Regional Plans on Aging

Department for Aging and Independent Living

Fiscal Years 2023-2025

Revised December 10, 2021

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In accordance with the Older Americans Act of 1965, as amended, Section 307(a)(1), the Department for Aging and Independent Living prepared a Kentucky Comprehensive Aging Area Plan format with input from Area Agencies on Aging and Independent Living. This format is to be used by area agencies on aging and independent living in developing an area plan for the administration and provision of specified adult and aging services in each planning area. The Area Plan required for FY 2023-2025 will be three-year plan cycle.

Area plans are prepared and developed by the Area Agencies on Aging and Independent Living. Each agency is responsible for the plan for the multi-county planning and service area (PSA) in which the agency is located. The area plan should reflect the efforts of the AAAIL in:

- **Determining the needs of the older population within its service jurisdiction;**
- **Arranging through a variety of linkages for the provision of services to meet those needs; and**
- **Evaluating how well the needs were met by the resources applied to them.**

In addition to those services mandated under Title III-B (supportive services), Title III-C (congregate and home-based nutrition), Title III-D (disease prevention), Title III-E (caregiver), Title VII (elder abuse, ombudsman), plans provide for Homecare, Adult Day Care and Alzheimer's Respite, Personal Care Attendant, SHIP, LTC Ombudsman, Kentucky Family Caregiver, Consumer Directed Options, Community Preparedness Planning and a range of other programs, many of which are planning and service area specific.

Due Date: Completed area plans are due March 31, 2022.

Number of Copies: Submit a copy of this area plan electronically to DAILAging@ky.gov

The disaster plan and Senior Community Service Employment Program are separate plans and not included in this plan. Separate instructions will be sent for those plans by the program coordinator.

Area Agency on Aging and Independent Living

I. Mission and Vision

Some things to consider when developing your mission and vision:

- **Why do we exist? Who do we serve? and Why? What values govern our decision-making?**
- **What do we ultimately see as our vision for older Kentuckians and their caregivers in our AAA region?**

1. **How do you describe the purpose of your agency and what you are trying to achieve?**

Gateway AAAIL's ultimate goal is to provide services within our parameters to older people and their caregivers. In our endeavors to do so, great efforts are made to treat and respect clients in a way that we would want services delivered to our own families. Our focus is to provide assistance to enhance our older people, disabled, and caregivers; quality of life, specifically targeting rural, low income, minority, and limited English speaking individuals eligible for the Older Americans Act (OAA) programs.

2. **Please provide a short narrative or introduction which includes basic information about the agency and the area it serves.**

The Gateway AAAIL operates under the Gateway Area Development District (GADD) Board of Directors, and is advised by the Gateway Advisory Council on Aging. The GADD Board is comprised of locally elected officials and citizen members from the counties and cities. The Advisory Council on Aging was established and operates under the requirements as outlined in the OAA to serve the eligible populations in Bath, Menifee, Montgomery, Morgan, and Rowan Counties in rural northeastern Kentucky.

3. **Provide examples of how your agency is working to meet the CHFS Mission: to be a diverse and inclusive organization providing programs, services and supports that protect and promote the health and well-being of all Kentuckians and their communities include examples of**
   1. **Equity**
   2. **Health and well-being**
   3. **Resilient individuals and communities**
   4. **Structural Economic Support**

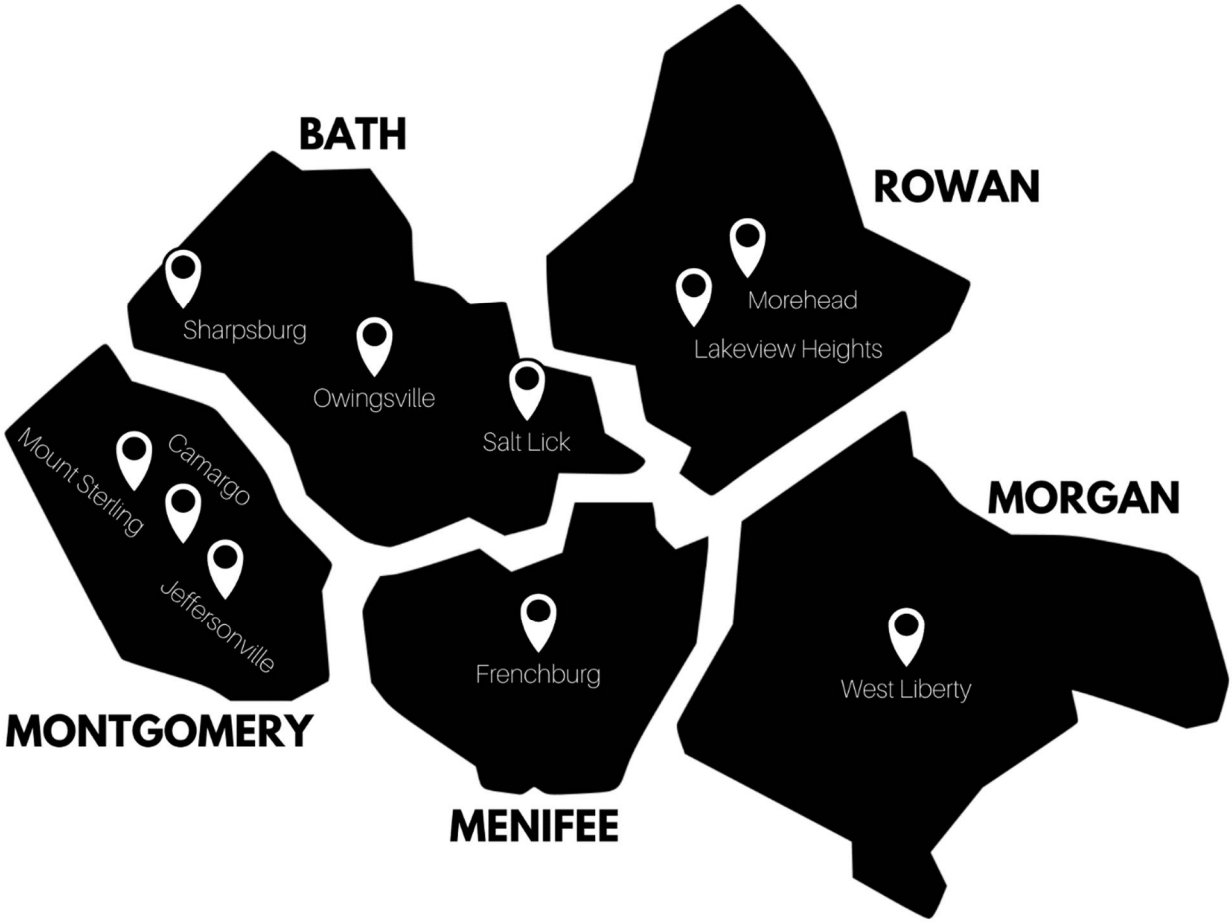
Gateway AAAIL effectively provides services to all those individuals that meet the requirements set forth under the OAA. GADD does not discriminate or deny services to anyone based on the protected classifications established under Title VI, Civil Rights Act of 1964. The Gateway AAAIL strives to ensure services are being provided to meet the demand of the clients to promote the health and well-being of each individual we provide services to with the goal of producing more resilient individuals and communities through outreach and promotion of services. Gateway AAAIL services target those who are economically disadvantaged to assist those who may not have the financial means to provide the services for themselves.

