 2019)	0	123	96%
2020 (May 2019 – May 2020)			

#### **Benchmark:**

- Increase the satisfaction of consumers who attend community fraud events by 75% or higher.
- Increase the number of area partners by 3 per year.
- Increase the number of volunteer hours by 10%.

**2: Medicare Improvements for Patients and Providers Act (MIPPA) Objective:** To provide statewide outreach and referral to eligible Medicare Savings Program and Low Income Subsidy beneficiaries throughout the State.

<u>Service Description:</u> MIPPA funds are used to provide education and outreach for Medicare Savings Programs (MSP), Low Income Subsidy (LIS), Medicare Part D and Prevention and Wellness benefits. The MIPPA project develops Medicare Improvement outreach partners statewide including, pharmacies, churches and not-for-profit organizations.

Service Eligibility: Low income Medicare beneficiaries.

#### Service Implemented by:

Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

Funding Source: (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$18,000	\$18,000
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$18,000	\$18,000
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$10,800	\$10,800
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$11,290	\$11,290
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$11,290	\$11,290

**A.** MIPPA Service Delivery Strategy: Expand efficiency of MIPPA program by increasing the number of host agencies.

#### **Performance Measure:**

- Efficiencies = Average cost per participating agency.
- Effectiveness = Total Host Agency and total program cost.

#### **Baseline:**

State Fiscal Year (SFY)	Total Participating Host Agency
SFY2016 (July 2015 – June 2016) Actual	26
SFY2017 (July 2016 – June 2017) Actual	40
SFY2018 (July 2017 – June 2018) Actual	127
SFY2019 (July 2018 – June 2019) Actual	123
SFY2020 (July 2019 – June 2020)	

**Benchmark:** Increase number of host agencies by 5 per year.

**B.** MIPPA Coordination Strategy: Coordinate with ICOA to develop public awareness materials and conduct a media campaign to increase the MIPPA participation.

Performance Measure: Public awareness materials and statewide media campaigns.

Baseline: Three-year MIPPA Media Campaign.

Benchmark: Identify if campaigns and MIPPA materials increase the number of applications.

# Focus Area C: Older Americans Act (OAA) Participant-Directed/Person-Centered Planning

ICOA Goal: Integrate person-centered planning into existing service delivery system.

**1:** Participant-Directed/Person-Centered Planning Objective: To define and implement person centered processes with aging and disability network partners.

<u>Service Description:</u> The service directs eligible consumers to organizations that provide long-term care service coordination. Person-Centered Planning is a process that ensures an individual has a choice in determining the long-term care services that are best for them.

**Service Eligibility:** General public needing long-term care services and supports.

#### Service Implemented by:

- Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00
- <u>A.</u> Participant-Directed/Person-Centered Planning <u>Service Delivery Strategy:</u> Identify best practices from organization/s that provide Person-Centered Planning.

#### **Performance Measure:**

• Best practices.

#### **Baseline:**

Establish best practices in conjunction with Disability Action Center.

Benchmark: Implement Person-Centered- Planning standard practices at the AAA.

**B.** Participant-Directed/Person-Centered Planning Coordination Strategy: Coordinate with Disability Action Center to train AAA staff to work with individuals who have various types of disabilities.

#### **Performance Measure:**

Number of AAA trained staff.

Baseline: No baseline.

#### Benchmark:

Complete Person-Centered Planning training with aging and disability network partners.

# Focus Area D: Elder Justice

ICOA Goal: Ensure all older individuals have access to OAA and SSA Elder Justice Services.

# **1: Ombudsman Objective:** To develop Idaho specific policies and procedures to comply with new Older Americans Act (OAA) Ombudsman rules.

#### **Service Description:** The Ombudsman funds are used to:

- (A) identify, investigate, and resolve complaints that—(i) are made by, or on behalf of, residents; and
- (ii) relate to action, inaction, or decisions, that may adversely affect the health, safety, welfare, or rights of the residents (including the welfare and rights of the residents with respect to the appointment and activities of guardians and representative payees), of— (I) providers, or representatives of providers, of long-term care services; (II) public agencies; or (III) health and social service agencies;
- (B) provide services to assist the residents in protecting the health, safety, welfare, and rights of the residents;
- (C) inform the residents about means of obtaining services provided by providers or agencies described in subparagraph (A)(ii) or services described in subparagraph (B);
- (D) ensure that the residents have regular and timely access to the services provided through the Office and that the residents and complainants receive timely responses from representatives of the Office to complaints;
- (E) represent the interests of the residents before governmental agencies and seek administrative, legal, and other remedies to protect the health, safety, welfare, and rights of the residents;
- (F) provide administrative and technical assistance to entities designated under paragraph (5) to assist the entities in participating in the program;
- (G)(i) analyze, comment on, and monitor the development and implementation of Federal, State, and local laws, regulations, and other governmental policies and actions, that pertain to the health, safety, welfare, and rights of the residents, with respect to the adequacy of long-term care facilities and services in the State; (ii) recommend any changes in such laws, regulations, policies, and actions as the Office determines to be appropriate; and (iii) facilitate public comment on the laws, regulations, policies, and actions;
- (H)(i) provide for training representatives of the Office; (ii) promote the development of citizen organizations, to participate in the program; and (iii) provide technical support for the development of resident and family councils to protect the well-being and rights of residents; and
- (I) carry out such other activities as the Assistant Secretary determines to be appropriate.

**Service Eligibility:** Seniors 60 years of age or older.

#### Service Implemented by:

Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

<u>Funding Source:</u> (Actual expenditures for completed years and budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$68,004	\$68,004
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$66,362	\$66,362
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$68,813	\$68,813
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$70,237	\$70,237
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$77,421	\$77,421

A. Ombudsman Service Delivery Strategy: Use data to identify complaint trends; develop quarterly reports to analyze service delivery; recruit and sustain volunteers to increase effectiveness in volunteer management and data entry, and, to provide facility-based in-service presentations linked to LTC complaint trends.

#### **Performance Measure:**

- Average beds/Ombudsman
- Information and Education Presentation
- Reporting

#### **Baseline:**

State Fiscal Year (SFY)	Number of Ombudsmen	Number of Skilled Nursing Facilities	Number of Assisted Living Facilities	Total Number of Beds	Average Bed Count per Ombudsman	<u>Total</u> <u>Volunteer</u> <u>Ombudsmen</u>	Total Information and Education Presentations
SFY 2016 (July 2015 – June 2016) Actual	1	N/A	N/A	1447	1447	30	4
SFY 2017 (July 2016 – June 2017) Actual	1	N/A	N/A	1447	1447	21	0
SFY 2018 (July 2017 – June 2018) Actual	1	9	29	1483	1483	22	8
SFY 2019 (July 2018 – June 2019)	1	10	18	1,448	1,448	13	3
SFY 2020 (July 2019 – June 2020)	1			1,526	1,526		

#### **Ombudsman**

Five Most Frequent Complaint Areas and Corresponding Number of Complaints:

SF	Y16	SFY17		SFY18		SFY	19	SF	Y20
Type of Complaint	Total Complaints	Type of Complaint	Total Complaints	Type of Complaint	Total Complaints	Type of Complaint	Total Complaints	Type of Complaint	Total Complaints
Information	22	Care Plans #42	6	Discharge or Eviction #19	15	Discharge or Eviction #19	8		
Symptoms Unattended	7	Short Staff #97	6	Loss #38	10	Toileting Care #49	6		
Medication	6	Symptoms Unattended	4	Rights #13	6	Medications, ADMN or ORG #44	5		
Care Plan	6	Billing #36	4	Care #48	5	Care plan or Assessment Failure #42	4		
Care Plan	0	Discharge or	4	Family Conflict	3	Dignity, respect,	-		
Discharge	6	Eviction #19	4	#120	5	staff #26	4		

#### **Benchmark:**

- Increase Volunteer Ombudsman by 2% annually.
- Develop quarterly reports from collected data to ensure improvement.
- Link 50% of Facility Based Presentations to top 3 complaint trends.
- **B.** Ombudsman Coordination Strategy: Provide resident rights education and training to providers or representatives of providers of LTC services, public agencies, health and social services agencies to ensure that the health, safety, welfare and rights of residents are being met.

<u>Performance Measure:</u> Number of presentations.

#### Baseline:

State Fiscal Year (SFY)	Total Information & Education
	<u>Presentations</u>
SFY 2016 (July 2015 – June 2016)	4
SFY 2017 (July 2016 – June 2017)	0
SFY 2018 (July 2017 – June 2018)	2
SFY 2019 (July 2018 – June 2019)	N/A
SFY 2020 (July 2019 – June 2020)	

#### Benchmark:

• Increase the number of information and education presentations to 4 per year.

**2: State Adult Protection Objective:** To ensure that adult protection services are consistently implemented statewide to prevent abuse, neglect and exploitation.

<u>Service Description:</u> State Adult Protection Services (APS) funds must be used to provide safety and protection for vulnerable adults (age 18 and older). The APS program receives reports and investigates allegations of abuse, neglect, self-neglect, or exploitation and assists in reducing the risk of harm.

- Abuse means the intentional or negligent infliction of physical pain, injury or mental injury.
- Neglect means failure of a caretaker to provide food, clothing, shelter or medical care reasonably necessary to sustain the life and health of a vulnerable adult, or the failure of a vulnerable adult to provide those services for him/herself.
- Exploitation means an action which may include, but is not limited to, the unjust or improper use of a
  vulnerable adult's financial power of attorney, funds, property, or resources by another person for profit or
  advantage.

Service Eligibility: Vulnerable adults 18 years old and older.

#### **Service Implemented by:**

Area Agency on Aging, 124 New 6<sup>th</sup> St., Lewiston, ID 83501, 208-743-5580, M-F 8:00-5:00

Funding Source: (Actual expenditures for completed year and Budget for current year)

State Fiscal Year (SFY)	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$72,609	\$0	\$72,609
SFY 2017 (July 2016 – June 2017) Actual	\$77,941	\$0	\$77,941
SFY 2018 (July 2017 – June 2018) Actual	\$68,432	\$0	\$68,432
SFY 2019 (July 2018 – June 2019) Actual	\$69,078	\$0	\$69,078
SFY 2020 (July 2019 – June 2020) Budget	\$78,160	\$0	\$78,160

<u>A. Adult Protection Service Delivery Strategy:</u> Use data of reported allegations by category and complaint allegations reported to Law Enforcement to assure the alleged risk of vulnerable adults is effectively reduced.

#### **Performance Measure:**

Reporting

#### Baseline:

State Fiscal Year (SFY)	Abuse Allegations	Neglect Allegations	Self- Neglect Allegations	Exploitation Allegations	Reports to Law Enforcement	Total Information and Education Presentations
SFY 2016 (July 2015 – June 2016) Actual	5	16	34	15	15	37
SFY 2017 (July 2016 – June 2017) Actual	12	27	34	30	21	50
SFY 2018 (July 2017 – June 2018) Actual	10	18	40	17	12	36
SFY 2019 (July 2018 – June 2019) Actual	15	13	36	21	12	30
SFY 2020 (July 2019 – June 2020)						

**Benchmark:** Maintain reporting and use data to focus training and presentations.

B. Adult Protection Coordination Strategy: Coordinate with the Idaho Department of Health and Welfare Regional Medicaid Unit, local law enforcement agencies, hospitals, medical providers, in-home care service providers, financial institutions, Boards of Community Guardians representing Latah, Nez Perce, Idaho and Clearwater/Lewis counties and Nez Perce Tribal Social Services to present information and education to facilitate reporting of abuse, neglect, self-neglect and exploitation of vulnerable adults.

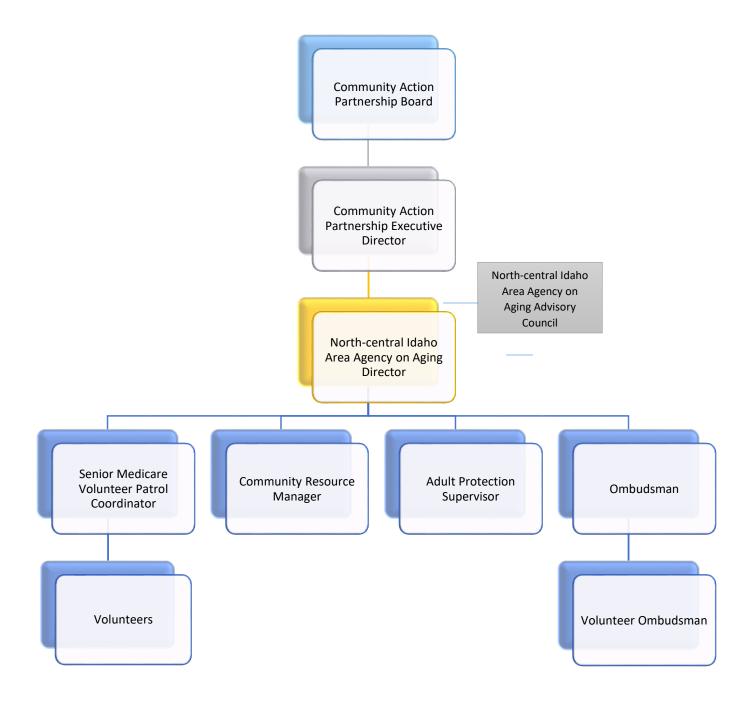
**<u>Performance Measure</u>**: The number of presentations on Maltreatment of Vulnerable Adults.