II. Service Area

4. How do you define the geographic boundaries of your service area region? Please be sure to indicate which counties you serve. Insert a map of your region as well.

GADD AAAIL services five counties in rural northeastern Kentucky. It includes Bath, Menifee, Morgan, Montgomery and Rowan Counties.

*Attach Map (Only utilize the following file types: *.bmp, *.jpg, *.gif, *.png, *.tif)*



III. Profile of Your Region

5. Please complete a demographic profile of your region by answering the questions below.
(Much of this data is available through the University of Louisville website; data are available by KYAAAIL areas.)
www.ksdc.louisville.edu/

Year for which data is current: 2021

	Information Not Available	
a. Percent of persons 60 and older in your region	☐	**19**
b. Percent of region's total population over 60	☐	**19**
c. Percent 60+ who are low income (poverty rates as provided by HHS)	☐	**18**

d. Percent 60+ who are minority	☐	**3.45**
e. Percent 60+ who live in rural areas	☐	**19**
f. Percent 60+ with severe disability (3 or more ADL/IADL impairments)*	☐	**33.5**
g. Percent 60+ with limited English proficiency	☐	**4**
h. Percent 60+ with Alzheimer's Disease or related dementia	☐	**16**
i. Percent 60+ isolated or living alone	☐	**28.8**
j. Percent of grandparents or older relative raising a child under 18	☐	**2.3**

**ADLs (Activities of Daily Living): feeding, getting in/out of bed, dressing, bathing, toileting. IADLs (Instrumental Activities of Daily Living): Meal preparation, light housework, heavy housework, laundry, shopping, taking medicine*

IV. Funding Sources for Your AAAIL

6. In your last fiscal year, what percent of your revenue was from…	**%**
a. Federal grants/contracts	**50.67**
b. State government grants/contracts	**32.00**
c. Local government grants/contracts	**3.12**
d. Contracts obtained via a Network Lead Entity*	
e. Foundation grants/contracts	
f. Corporate grants/contracts	
g. Direct mail fundraising	
h. Fundraising events	
i. Individual contributions	
j. Fees for services	**12.19**
k. Other (Specify: _Program Income_)	**2.02**
Total.....	**100.00**

***Network Lead Entity means an organization** who has formal partnerships with health care and other relevant sectors to address health and social needs in a coordinated way. NLEs function as a one-stop-shop for contracting with health care entities, and often deploy a multi-payer strategy to ensure individuals have access to needed programs and services; beyond contractual arrangements with health care entities, other sources of financing that networks may draw upon are federal grants (e.g. Older Americans Act and discretionary) or other publicly-funded resources at the state or local levels, philanthropic support, private pay arrangements, and civic/community investment (e.g. local businesses, United Way, etc.). An important part of any robust community integrated health network is the inclusion of evidence-based health promotion and disease prevention programs.

7. List below all sources of program and staff revenues for your agency.

	Name of Source	**Value ($ amount) for current fiscal year**
A	Federal	**$1,820,410.00**
B	State	**$1,227,923.00**

C	Local	$ **195,018.00**
D	Service Fees	$ **467,100.00**
E	Program Income	$ **8,670.00**
F		$
G		$
H		$
I		$
J		$
K		$
L		$
M		$
N		$
O		$
P		$
Q		$
R		$
S		$
T		$
U		$
V		$
W		$
X		$
Y		$