#### **Baseline:**

State Fiscal Year (SFY)	Total AP Presentation focusing on Prevention
	of Maltreatment of Vulnerable Adults
SFY 2016 (July 2015 – June 2016)	37
SFY 2017 (July 2016 – June 2017)	50
SFY 2018 (July 2017 – June 2018)	38
SFY 2019 (July 2018 – June 2019)	N/A
SFY 2020 (July 2019 – June 2020)	

**Benchmark:** Increase community presentations by 5 presentations per year.

# Area II Agency on Aging



## **Attachment H**

## **PSA Advisory Council Profile**

In Accordance with Section 306 (a)(6)(D) of the Older Americans Act and IDAPA 15.01.20.051.01, the Area Agency on Aging (AAA) shall establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of the business community, local elected officials, providers of veterans' health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan. More than fifty (50) percent of the advisory council shall consist of people 60 years old or older. (CFR 45 Section 1321.57)

Advisory	Advisory Council Member's Name:				Rose Gehring						
County of Residence:				Nez Pe	Nez Perce						
Beginning Term Date: 03/2				2018							
Ending Term Date: 03/2			2020	•							
Select <b>all</b> Cate			all Categ	ories tha	t the Coun	cil Memb	er Represe	ents			
Eligible Participate Minorit Resides Participan s in OAA y in Rural t (60 or Program Area older)			Family Caregive r	Represents Older Individual/ s	Service Provide r	Business Communit y	Local Electe d Official	Provider of Veterans Health Care	Genera I Public		
х	х				х			х		х	

Advisory	Council Me	ember's	Name:	Rodger	Rodger Colgan						
County of Residence:				Clearw	Clearwater						
Beginning Term Date: 03/				2018							
Ending Term Date: 03/			03/2	2020	-						
		Select	all Categ	ories tha	t the Coun	cil Memb	er Represe	ents			
Eligible Participate Minorit Resides Participan s in OAA y in Rural t (60 or Program Area older)				Family Caregive r	Represents Older Individual/ s	Service Provide r	Business Communit y	Local Electe d Official	Provider of Veterans Health Care	Genera l Public	
х	х		x		х			х		х	

Advisory	Council Me	mber's N	lame:	Patty N	lathison					
County of Residence:				Lewis						
Beginning Term Date: 03/			2018							
Ending Term Date: 03/			03/2	2020	•					
		Select	all Cate	gories tha	t the Coun	cil Memb	er Represe	nts		
Eligible Participant (60 or older)	Eligible Participates Minority Resides Participant in OAA in Rural (60 or Program Area				Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
х	x		x		х			x		x

Advisory	Advisory Council Member's Name:				Jackson, OS	SB				
County of Residence:				Idaho						
Beginning Term Date: 03/2				2018						
Ending Term Date: 03/2			2020	•						
		Select	all Cate	gories tha	t the Coun	cil Memb	er Represe	nts		
Eligible Participant (60 or older)	Eligible Participates Minority Resides Participant in OAA in Rural C (60 or Program Area				Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
х			х	x	х			x		x

Advisory	Council Mo	ember's	Name:	Tom Tr	ail					
County of Residence:										
Beginning Term Date: 03/2				2018						
Ending Term Date: 03/			2020	•						
		Select	all Categ	ories tha	t the Cound	cil Memb	er Represe	ents		
Eligible Participate Minorit Resides Family Participan s in OAA y in Rural Caregive t (60 or Program Area r older)				Represents Older Individual/ s	Service Provide r	Business Communit y	Local Electe d Official	Provider of Veterans Health Care	Genera I Public	
х	х		х	х	х		х	х		x

Advisory	Council Mo	ember's	Name:	Mark L	eeper					
County o	f Residence		Latah							
Beginnin	g Term Dat	03/2	2018							
Ending Term Date: 03/2				2020	•					
Select <b>all</b> Categ				ories tha	t the Coun	cil Memb	er Represe	ents		
Eligible Participan t (60 or older)	Participan s in OAA y in Rural t (60 or Program Area			Family Caregive r	Represents Older Individual/ s	Service Provide r	Business Communit y	Local Electe d Official	Provider of Veterans Health Care	Genera l Public
x x				х	х	х	х		х	х

Advisory	Council Me	Name:	Jose M	Jose Murillo									
County o	f Residence		Nez Pe	Nez Perce									
Beginnin	g Term Dat	03/	2018										
Ending Term Date: 03/2			2020	_									
		Select	all Categ	gories tha	t the Coun	cil Memb	er Represe	ents					
Eligible	Participate	Minorit	Resides	Family	Represents	Service	Business	Local	Provider of	Genera			
Participan	s in OAA	У	in Rural	Caregive	Older	Provide	Communit	Electe	Veterans	l Public			
t (60 or Program Area			r	Individual/	r	У	d	Health					
older)				S			Official	Care					
х	x x			x	x								

Advisory Council Member's Name: **David Pankey** Nez Perce County of Residence: Beginning Term Date: 03/2018 03/2020 **Ending Term Date:** Select <u>all</u> Categories that the Council Member Represents Eligible Business Participate Minorit Resides Family Represents Service Local Provider of Genera Participan s in OAA Older Electe l Public in Rural Caregive Provide Communit Veterans У t (60 or Program Area Individual/ d Health older) Official Care

Advisory	Council Mo	Name:	Debbie Lemon										
County o	f Residence		Nez Pe	Nez Perce									
Beginnin	g Term Dat	03/2	2018										
Ending Term Date: 03,			03/	2020	•								
		Select	all Categ	gories tha	t the Coun	cil Memb	er Represe	ents					
Eligible Participan t (60 or older)	Participate s in OAA Program	Minorit Y	Resides in Rural Area	Family Caregive r	Represents Older Individual/ s	Service Provide r	Business Communit Y	Local Electe d Official	Provider of Veterans Health Care	Genera l Public			
х	x				x		х			×			