Z		$
AA		$
BB		$
	GRAND TOTAL	**$ 3,719,121.00**

↑ *Use these letters to indicate program funding sources in Section V.*

V. Services Offered as Part of Your Plan

	Is this type of service offered? Yes	No	Is service directly provided by AAAIL? Yes	No	Is service provided under contract? Yes	No	Number of people served in FY21	Amount spent in FY21 (round to nearest hundred)	Funding source(s) (use letters from Section IV)
a. Advocacy	☒	☐	☒	☐	☐	☒			
b. Information and Referral	☒	☐	☒	☐	☐	☒	162	2,500	A,B
c. Legal Assistance	☒	☐	☐	☒	☒	☐	52	19,200	A,B,C
d. Transportation	☒	☐	☒	☐	☐	☒	6	200	A,B,E
e. Home Delivered Meals	☒	☐	☒	☐	☐	☒	460	602,800	A,B,C,E
f. Congregate Dining	☒	☐	☒	☐	☐	☒	287	151,100	A,B,E
g. Senior Center	☒	☐	☒	☐	☐	☒			
h. Mental Health Services	☒	☐	☐	☒	☐	☒			
i. Dementia Care or Support Group	☒	☐	☒	☐	☐	☒			
j. Caregiver Support Group	☒	☐	☒	☐	☐	☒		2,400	A,B
k. Caregiver Training or Education	☒	☐	☒	☐	☐	☒			
l. Training or Education for Older Adults	☒	☐	☒	☐	☐	☒			
m. Training or Education for Service Providers	☒	☐	☒	☐	☐	☒			
n. Training or Education for Volunteers	☒	☐	☒	☐	☐	☒			
o. Case Management	☒	☐	☒	☐	☐	☒	71	64,500	A,B
p. Housing or Shelter Assistance	☐	☒	☐	☒	☐	☒			
q. Personal Care or Home Health Services	☒	☐	☐	☒	☒	☐	50	56,800	A,B,C
r. Homemaker Services	☒	☐	☐	☒	☒	☐	59	46,300	A,B,C
s. SHIP	☒	☐	☐	☒	☒	☐		22,400	A
t. Elder Abuse Prevention	☒	☐	☒	☒	☒	☐		1,600	A,B
u. Disease Prevention Health Promotion (III-B)	☒	☐	☒	☐	☐	☒			
v. Disease Prevention Health Promotion (III-D)	☒	☐	☒	☐	☐	☒	35	7,300	A

w. Adult Day	☐	☒		☐	☒		☐	☒				
x. Consumer Directed Option	☒	☐		☒	☐		☐	☒		188	387,900	D
y. Ombudsman	☒	☐		☐	☒		☒	☐			47,400	A,B,C
z. Telephone Reassurance	☐	☒		☐	☒		☐	☒				
aa. Friendly Visitors	☐	☒		☐	☒		☐	☒				
ab. Personal Care Attendant Program	☒	☐		☐	☒		☒	☐		16	239,600	B
ac. Senior Community Service Employment	☐	☒		☐	☒		☐	☒				

	Is this type of service offered?		Is service directly provided by AAAIL?		Is service provided under contract?		Number of people served in FY13	Amount spent in FY21(round to nearest hundred)	Funding source(s) (use letters from Section IV)
	Yes	**No**	**Yes**	**No**	**Yes**	**No**			
ad. Other – Specify: Assisted Transportation (IIIB)	☒	☐	☒	☐	☐	☒	6	300	A, B
ae. Other – Specify: Outreach (IIIB)	☒	☐	☒	☐	☐	☒	82	68,800	A, B
af. Other – Specify: Respite (Homecare & IIIE)	☒	☐	☒	☐	☐	☒	31	46,500	A, B
ag. Other – Specify: Supplemental Services (Homecare & IIIE)	☒	☐	☒	☐	☐	☒	64	38,200	A, B
ah. Other – Specify: Asssistance (III E)	☒	☐	☒	☐	☐	☒	37	10,100	A, B
ai. Other – Specify: Assessment (Homecare)	☒	☐	☒	☐	☐	☒	45	30,600	B
aj. Other – Specify:	☐	☐	☐	☐	☐	☐			
ak. Other – Specify:	☐	☐	☐	☐	☐	☐			
al. Other – Specify:	☐	☐	☐	☐	☐	☐			

In regards to Older Americans Act Programs, please answer the questions below.

What percent of your service population is minority?	**3%**
What percent of your service population is low income?	**58%**
What percent of your service population is limited English proficiency?	**0%**
What percent of your service population is rural?	**100%**

In regards to state funded Homecare Program, please answer the questions below.

What percent of your service population is minority?	**2%**
What percent of your service population is low income?	**68%**
What percent of your service population is limited English proficiency?	**0%**
What percent of your service population is rural?	**100%**

In regards to the Medicaid Waiver Program, please answer the questions below.

What percent of your service population is minority?	**3%**
What percent of your service population is low income?	**98%**
What percent of your service population is limited English proficiency?	**<1%**
What percent of your service population is rural?	**100%**

VI. Program Explanation

Detailed program-specific policies and procedures will be reviewed during the yearly on-site monitoring. Please ensure that each program listed in the previous question has policies and procedures and that these are available for review during onsite monitoring. Assurances will also be verified during monitoring.

VII. Partnerships and Collaborations

8. Do you engage in partnerships or collaborations with other programs or agencies in your service area?

☒ Yes
☐ No

9. If yes, please identify key partners and collaborators, what activities you collaborate on, and when this partnership or collaboration began (year). Attach additional sheets as necessary to list all partnerships and collaborations.

	Collaboration Partner	Activity or Focus of Collaboration	Approx. Year Began
1	Legal Aid of the Bluegrass, DCBS, RSVP, Long term care facilities, Law Enforcement, Guardianship, Pathways, St. Claire Hospital, MSU, other regional Elder Abuse councils	Local Coordinating Council on Elder Abuse	2003
2	Morehead-Rowan County Repair Affair	Home repairs to qualifying elderly	2009
3	MOU with City Councils & Fiscal Courts	Provide funds for Title III meals	2001
4	Long Term Recovery	Continued relief to tornado impacted community	2012
5	Inter-agency Council-Multi agencies through County Areas	Membership in each council in (5) five counties	2003
6	Friendly Visiting	Nursing homes and PC homes	2001
7	Kentucky Fire Commission, Local Fire Departments	CPR & First Aid Training for Medicaid Waiver In-Home Employees	2016
8	Local Health Departments & Physician Offices	TB Skin Tests for Medicaid Waiver In-Home Employees	2016

9	Alzheimer's Association, Gateway Community Action, Goodwill Industries of KY, KY DEPT of Agriculture, KY Career Center, Senior Health Care Services, Regency Memory Care, KY Commission for Deaf & HOH	Support Groups Inter-agency meetings, LIHEAP, etc. Senior Community Service Employment Senior Farmer Market Nutrition Prog. Health Information Behavior Health unit for geriatric pts. Respite Care Hearing Devices and Assistance	2018
10	KY State University, UK, local Extension Offices	SNAP Education & Health Promotion Classes	2019
11	Kentucky Homeplace	Medical, social,& environmental services	2019
12	LKLP	Transportation	2019
13	Sterling Health Solutions	Transportation & Medical services	2019
14	Post Clinic	Free Medical & Dental Services	2019
15	UofL Trager Institute	Telemedicine Grant Program	2020
16	Local school districts, hospitals, banks, churches, Rowan County Community Fund, & Blue Grass Community Foundation	Care packages and Food Donations	2020
17	KY Safe Aging Coalitions	Fall Prevention	2021
18	Walgreens	COVID pop up vaccination clinic	2021
19	Department for Public Health	Pandemic and vaccination efforts	2021
20	Local Emergency Management	Warming shelters	2021
21	KYTC-Office of Transportation Delivery	5310 Senior Center Fleet Vehicles	2018

VIII. Capacity Assessment

10. Do you collect information from seniors, caregivers, service providers, elected officials, committee members, and/or interested citizens about needs or gaps in services for older adults in your service area?

☒ **Yes**
☐ **No**

11. If yes: How do you collect this information?

GADD collects information in the following ways: Each senior center has a box for suggestions, homecare clients, aging advisory council, GADD Board members, inter-agency meetings, satisfaction surveys, incoming calls & referrals through the ADRC phone line, and the needs assessment survey.

12. How often do you collect this information?

☐ **Monthly**
☐ **Quarterly**
☐ **Semi-annually**
☐ **Annually**
☒ **Other: Monthly & Annually**

13. When did you conduct your most recent capacity assessment? Jan. & Feb. 2022
(month and year)

14. When is the next capacity assessment scheduled? Jan. 2026
(month and year)

15. How will you use this information to coordinate planning and delivery of services for older adults and persons with disabilities?

We will take the information gathered, analyze it and make the necessary changes to improve our services.

IX. Capacity Building Plan

16. Identify your top three overall agency goals for this planning cycle.

1. Meals – GADD's goal is to continue to provide meal services to all those who qualify for Title III C1 & C2 services. Due to the COVID-19 pandemic, we received additional funding to open up all clients on our meal waiting lists, and it is our goal to be able to continue this service.

2. III-D – GADD's goal is to provide more Title III-D services to our participants. Due to the COVID-19 pandemic, we were not able to provide as many III-D services as we would have liked due to the senior centers being closed to in-person meals and activities; because of this, we hope to place more of an emphasis on this program.

3. ADRC – GADD's goal is to be knowledgeable in available resources outside of the services offered within the agency. Staffing stability for the ADRC program is a priority as well.

17. What is your plan for achieving these goals in the coming planning cycle? Please include how you will gauge your progress throughout the planning cycle.

Regarding meals – GADD's plan is to continue opening eligible clients as long as there is sufficient funding. Regarding III-D – GADD's plan is to heavily market the III-D activities and pick activities that our participants are more interested in (i.e., Drumtastic). Regarding ADRC –

GADD's plan is to attend inter-agency meetings, health fairs, and community events to learn of any services and programs that are available.

18. Were the goals from the last plan period completed?

☒ **Yes**

☐ **No**

If not, why?

N/A

19. What were your goals from the previous planning cycle that were not achieved and why?

N/A

20. Total number of program managers/supervisors [5] **Number**

21. Total number of program staff [18] **Number**

22. Total number of program volunteers (in house & contract) [22] **Number**

23. Do all supervisors (in house & contract) have access to computers with internet access?

☒ **Yes, all**
☐ **Half or more**
☐ **Less than half**
☐ **No, none**

24. Do all direct service (in house & contract) staff have access to computers with internet access?

☒ **Yes, all**
☐ **Half or more**
☐ **Less than half**
☐ **No, none**

25. Do volunteers (in house & contract) have access to computers with internet access?

☒ **Yes, all**
☐ **Half or more**
☐ **Less than half**
☐ **No, none**

26. How many new volunteers were recruited in the past 12 months? [9] Number
Which programs? [C2, Medicare SHIP, Ombudsman]

27. How many new staff were hired by the AAAIL in the past 12 months? [5] Number
Which programs? [IIIB, C1, C2, Homecare, ADRC]

28. Are there written job descriptions for all positions in your agency?

Staff? ☒ **Yes** ☐ **No**

Volunteers? ☒ **Yes** ☐ **No**

29. Do you conduct annual performance reviews for all staff?

☒ **Yes**
☐ **No**

If no, please explain?

30. Do you have any plans to help staff members increase knowledge or skills during the next year?

☒ **Yes**
☐ **No**

31. If yes, please describe your plans and the specific sources for these trainings.

Gateway plans to meet all training requirements specific to each program. All staff will be trained on abuse, neglect, and exploitation. Plans of inviting a representative of the Attorney General office to train of scams and who to contact. Staff will complete the Senior Center Community College, evidence based exercise program training, CPR and Food Handlers Certifications. All staff completes the Title VI, Civil Rights Act of 1964 training annually.

32. Do you have a plan to promote volunteer opportunities across programs? Be sure to specifically include SHIP, Senior Center Services and Ombudsman

☒ **Yes**
☐ **No**

33. If yes, please describe your plans. If no, why not?

Regarding volunteers in the Senior Centers, GADD works with RSVP to obtain volunteers for the senior center program. We are currently not promoting volunteers in the senior center due to COVID.