Advisory	Council Mo	ember's	Name:	Don Str	ong					
County o	of Residence		Latah							
Beginnin	g Term Dat	e:	03/2	2018						
Ending Term Date: 03/2				2020	•					
		Select	all Categ	ories tha	t the Coun	cil Memb	er Represe	ents		
Eligible Participan t (60 or older)	an s in OAA y in Rural or Program Area		Family Caregive r	Represents Older Individual/ s	Service Provide r	Business Communit Y	Local Electe d Official	Provider of Veterans Health Care	Genera l Public	
х	х		x	х	х					х

Advisory Council Member's Name:										
County of Residence:										
Beginnin	g Term Dat	e:								
Ending T	erm Date:				•					
		Select	all Categ	ories tha	t the Coun	cil Memb	er Represe	ents		
Eligible	Participate	Minorit	Resides	Family	Represents	Service	Business	Local	Provider of	Genera
Participan	s in OAA	у	in Rural	Caregive	Older	Provide	Communit	Electe	Veterans	l Public
t (60 or	Program		Area	r	Individual/	r	У	d	Health	
older)					S			Official	Care	

#### **ATTACHMENT B**

## SFY 2020 AREA PLAN INTRASTATE FUNDING FORMULA (IFF)

#### **Intrastate Funding Formula (IFF)**

Goal: To Provide funding in accordance with OAA guidelines that distribute priority funding to the target population identified in OAA 305(a)(2)(C).

**Objective 1: Intrastate Funding Formula (IFF):** The IFF is the methodology used to calculate how much Title III funding, including the Title IIID Disease Prevention and Health Promotion Services, goes to each Planning and Service Area (PSA). As seen in the Table below, it is based on the "At Risk" factors in each of the PSAs. This factor is then weighted and applied to the total available funding to determine the funding allocations. The formula provides that funding reaches individuals with the greatest economic and social needs for such services and reaches areas throughout the state that are medically underserved.

**Formula Development:** The Intrastate Funding Formula was developed in consultation with area agencies using the best available data, and published for review and comment taking into account —(i) the geographic distribution of older individuals in the State; and (ii) the distribution among planning and service areas of older individuals with greatest economic need and older individuals with greatest social need, with particular attention to low-income minority older individuals; OAA 305(a)(2)(C) and 45 CFR 1321.37.

Each Planning and Service Area (PSA) is allotted an equal amount of "base" funding. This funding is 10% of the total available State and Federal funding divided equally between each of the six PSAs. The remaining funding is then multiplied by the "At Risk" percentages and distributed to each of the PSAs accordingly.

At the February 4, 2016 ICOA Board of Commissioners' meeting, Commissioners and the AAAs agreed to form a subcommittee to analyze the IFF methodology. Multiple scenarios were developed by the subcommittee and presented to the AAAs. On February 25, 2016 all AAA Directors agreed to keep the existing IFF. After all stakeholder and public comments have been received, the ICOA Commissioners approved Idaho's Senior Services State Plan and the Intrastate Funding Formula at the June 21, 2016 special Commissioners' meeting. The funding formula for the current fiscal year (FY2020: July 1, 2019 – June 30, 2020 and reference explanation is provided below:

	Idaho Intras	tate Fundir	ng Formula		SFY 2020				Adopted Apri	30 2013							Updated:		5/10/201
	OAA Title III F		•	VIII) and Stat	e of Idaho Ge	neral Funds			Effective July								Opuateu.		3/10/20
	Total OAA Federa		icidaling ride	vii) una otac	or idanio oc	nerui i unus			\$ 6,018,393	-		\$ 601.83	9 8	397,710	\$ 5,416,	54 \$	3,579,390	\$ 0	.995.49
	Total State Funds								\$ 3,977,100	-	1	Ψ 001,00	-	551,110	Ψ 0,410,	ν Ψ	5,515,550	<b>4</b> 3	,550,45
- 1	Total Funds								7	-									
				900					\$ 9,995,493	-									
- 1	Less 10% Base A	Amount of Feder	ral and State Fun	ds					\$ 999,549	4									
										-									
-	Balance to be D	istributed by F	ormula:						\$ 8,995,944	4									
				F	actors used in V	Veighted Elderl	y Population (A	t Risk)		\$	550000				n n				
								STATE OF STA		RISK)	S				Ē		ormula		
			_					I	_	<b>₩</b>	¥				5		Ĕ		
PSA	2018 TOTAL PSA POPULATION	TOTAL PERSONS AGED 60+ IN PSA	NUMBER OF 85+ LIVING IN POVERT	65+ LIVING ALONE	60+ RACIAL MINORITY (Not Hispanic)	60+ HISPANIC (ETHNIC MINORITY)	60+ LIVING IN RURAL COUNTY	AGED 75+	AGED 85+	WEIGHTED ELDERLY POPULATION (AT	WEIGHTED "At RISK" PERCEN	Federal Fund Base		State Fund Base	Federal Funds Distributed by		State Funds Distributed by F		TOTAL FUND ALLOCATION
1	234,845	64,487	2,935	10,198	1,954	1,131	24,689	17,856	4,570	63,333	17.30%			66,285		950 \$	619,160		1,722,
II	108,520	28,055	1,546	5,042	1,199	341	10,224	8,785	2,611	29,748	8.12%			66,285		093 \$	290,824		897,
III	784,838	159,951	10,340	26,711	5,970	7,924	29,559	43,502	11,926		37.13%			66,285		982 \$	1,328,906		3,506
IV	196,712	41,646	2,887	7,275	1,261	3,363	24,154	12,546	3,518	55,004	15.02%			66,285		731 \$	537,733		1,518
٧	169,849	34,590	1,708	5,882	1,683	1,650	17,795	9,911	2,775	41,404	11.31%			66,285		532 \$	404,776		1,183
VI	221,179	40,013	1,686	6,469	1,015	1,485	15,399	11,449	3,207		11.12%			66,285		265 \$	397,991		1,166
DTAL	1,715,943	368,742	21,102	61,577	13,082	15,894	121,820	104,049	28,607	366,131		\$ 601,83	9   \$	397,710		554 \$	3,579,390		9,995
umn Ref.	1	2	3	4	5	6	7	8	9	10	11	12		13	14		15		16