In regard to SHIP: Volunteer recruitment and retention is difficult due to the training process and the complexity of the different benefit programs. In an attempt to recruit and retain volunteers, we have developed the following systems:

- **Created volunteer positions that require less training and responsibilities, yet still provide necessary, quality service to clients;**
- **Recruit volunteers through presentations and contact with representatives from local community agencies/organizations;**
- **Developed a welcome guide that describes the program and begins the training process;**
- **Developed handbooks for several of the volunteer positions that describe the volunteer role and provide direction on how to fulfill the requirements for that position;**
- **Created a loosely structured mentoring system. We communicate monthly and sometimes weekly with volunteers through a distribution list. Through the distribution list volunteers are able to reach out to one another for guidance and assistance;**

- **Maintain OneDrive account which allows us to upload important information that can be accessed at any time in an effort to provide volunteers with the most up to date information about benefit changes. This account also allows volunteers to complete and submit their client contact forms, public/media forms and training logs by email directly from the site;**
- **Employ a volunteer coordinator whose responsibility it is to assure volunteers are adequately recruited, trained, nurtured, and retained;**
- **Host regular SHIP program meetings and conference calls;**
- **Run public service announcements, using both print and online media sources, to solicit those interested in volunteering.**

In regard to Ombudsman: The Ombudsman and SHIP programs do promote volunteer opportunities across programs. We do not have individual volunteer programs. All individuals volunteer with Legal Aid of the Bluegrass (LABG), and then tailor their service to individual programs. Because the Ombudsman and SHIP programs operate in the same unit within LABG, volunteers in our programs naturally ebb and flow between us. The District Ombudsman often has Morehead State University student interns who request to work with the Long Term Care Ombudsman Program (LTCOP). Those interns are often cross-trained to work with the SHIP program, especially during Medicare Open Enrollment season. All volunteers who work with either program are trained in the functioning of both units, and how to refer clients to either unit, based on the issue they need addressed.

34. How will you measure your progress toward achieving your overall agency goals?

Progress will be measured by monthly monitoring of clients and units.

X. Public Hearing

35. Area Plan Public Hearing

Date	Time	Location/Method	# of participants participating	# of staff participating	# of others participating
3/23/2022	10:30	Gateway Area Development District 110 Lake Park Drive Morehead, KY		3	

Date plan available for review	Place(s) available for review	Dates advertised	Ad appeared in newspaper
3/17/2022	The Gateway ADD office & website, hard copies placed at all Gateway senior center sites, email and hard copy provided to Aging Council & GADD Board of Director members.	3/17/2022	Gateway Region local newspapers in Bath, Menifee, Morgan, Montgomery, &

			Rowan Counties.

36. Participation in Public Hearing was actively sought from:

The five county Senior Centers, providers of AAAIL, the GADD Board of Directors, Aging Council, and the general public.

37. Indicate means used in soliciting views:

The plan was linked to the GADD website for public review along with hard copies placed at senior center sites. Copies of the plan were provided to each Aging Council and GADD Board of Director members. Copies were available to be sent per request through the ADRC line as well.

38. Summary of public comments:

No public comment was received during the hearing.

39. Summary of changes as a result of public comments:

No changes were made.

XI. Service Usage

40. What are the three most frequently identified needs or gaps in older adult services in your service area?

1. **In-Home Care/Services for Seniors & Disabled People**
2. **Transportation**
3. **Exercise/Social Activities**

41. Describe the strengths in your area's service delivery.

In our Title III-C program, GADD was able to open up all individuals on the waiting list and provide them with home delivered meals in a timely and efficient manner. The organization continues to open up all clients who call requesting meals for services immediately.

42. Describe the weaknesses in your area's service delivery and has this changed since the last plan period?

Staffing issues with aides/caregivers who provide assistance to clients that receive in home services; recruiting and retention issues for other degree/non-degree positions.

43. What has the AAAIL determined to be the three most utilized services in your service area?

1. Title III-C Meals

1a. Why is this service used more than others?

Provides a nutritious meal within a congregate setting for people to gather and enjoy fellowship; home delivered meal participants for individuals who cannot access the congregate site and suffer from food insecurity.

2. Outreach

2a. Why is this service used more than others?

Allows participant to obtain information on a wide range of topics including pandemic information, community resources, and other applicable services to the elderly population.

3. ADRC

3a. Why is this service used more than others?

It is a point of entry for all services offered within the AAAIL. It provides resources and direction on obtaining needed assistance to not only active clients, but also to any community member who seeks that knowledge.

44. What has the AAAIL determined to be the three least utilized services in your service area?

1. III-D Preventative Health

1a. Why is this service used less than others?

Over the course of the past two years, due to restrictions and closures of local senior centers and other community venues, Title III-D activities were not provided.

2. Caregiver Training/Support Groups

2a. Why is this service used less than others?

Lack of support systems to be away from the care recipient to participate in training sessions. The majority of our caregivers provided 24/7 one on one care to the care recipients and need the limited amount of respite for more critical needs such as their own doctor appointments, grocery shopping, etc. Caregivers are provided with educational information and virtual support groups information each month with the mailings that we provide.

3. Transportation

3a. Why is this service used less than others?

Over the course of the past two years, due to restrictions and closures of local senior centers where all transportation units are obtained.

XII. Participant Feedback and Satisfaction

45. Do you obtain regular feedback from clients about their satisfaction with services?

☒ **Yes**
☐ **No**

46. If yes, how is feedback obtained? (Check yes or no for each)	**Yes**	**No**
a. Client surveys or interviews	☒	☐
b. Caregiver surveys or interviews	☒	☐
c. Provider logs	☒	☐
d. Provider surveys or interviews	☒	☐
e. Client focus groups	☐	☒
f. Other, Specify:	☐	☐

47. How often is feedback collected?

☐ **Monthly**
☐ **Quarterly**
☐ **Semi-annually**
☐ **Annually**
☒ **Other, Specify: Surveys are distributed yearly in all program except ADRC for which is a weekly distribution; suggestions or complaints are continuously received through phone calls, desk and in-home monitoring, and suggestion boxes at each senior center.**

48. What do you do with this information? How is it used?

The information gathered is reviewed and discussed between staff and providers to improve performances and services. If a suggestion or complaint arises, our team meets and works together for solutions. Complimentary feedback is recognized and praised with employees.

49. Is there a formal process to investigate complaints?

☒ **Yes**
☐ **No**

50. Is there a formal process to respond to complaints?

☒ **Yes**
☐ **No**

XIII. Coordination and Collaboration

51. What are your procedures and methods for ensuring that services for older adults are delivered in a coordinated and efficient way?

The process of coordinating services starts with our Aging and Disability Resource Center. A L1 phone assessment is completed with individuals seeking services. The individual is then referred to the program that can assist with their needs. After being enrolled into AAAIL programs, the administrative staff track and evaluate the delivery of services in a variety of ways. Units are routinely monitored. Strong communications with sub providers which include weekly meetings in efforts to ensure the most effective delivery of services are being made.

52. Do you have plans to improve service coordination?

☒ **Yes**
☐ **No**

53. If yes, please describe your plans. If no, why not?

Increase data analysis with comparing service deliveries.

54. How will you measure the effectiveness of your service coordination?

We will rely on the reports from our data system, budget analysis, feedback from client satisfaction surveys, and open communications with staff, providers, and consumers.

XIV. Outreach & Expansion

55. Do you have plans to conduct outreach to those with "greatest economic and social needs" (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, older persons with disabilities, older persons with limited English, and older individuals residing in rural areas) as specified in the Older Americans Act?

- ☒ **Yes**
- ☐ **No**

56. If yes, please describe your plans. If no, why not?

The GADD AAAIL continues to market the ADRC line as the front door to service availability. This would be accomplished through outreach to the community and other community-based agencies, as well as through marketing materials that identify the ADRC line as the primary number to call to receive services. GADD's regional senior centers provide outreach routinely to the participants and the community members in general through newsletters, presentations, community events, and newspapers postings. Outreach is also distributed on a monthly basis to family caregivers. Our SHIP provider distributes a mass mailing to all active participants within our data system. Information, available services and assistance is posted on our website and social media platforms. GADD staff are visible at community events in hopes of reaching out to those who fall under the category of having the greatest economic and social needs.

57. How will you measure your progress?

The population of people we serve will be continuously tracked through our database system.

58. Do you have plans to increase the visibility of your AAAIL's services?

- ☒ **Yes**
- ☐ **No**

59. If yes, please describe your plans. If no, why not?

Our outreach methods will continue to be met by using marketing materials identifying the ADRC line, local radio stations, newspapers, and businesses in the GADD Region. We continue to utilize our GADD website and social media sites to disseminate information and events.

60. How will you measure your progress?

This will be measured by monitoring and comparing the number of ADRC calls entered in the data system. We also distribute ADRC satisfaction survey's on a weekly basis to analyze any feedback or suggestions on improving program efforts.

XV. Community Opportunities

61. How many of the counties in your service area currently have at least one focal point? 5

62. What services do focal points/multi-purpose centers typically offer in your region?

Congregate meals, home delivered meals, non-traditional meals, nutrition education, preventive health, information & assistance, outreach, health promotion, and transportation.

63. Do you have plans to improve or expand senior center/focal point services?

- ☒ **Yes**
- ☐ **No**

64. If yes, please describe your plans. If no, why not?

GADD has submitted various grant applications to construct new senior center facilities and rehab existing facilities. By providing new/renovated spaces, we hope to grow the senior centers to fill the new facilities. GADD also plans to continue to work with community partners and local governments to get the word out about the sites and the services provided for the seniors in our region.

65. How will you measure your progress?

We will measure our progress by analyzing SAMS data and units entered into SAMS.

66. Do you have a community education plan to increase long-term care planning among older adults and individuals with disabilities to remain in their home?

- ☒ **Yes**
- ☐ **No**

67. If yes, please describe your plans. If no, why not?

GADD AAAIL's plan is to provide education at community events such as health fairs. We will provide education, information, and guidance through our Aging and Disability Resource program. We contract with a Legal Aid provider that provides free assistance to individuals in need of legal supports for long-term planning. Our SHIP provider works with individuals related to Medicare/Medicaid supports. Our Medicaid Waiver program will continue educating approximately 150 consumers on supports that will assist them with remaining in their own home.

68. Do you have a plan to improve or expand training for your AAAIL staff or other contracted providers?

- ☒ **Yes**
- ☐ **No**

69. If yes, describe your plans. If no, why not? Please describe the current training plan for each program.

GADD is planning a training with Legal Aid of the Bluegrass on elder abuse and legal assistance availabilities for our aging population. We will review approved trainings provided by DAIL in seeking the training opportunities that would be of greatest value to the AAAIL staff. Program coordinators will provide routine training in areas specific to their services. We will utilize the vast array of virtual training opportunities that have arose after the start of the COVID-19 pandemic.

70. How will you measure your progress?

Staff and providers will show evidence of knowledge in the performance of their job duties. Training logs will be maintained and reviewed throughout each FY.

XVI. Information and Referral

71. Does your agency maintain and staff a separate information and referral line?

- ☒ **Yes**
- ☐ **No**

72. How does your agency advertise and/or market your information and referral system.

We have brochures specifically for our Aging and Disability Resource Center (ADRC). These are distributed at community events that not only the AAAIL staff attend but also GADD staff within the Administration and Planning Departments. The brochures are distributed at all of our regional senior centers. We advertise on our agency website and social media platforms, as well as local newspapers.