The sou	rce documentation is from the ID Department of Labor.
Column 1	Source: U.S. Bureau of the Census, 2010-2014 American Community Survey 5-Year Estimates, December 2015, Table S0101. Column used as a reference only.
Column 2	Source: U.S. Bureau of the Census, 2010-2014 American Community Survey 5-Year Estimates, December 2015, Table S0101. Column used as a reference only.
Column 3	Source: U.S. Bureau of the Census, American Community Survey, 2006-2013, 5-year estimates, December 2015, Table B17001. Column 3 is used with columns 4 - 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 4	Source: U.S. Bureau of the Census, American Community Survey, 2006-2013, 5-year estimates, December 2015, Table B17001. Column 4 is used with columns 3 and 5 - 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 5	Source: U.S. Bureau of the Census, Population Estimates - County Characteristics: Vintage 2014, June 2015. Column 5 is used with columns 3 - 4 and 6 - 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 6	Source: U.S. Bureau of the Census, Population Estimates - County Characteristics: Vintage 2014, June 2016. Column 6 is used with columns 3 - 5 and 7 - 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 7	Source: U.S. Bureau of the Census, 2010-2014 American Community Survey 5-Year Estimates, December 2015, Table S0101. Column 7 is used with columns 3 - 6 and 8 - 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 8	Source: U.S. Bureau of the Census, 2010-2014 American Community Survey 5-Year Estimates, December 2015, Table S0101. Column 8 is used with columns 3 - 7 and 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 9	Source: U.S. Bureau of the Census, 2010-2014 American Community Survey 5-Year Estimates, December 2015, Table S0101. Column 9 is used with columns 3 - 8 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 10	Column 10 sums each row for columns 3 - 9 and identify the total "Weighted Elderly Population (At Risk)" per PSA.
Column 11	Weighted At Risk percentage from the Intrastate Funding Formula: Column 11 turns Column 10's totals into percentages. These percentages are used to calculate federal funds in column 14 and state funds in column 15 for each of the PSAs.
Column 12	Federal "Base" funds are evenly divided amongst the 6 PSAs. Column 12 is used to record the total federal base funding located at the top of Column 12 into six even amounts for each of the PSAs.
Column 13	State "Base" funds are evenly divided amongst the 6 PSAs. Column 13 is used to record the total state base funding located at the top of Column 13 into six even amounts for each of the PSAs.
Column 14	Federal Funds multiplied by the Weighted Percentage: Column 14 shows the distribution of the remaining federal funds after the "base" was distributed. The remaining federal funding is located at the top of Column 14 and is multiplied by each "Weighted At Risk Percentage" in Column 11 to determine the appropriate distribution.
Column 15	State Funds multiplied by the Weighted Percentage: Column 15 shows the distribution of the remaining state funds after the "base" was distributed. The remaining state funding is located at the top of Column 15 and is multiplied by each "Weighted At Risk Percentage" in Column 11 to determine the appropriate distribution.
Column 16	Column 16 shows the total federal and state distribution and is a total of Columns 12, 13, 14 and 15.

<u>Service Eligibility:</u> "older individual" or "older persons" refers to an individual 60 years of age or older. OAA 102(a)(40) and Idaho Code Title 67-5006(4).

<u>Developed by:</u> ICOA in consultation with State Plan Steering Committee, AAAs, ICOA Commissioners and feedback from the Public. OAA 305(a)(2)(C).

Funding Source: OAA and SSA funds.

### **Idaho Commission on Aging**

## Department of Health and Human Services 2019 Poverty Guidelines:

Persons In Family or Households 100% Poverty		125 % Poverty	150 % Poverty	
1	12,490	15,613	18,735	
2	16,910	21,138	25,365	
3	21,330	26,663	31,995 38,625	
4	25,750	32,188		
5	30,170	37,713	45,255 51,885 58,515	
6	34,590	43,238		
7	39,010	48,763		
8	43,430	54,288	65,145	
Families with more than 8 persons:	Add 4,420	Add 5,525	Add 6,630	

The 2019 poverty guidelines will be in effect as of January 21, 2019

HHS Website for obtaining program fiscal year poverty guidelines is located at

### https://aspe.hhs.gov/poverty-guidelines

Note: the poverty guideline figures listed on HHS website normally are calculated at 100%. Provided is the HHS chart that has been calculated to meet the 100%, 125% and 150%.

When computing the percentage of poverty guidelines that are required for your program client eligibility, remember HHS charts are always at 100% of poverty. Agencies need to multiply the % of the threshold by your set program eligibility of poverty guidelines.

Area Plan: Attachment F

State Plan: Attachment G, page 32 of 143

#### **ATTACHMENT N**

#### **AREA AGENCY ON AGING II**

#### **EMERGENCY PREPAREDNESS PLAN**

TO MEET THE NEEDS OF SENIORS IN THE EVENT OF NATURAL OR MAN-MADE DISASTER OR OTHER WIDESPREAD EMERGENCY

The Idaho Commission on Aging (ICOA) is actively involved in the emergency management planning and operations of the State of Idaho as a supporting agency. The Administrator of ICOA has appointed a staff member as the Emergency Preparedness/Disaster Coordinator, and two other as the alternates. These individuals work with the Idaho Bureau of Homeland Security (BHS), state agencies and the regional Area Agencies on Aging (AAAs) to plan for and respond to the needs of seniors in an emergency event. The State of Idaho's Executive Order No. 2010-09 and the Idaho Emergency Operations Plan assign specific emergency support activities to the ICOA and the AAAs in assisting and in supporting local and state government prior to and during emergencies and disasters.

As the primary agency, BHS notifies the appropriate persons/agencies and activates the Idaho Emergency Operations Plan (IDEOP). The ICOA supports with following functions:

- Assessing the needs of the elderly and homebound elderly including older individuals with access and functional needs.
- Coordinating senior services through the AAAs during natural or man-made disasters.
- Providing information/assistance to their clientele and the public.
- Coordinating senior citizen centers for shelter, mass feeding, and rest centers.
- Identifying homebound/isolated elderly clients.

The Administration for Community Living (ACL) and the Aging Network composed of State and AAAs, Native American Tribal Organizations, service providers and educational institutions have the legislative mandate to advocate on behalf of older persons and to work in cooperation with other federal and state programs to provide needed services. The authority and responsibility of ACL and the Aging Network to provide disaster services is found within the charge from the Older Americans Act to serve older persons in greatest need and from Title III, Sec. 310, and Disaster Relief Reimbursements, which provides for limited resources to fund disaster response services.

Older adults and people with disabilities are frequently overlooked during the disaster planning, response, and recovery process. Emergency management planning integrates older adults and people with disabilities of all ages—and their caregivers—into community emergency planning, response, and recovery. ACL provides the following link <a href="http://www.acl.gov/Get Help/Preparedness/Index.aspx">http://www.acl.gov/Get Help/Preparedness/Index.aspx</a> with best practices to support the needs of older adults and people of all ages with disabilities during an emergency.