73. If yes: On average, how many intake calls do you handle in a typical month? # 328

74. Do you assess client satisfaction of the information and referral process?

- ☒ **Yes**
- ☐ **No**

75. Do you have a plan for improving the information and referral process?

- ☒ **Yes**
- ☐ **No**

76. If yes, please describe your plans.

GADD plans to continue building community partnerships to provide callers with all resources that are available to assist with their needs. Continued education on AAAIL programs and services available within those programs along with mentoring for staff new to the ADRC program.

XVII. Financial Management and Fund Development

77. Do you have adequate funding to meet your community's needs?

- ☐ **Yes**
- ☒ **No**

78. What needs are difficult to meet with current funding levels?

The demand for home delivered meals caused by the COVID pandemic, and the Governor's mandate to provide those, has increased our costs significantly. Also, because GADD's region has one of the highest poverty populations in the state, it contributes to having clients on the waitlist for all services.

79. Provide an explanation of how program income, fees, donations as well as other resources (i.e. local fund grants) will be collected and used to expand services.

3 of our 5 counties give additional funds to help with the home delivered meals. Fees or donations collected by the senior centers are recognized as "program income" and are utilized to offset costs before any federal or state grant money.

80. Do you have a plan for increasing the financial resources available to your agency?

- ☒ **Yes**
- ☐ **No**

81. If yes, please describe your plans.

GADD is always on the lookout for additional funding via grants, donations, Foundations, etc.

82. Are financial reports shared with the aging council and board members?

- ☒ **Yes**
- ☐ **No**

83. How do you provide for equitable allocations of funds for programs and services within the planning and services area? Summary must include the AAAIL allocation process approved by the regional Council on Aging and ADD Board. The most recent census data available must be used for determining the distribution of funds.

GADD's Finance Office uses a formula to distribute grant funds in Title III C1 and C2 meals based upon the number of units each Senior Center does (as recognized in SAMS) during that fiscal year. The ADD Board feels this is more equitable as the census does not reflect the percentage or number of seniors who elect to actively participate in our Senior Centers.

84. How does your agency assure that all funds are expended?

GADD keeps an extensive internal budget spreadsheet and updates it no less than quarterly throughout the year. Regular budget meetings, internally and with DAIL staff, helps keep abreast of each program and its anticipated expenditure.

85. How does your agency assure the operation of a program in the absence of funding due to over-expending of program dollars or inadequate budgeting during the program year?

GADD is committed to serving our clients. Should the cost exceed the available dollars for that program, the loss is absorbed by GADD - unless additional financial contributions are obtained from either one of our counties or another ADD.

86. If funds are not expended, what does your agency do with the remaining funds?

It is the goal of the GADD AAAIL to expend all state dollars before federal funds. Unexpended state dollars will lapse. However, GADD will request any remaining federal funding to be carried over and added to the next fiscal year contract.

XVIII. PROGRAM SITE MONITORING

87. Please describe your in-house evaluation, desktop and on-site monitoring process of all direct and contract programs for compliance with state and federal guidelines. (Copies shall be made available during onsite monitoring)

In-house program monitoring is completed on a monthly basis with hard copies of the tool provided to case managers to include any findings, recommendations for improvements, and specific dates for corrections to be made and return to monitoring reviewer. Along with monthly desktop monitoring of unit and dollar expenditures for all direct and contractual programs. Each provider is monitored on site or desktop yearly.

88. Please describe any other methods to your evaluation and monitoring process.

Routine meetings with contracted providers which include weekly meeting with our in-home direct service provider in efforts to stay on top of service deliveries and discuss program status.

XIX. GOALS

Goals are visionary statements that describes the strategic direction in which the region is moving while objectives are the attainable, specific and measurable steps the region will achieve its goal. A well-written goal summary can aid the region in educating the public, lawmakers and other agencies of the operation of programs and services of the agency. Please provide a narrative for how the region will meet the goals listed below

Goal 1. Provide long-term services and supports that enable older Kentuckians, their families, caregivers, and persons with disabilities to fully engage and participate in their communities.

Gateway AAAIL operates our regional senior centers in-house. The senior centers are our greatest strength with community engagements for older Kentuckians. The senior centers not only offer meals for which participants can enjoy one another's company, but also participate in activities they enjoy such as playing games and making crafts. Our senior centers also participate in community events outside the senior center setting such as the local Christmas parade and resource fairs. Through the National Family Caregiver Support Program, participants are informed of community events through our monthly mailings. They can use the respite service to obtain care for their loved one to attend community engagements. Our Medicaid Waiver program, which serves individuals of all ages, provides services that allow the participants to participate in community events.

Goal 2. Ensure older Kentuckians, persons with disabilities, caregivers and families have access to person-centered planning and options counseling for their long-term services and supports.

The case management staff are trained and provide person-centered planning with their clients when developing care plans that best meet client needs. ADRC staff provide option counseling

for long-term services and supports. All senior center staff are trained to refer any inquirers needing these supports to our ADRC for options counseling. Our contractor, Legal Aid of the Bluegrass provides benefit counseling to assist and direct individuals with Social Security, SSI, SNAP, and Medicaid. LABG also has attorneys on staff that assist us with long term planning documents. LABG has a mobile bus that they take to each of our senior center location to provide long-term documents such as Wills and POA's that are completed on site.

Goal 3. Increase the development and implementation of business-related strategies that promote innovation, collaboration, and sustainability of aging and disability network partners.

Bill Cooper, an employee of the Kentucky Council of ADD's, focuses on seeking out business agreements with private entities that would bring in revenue to assist and support AAAIL programs. GADD staff engage with community partners, provide social media campaigns, invitations are extended for Aging Council meetings and involvement with our Elder Abuse Council.

Goal 4. Prevent abuse, neglect, and exploitation while protecting the rights of older Kentuckians and persons with disabilities.

All staff receive annual training on prevention of abuse, neglect, and exploitation and the reporting requirements. All staff have a document readily on hand that has contact phone numbers and links to the website for reporting. The APS contact information is also posted at all senior center sites in our region. Our Elder Abuse Council main objective is focused on the prevention of abuse, neglect, and exploitation. Education and outreach are routinely provided for employees, clients, and the general population.