Statement of Understanding (SOU) between the American National Red Cross and The Administration on Aging further demonstrates the commitment and responsibility of the Aging Network to prepare for and respond in disaster relief situations. This SOU emphasizes the Aging Network's ability to perform two basic types of disaster assistance service, which are:

- Advocacy and Outreach assuring that older persons have access to and the assistance necessary to obtain needed services, including locating older persons; getting medical attention if needed, including medications and assistive devices; assisting in the completion and filing of applications for financial and other assistance; and follow-up monitoring to assure needs are met.
- Gap-filling to assure that needed services and follow-up are provided beyond the timeframes and restrictions of other relief efforts if necessary. OAA funds can be used for chore, homemaker, transportation, nutrition, legal, and other temporary or one-time only expenses which help older persons retain maximum independent living.

Methods of Cooperation agreed upon and encouraged in the *Statement of Understanding* include; disaster planning and preparedness, sharing statistical and other data on elderly populations, establishment of disaster advocacy and outreach programs, and making congregate and home delivered meals programs available to the general public during a disaster.

To help meet these obligations, to ensure business continuity and to meet the needs of older citizens in an emergency, the Area Agency on Aging is required to develop an emergency disaster plan, that supports ICOA's emergency disaster plan.

#### **Basic Components of an Area-Wide Disaster Plan:**

1. Name, title, and contact information of AAA person responsible for implementation of area's Disaster Plan:

NAME	TITLE/POSITION	TELEPHONE / EMAIL
Lisa Stoddard	CAP Executive	208-798-4207
	Director	<pre>l.stoddard@cap4action.org</pre>

2. Names, titles and duties of other AAA staff with Emergency Assignments:

NAME (AAA STAFF)	TITLE/POSITION	TELEPHONE Desk & Cell	EMERGENCY ASSIGNMENT
Lisa	CAP Executive	208-798-	Establish initial contact with CAP management staff/employees.
Stoddard	Director	4207	

Lisa Stoddard	CAP Executive Director	208-798- 4207	Convene AAA staff as necessary at a safe, designated location, either at CAP/AAA or the designated alternative location at Disability Action Center, NW, Lewiston. If neither site is safe and inhabitable, the AAA Director will work with the LEPC to determine a safe location.  AAA Director will serve as the primary contact between AAA and emergency personnel; secure safe and operational office space as need/s present; assess and monitor staff and staff assignments & readjust responsibilities as need indicates; assure coordination with and regular updates to the ICOA.  AAA Director will respond to requests for information and assistance made by the LEPC to the best capacity of the AAA.
Carol Patterson	I &A Supervisor,	208-798- 4201 or 208- 790-1187	I & A Supervisor will oversee I & A staff tasks and assign task division.  I & A will pull a report in the agency database, detailing clients who live in the area; Identify homebound, frail, disabled and/or vulnerable adults based on the Idaho Comprehensive Assessment Tool.  AAA staff will manually identify every person in an affected area who is receiving direct services to evaluate their scores and vulnerability given the presenting disaster.  Staff will provide Information and Assistance relating to the needs of elders, family caregivers & providers to law enforcement and the LEPC as needed. Staff will perform duties as assigned by AAA Director.
Richard Kremer	Adult Protection Supervisor	208-798- 4197 or 208-791- 5311	APS staff will be the primary staff to respond

			referred to an onsite emergency worker for assistance. Staff will perform duties as assigned by AAA Director.
Lisa Stoddard	Acting as Contract and Fiscal Specialist	208-798- 4207	Staff member will contact AAA contracted provider agencies to determine if in-home service needs are being met and to what degree. For example, are all HMD clients in a designated disaster area with or without meals/food? Are all Homemaker or Respite clients with or without in-home service workers?  Staff member will coordinate with provider agencies and/or the LEPC to best assure that needs are met.  Staff will perform duties as assigned by AAA Director.
Ruth McQuinn	Ombudsman	208-798- 4195 or 208-1177	The Ombudsman is the primary contact for LTC facilities in an affected area. Staff will Identify LTC facilities in affected area and work with LTC staff and the LEPC to secure safety and care for residents at another NH, Assisted Living or Hospital, as requested. Staff will perform duties as assigned by AAA Director.

3. Alternate AAA business location if primary office is inaccessible or uninhabitable:

LOCATION NAME AND ADDRESS	TELEPHONE / OTHER CONTACT NUMBERS
Disability Action Center, NW—Lewiston	208-746-9033
330 5th St, Lewiston, ID 83501	

4. Describe the AAA's process to have personal and community disaster preparedness information available for clients, services providers and the general public:

Proactive planning and education: Information and Assistance staff provide community presentations at senior housing complexes on a regular, monthly basis. The AAA distributes and has available at the AAA at least emergency preparedness guides for older citizens: *The Calm Before the Storm; It Could Happen To Me, and Fire Sense. These well-developed resources are provided by The Hartford Financial Services Group, Inc.* 

Distribution of information to homebound individuals receiving AAA Services: The AAA will annually partner with in-home provider agencies and senior meal sites to assure access of homebound individuals to emergency preparedness information. Distribution will be coordinated with provider staff and Home Delivered Meal Volunteers.

Annually, the AAA invites an Emergency Preparedness planner to the AAA Advisory Council meeting or hosts an emergency planner at a meal site to provide information, education and to disseminate resources. In the Spring of 2017, for example, the AAA is partnering with the Lewis County Emergency Planner to specifically address Cascadia Rising.

Emergency Care Needs for individual/s requiring Long Term Care: The AAA has coordinated with long term care, LTC, centers to accommodate high risk adults typically living at home with assistance, and, who have had to evacuate in an emergency. In this kind of a situation, the AAA and the LTC center, upon learning of an at-risk adult, made it possible for short term admission and care of the individual until such time that it was safe for her and her caregiver to return home.

5. Local Emergency coordinators and Red Cross coordinators in EACH county or city with whom the AAA coordinates emergency planning for the needs of older citizens, and will collaborate during an emergency or disaster situation:

AGENCY NAME AND ADDRESS	COUNTY/ OTHER JURISDICTION	CONTACT NAME	PHONE / E-MAIL
Idaho Office of Emergency Management	North-central Idaho	Robert Feeley	208-272-7470
Nez Perce County Emergency Coordinator	Nez Perce County	Bryant Wolfe	208-799-3084
Lewis County Emergency Management	Lewis County	Greg Johnson	208-937-2661
Nez Perce Tribe Emergency Manager	Nez Perce Tribe	John Wheaton	W: 208-621-3760 Cell: 208-790-3619
Clearwater County Emergency Management	Clearwater County	Don Gardner	208-476-4064
Idaho County Disaster Management	Idaho County	Jerry Zumalt	208-983-3074

6. Included clauses in contracts, grants and agreements with service providers describing and assuring their response during a disaster or emergency.

#### Disaster/Emergency Response

In the event of an emergency or disaster, the Service Provider will have timely contact and collaborate with CAP/AAA on a coordinated response following the CAP/AAA Disaster Plan.

In the next contract period, the AAA will develop more detailed contract language during the first year of the Area Plan that specifically addresses emergency provider contact information and client safety and annual emergency disaster preparedness education and information.

7. List service providers of major programs (transportation, nutrition, homemaker, etc.) with whom the AAA will coordinate emergency services.

SERVICE PROVIDER NAME AND ADDRESS	COUNTY/ OTHER JURISDICTION	CONTACT NAME	PHONE / E-MAIL
Alternative Nursing Services, 1029 Main St., Lewiston, ID 83501	Clearwater Co., Idaho Co., Latah Co., Lewis Co., Nez Perce Co. Homemaker/Respite Care	Branden Beier	208-746-3050 beierb@ansidaho.com
Addus 1034 Main Street Lewiston, ID 83501	Clearwater Co., Idaho Co., Latah Co., Lewis Co., Nez Perce Co. Homemaker/Respite Care	Jay Ostvig	208-746-8881 jostvig@addus.com
City of Lewiston Operating in Lewiston Community Center and the Orchards United Methodist Church	Home Delivered	Scot McGee	208-746-6983 SeniorNutrition@CityofLewiston.org
Clearwater County Senior Citizens 930 Michigan Avenue Orofino, ID 83544	Congregate and	Deryl Ketchum	208-476-4238 theridgeman@orofino-id.com
COAST Transportation 210 S Main Street Colfax, WA 98111	Clearwater Co., Idaho Co., Transportation	Craig VanTine	509-397-2935 cvantinecoast@gmail.com
Compassionate Care 150 126 <sup>th</sup> Street Orofino, ID 83544	Clearwater Co., Idaho Co., Lewis Co., Nez Perce Co. Homemaker/Respite Care	Branden Beier	208-476-6326 beierb@ansidaho.com
Devins Homecare, LLP 221 W Main, #5 83530	Idaho Co., Lewis Co., Homemaker/Respite Care	Eddie Devin	208-983-1237 dhc@mtida.net
Friendly Neighbors Senior Citizens, INC 412 Third St. Moscow, ID 83843	Latah County Congregate and Home Delivered Meals	Bill Terrio	208-822-1562 weterrio@gmail.com

Interlink Volunteers 817 A 6 <sup>th</sup> St. Clarkston, WA 99403	Nez Perce Co., Latah Co., Volunteer Transportation, Minor Home and Chore assistance	Deb Snyder	509-751-9143 debsnyder@qwestoffice.net
Kamiah Senior Center 1215 N Maple Street Kamiah, ID 83536	Congregate and	Mel Tuttle	208-935-0244 melrobin.tuttle@gmail.com
Kendrick Senior Center 104 s. 6th Street Kendrick, ID 83537	Latah County Congregate and Home Delivered Meals	Lisa Kaschmitter	208-289-5031 myseniormeals@gmail.com
Nezperce Senior Center 501 Cedar Street Nezperce, ID 83543	Lewis County Congregate and Home Delivered Meals	Marjorie McCully	208-937-2465 wc1mc@q.com
Open Arms Home Care, LLC 1141 Webster St. Clarkston, WA 99403	Clearwater Co., Idaho Co., Latah Co., Lewis Co., Nez Perce Co. Homemaker/Respite Care		208-791-2386 openarmshc@outlook.com
Potlatch Senior Citizens 645 Pine St. Potlatch, ID 83855	Latah County Congregate and Home Delivered Meals	Vicki Schott	208-875-1071 v.schott@frontier.net
Salmon River Senior Citizens, INC. POB 1285 Riggins, ID 83549	Idaho County Congregate and Home Delivered Meals	Nightfeather Bogan	208-628-4147 nightfeather@frontiernet.net
Salmon River Transit POB 1285 Riggins, ID 83549	Idaho County Transportation	Nightfeather Bogan	208-628-2394 nightfeather@frontiernet.net
Senior Citizens Dollar a Month Club 108 N. State St. Grangeville, ID 83530	Idaho Co., Lewis Co., Congregate and Home Delivered Meals	Dolores Kindall	208-962-3231 srnutrition@mtida.net
Seubert's Quality Home Care	Clearwater Co., Idaho Co., Latah Co.,	Karen McKinley	208-743-1818 sqhclewiston@cableone.net

1702 16 <sup>th</sup> Avenue Lewiston, ID 83501	Lewis Co., Nez Perce Co. Homemaker/Respite Care		
SMART Transit	Latah County	Tara	208-883-7747
1006 Railroad Street	Transportation	LeGresley	Tara@r2transit.com
Moscow, ID 83843			
Sundance Services	Idaho Co., Lewis Co.,	Esther Owen	208-983-0041
710 NW 5 <sup>th</sup> Street	Homemaker/Respite		Sundance.eo@gmail.com
Grangeville, ID	Care		
83530			
Weippe Hilltop	Clearwater County	Tressa Soles	208-435-4553
Senior Citiziens	Congregate and		tressasoles@yahoo.com
115 1 <sup>st</sup> Street West	Home Delivered		
Weippe, ID 83553	Meals		

8. Describe the AAA's process to identify homebound, frail, disabled, isolated and/or vulnerable clients who may need assistance in the event of a man-made or natural disaster:

The AAA collects certain client data during a client service assessment. The AAA can query the database for clients who receive service in (an affected) disaster zone. In the event of a disaster or perceived disaster, AAA staff can identify clients who live in the area, and, identify homebound, frail, disabled and/or vulnerable adults based on the Idaho Comprehensive Assessment Tool data collected.

In the event of a disaster, the AAA will attempt to contact all consumers receiving AAA services The AAA does not have the capability to track consumers reliant on durable medical equipment, oxygen and/or drugs.

Staff will provide Information and Assistance relating to the needs of elders, family caregivers & providers to law enforcement and the LEPC as needed, based on the collected data in a client assessment.

9. Provide a process for "call downs" to service providers, nursing homes and residential care facilities, individual case management clients, etc., to check on their preparedness status and welfare in the event of an emergency:

A call down is a series of telephone calls from one person to the next used to relay specific information. An established and exercised call down protocol will be used during emergency situations to deliver urgent information to and for communication among members and staff. Please defer to the AAA staff call down procedure in #2 above, which indicates the name, title and duties of Community Action Partnership/Area Agency on Aging.

10. Describe the AAA's process for intake and recording of information about the disaster related needs of older people, providing access to needed services, and follow-up during and beyond the recovery period.

The capability and extent of assistance that the AAA can provide, in case of a disaster or emergency, is very limited. The AAA is primarily of greatest assistance in disaster relief, assistance and follow-up services to older adults and family caregivers. The AAA recognizes that the first 24 hours of a disaster or emergency are key to accessing relief and assistance. In case of a disaster or emergency the following information should be recorded on any known victims:

- Name
- Home address
- Telephone number, if working
- Known health conditions
- Next of kin and telephone number
- Nature of need
- Location of individual if not at home

The AAA understands that the above information should be relayed to local emergency personnel as quickly as possible. The AAA Director and the Administrator of the Idaho Commission on Aging should be made aware of all efforts accomplished by the AAA and local emergency personnel as soon as possible.

It is imperative any contracted nutrition providers who provide commodities or meals during a disaster or emergency, maintain accurate records of what was provided to whom, when, and under what circumstances and at whose direction. The AAA understand that these services are reimbursable by the federal government if properly authorized and that good records to make a claim are required.

The AAA involved must be able to indicate how many older persons receiving AAA services are known to be residing in a given area and submit this information onto the Idaho Commission on Aging.

11. Describe the AAA's process for staff and service providers to record employee's time and expenses associated with disaster related activities (see example below: necessary to apply for reimbursement in the event of a presidential disaster declaration):

# Authorized Peron's Name:

Date	Time Worked	Emergency Purchases Made	Purpose of Purchase	Costs of Emergency Purchase	Personnel Miles Driven	Store Purchase made and Location	Receipt Required	Instructions & information	Instructions Came From

12. Describe activities the AAA will undertake during the contract period to expand emergency preparedness of the Aging Network within the PSA (i.e. attend LEPC meetings, work with local emergency management officials to advocate for inclusion of older citizens' needs in emergency planning, establish CERT Training in senior centers, make 72-hour kits available for homebound clients, establish "call-down' lists and procedures to be used during emergencies, include emergency preparedness activities in contracts with providers, etc.)

The AAA will attend Local Emergency Management Meetings and offer Emergency Preparedness education in congregate settings, as well as to elders, homebound elders and family caregivers.

The AAA will update our call down roster annually.

AAA will require in contract in the next contract renewal, that all senior meal sites in the PSA, identify person who wish to become CERT trained.

AAA will work with the LEPC to assist senior centers to develop a call down procedure.

#### SLIDING FEE SCALE

State Law, Title 67, Chapter 50, Idaho Code, requires that fees to consumers for services provided under the Senior Services Act will be calculated by use of a sliding fee schedule, based upon household income. For Federal Funds utilize the individuals Income only. The Reauthorized OAA permits cost sharing for all services funded by this Act, with certain restrictions [OAA, Title III, Section 315 (a)]. The fee will be redetermined annually. Income, for this purpose, means gross income from the previous year, including, but not limited to, Social Security, SSI, Old Age Assistance, interest, dividends, wages, salaries, pensions, and property income, less non-covered medical and prescription drug costs. This form should be used after completion of the Standard Income Declaration Form.

#### Circle the client's income range, then circle the Percentage of the hourly fee the client will be required to pay.

Client's Name:						Date:			
								RESPITE	ADULT DAY
MONTHLY INCOME			ANNUAL INCOME			FEE	HMK FEE	FEE	CARE FEE
Individual Income						%	%	%	%
		\$1,041.00			\$12,490.00	0%			
\$1,041.00	-	\$1,249.00	\$12,490.00	-	\$14,988.00	20%			
\$1,250.00	-	\$1,457.00	\$14,989.00	-	\$17,486.00	40%			
\$1,458.00	-	\$1,665.00	\$17,487.00	-	\$19,984.00	60%			
\$1,666.00	-	\$1,874.00	\$19,985.00	-	\$22,482.00	80%			
\$1,875.00	-	& Over	\$22,483.00	-	& Over	100%			
TWO Persons in Household						%	%	%	%
	-	\$1,409.00		-	\$16,910.00	0%			
\$1,409.00	-	\$1,691.00	\$16,910.00	-	\$20,292.00	20%			
\$1,692.00	-	\$1,973.00	\$20,293.00	-	\$23,674.00	40%			
\$1,974.00	-	\$2,255.00	\$23,675.00	-	\$27,056.00	60%			
\$2,256.00	-	\$2,537.00	\$27,057.00	-	\$30,438.00	80%			
\$2,538.00	-	& Over	\$30,439.00	-	& Over	100%			
THREE Persons in					%	%	%	%	
	-	\$1,778.00		-	\$21,330.00	0%			
\$1,778.00	-	\$2,133.00	\$21,330.00	-	\$25,596.00	20%			
\$2,134.00	-	\$2,489.00	\$25,597.00	-	\$29,862.00	40%			
\$2,490.00	-	\$2,844.00	\$29,863.00	-	\$34,128.00	60%			
\$2,845.00	-	\$3,200.00	\$34,129.00	-	\$38,394.00	80%			
\$3,201.00	-	& Over	\$38,395.00	-	& Over	100%			
FOUR Persons in Household						%	%	%	%
	-	\$2,146.00		-	\$25,750.00	0%			
\$2,146.00	-	\$2,575.00	\$25,750.00	-	\$30,900.00	20%			
\$2,576.00	-	\$3,004.00	\$30,901.00	-	\$36,050.00	40%			
\$3,005.00	-	\$3,433.00	\$36,051.00	-	\$41,200.00	60%			
\$3,434.00	-	\$3,863.00	\$41,201.00	-	\$46,350.00	80%			
\$3,864.00	-	& Over	\$46,351.00	-	& Over	100%			
The full cost for one hour of Homemaker Service				is:	\$				
The full cost for one hour of Respite Service is:				\$					
The full cost fo	r one	hour of Adul	t Day Care is:		\$				
Percentage Above Poverty Line:			100%						
Each Additional Person: \$ 12,140.00 The 2019 poverty guidelines will be in effect as			\$ 12,140.00		21 2010				
The 2019 pov	erty gu	ndelines will	be in effect as o	1 Janu	ary 21, 2019.				
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https://aspe.hh	s.gov/j	poverty-guid	<u>eiines</u>						
Area Plan: Atta	o alberta	nt E							
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