Goal 5. Ensure continuous quality improvement principles to ensure the Area Agency on Aging and Independent Living operates efficiently and effectively.

Staff meetings are conducted on a weekly basis to consult on program operations, improvements, and any community services available to further assist our clients. Monitoring of charts are completed. Extensive spreadsheets are completed and tracked to complete checks and balances of units and budgeted financial allotments for all programs. Satisfaction surveys are completed annually for all of our AAAIL programs.

Goal 6. Ensure that all Kentucky elders and individuals with disabilities have equitable access to services regardless of any social, cultural or geographic barriers.

GADD employees complete an annual Title VI, Civil Rights Act of 1964 training. We do not discriminate based on any of the protective classifications. Services are provided to all individuals who meet qualifications throughout our entire region.

XX. Kentucky's Outcome and Performance Measures 2023-2025

Instructions: Develop objectives for each goal listed below. Do not limit yourself to the space provided. Provide the strategies for meeting the objectives as well.

GOAL 1: Provide long-term services and supports that enable older Kentuckians, their families, caregivers, and person with disabilities to fully engage and participate in their communities.	
Objective	
Gateway AAAIL will provide outreach and information to all older Kentuckians and persons with disabilities throughout our service region.	
Objective	
Strategies	
Seeking out new activities that attract the population's interest. Continued community partnerships and actively being present at events. Senior Center Director's will routinely provide outreach material and information related to community engagement. The agency will use social media outlets and the agency website to promote community engagements.	
Person and entity responsible for completion	Date
Gateway AAAIL staff, Senior Center Directors	Ongoing

GOAL 2: Ensure older Kentuckians, persons with disabilities, caregivers and families have access to person-centered planning and options counseling for their long-term services and supports.	
Objective	
Case Managers are knowledgeable in person-centered planning.	
Objective	
ADRC & contracted provider staff are knowledgeable in options counseling.	
Strategies	
Provide training and education to staff. Ensure the contracted provider for SHIP/Legal Services/Ombudsman is experienced and knowledgeable to assist with long-term services and supports.	
Person and entity responsible for completion	Date
Aging Director, Gateway AAAIL staff	Ongoing

GOAL 3: Increase the development and implementation of business-related strategies that promote innovation, collaboration, and sustainability of aging and disability network partners.	
Objective	
Fostering current and creating new relationships and striving to keep partners involved.	
Objective	
Provide support to KCADD for contract with private entities.	
Strategies	
Social media campaigns. Promotion through the Aging Council. Presence at resource fairs. Provide necessary information to market available services to private companies. Market services to area medical facilities.	
Person and entity responsible for completion	Date
Aging Director, Gateway AAAIL staff	Ongoing

GOAL 4: Prevent abuse, neglect, and exploitation while protecting the rights of older Kentuckians and persons with disabilities.	
Objective	
Continue education and awareness to staff, participants, and the community of what encompasses abuse, neglect, and exploitation.	
Objective	
Strategies	
Provide training to staff and volunteers annually on Abuse, Neglect, and Exploitation prevention and reporting. Provide information documents to clients and caregivers educating them on the signs. Actively supporting and promoting the Elder Abuse Council.	
Person and entity responsible for completion	Date
Aging Director, Gateway AAAIL staff	Ongoing

GOAL 5: Ensure continuous quality improvement principles to ensure the Area Agency on Aging and Independent Living operates efficiently and effectively.	
Objective	
Obtain, train, and retain qualified knowledgeable staff.	
Objective	
Ensure program finances are utilized in an appropriate and effective manner.	
Strategies	
Monitor financials monthly to ensure funding is being spent appropriately. Effective staff evaluations. Staff support and team work. Monitor program satisfaction surveys.	
Person and entity responsible for completion	Date
Aging Director, Gateway AAAIL staff	Ongoing

GOAL 6: Ensure that all Kentucky elders and individuals with disabilities have equitable access to services regardless of any social, cultural, or geographic barriers.	
Objective	
Provide services to any eligible person seeking our assistance.	
Objective	
Strategies	
Completion of Title VI, Civil Rights Act of 1964 training. ADRC staff will treat all callers the same. AAAIL staff will treat all program participants the same.	
Person and entity responsible for completion	Date
Aging Director, AAAIL staff	Ongoing

XXI. PERFORMANCE PLAN FORMS

These are the Performance Plan Forms that are referenced in the instructions. Please find them in the attachment marked forms. They are as follows:

Form A – Area Agency on Aging and Independent Living Advisory Council Membership

Form B – Area Agency on Aging Independent Living Administration Staffing Plan
Form C – Area Agency on Aging Independent Living Direct Staffing Plan
Form D – Provider Direct Staffing Plan
Form E – Case Managers
Form F – SHIP Counselor Locations
Form G – SHIP Counselor Details
Form H– Ombudsman Advisory Council Membership
Form I – Provider Site List

XXII. WAIVER & SPECIAL PROGRAM APPROVALS

A. DIRECT SERVICE WAIVER REQUEST FOR THE PERIOD OF THE PLAN

Instructions: In accordance with Section 316 of the Older Americans Act (Chapter 35, 42 U.S.C. 3030c-3) Area Agencies on Aging will submit all of the required items listed below to the Department for Aging and Independent Living when initially requesting to provide a service directly. Contact the appropriate Programs Field Representative for more information.

Statement of Request – One request for each service.

1. **Gateway ADD, Area Agency on Aging and Independent Living is requesting a waiver to be the provider for Title III-B Supportive Services including information & assistance, outreach, transportation, assisted transportation, health promotion, and recreation. There are no providers in this area that have expressed an interest in services provision. Gateway AAAIL also has discussed the situation with potential providers among our community partners and has not found any organization that is interested. GADD will produce a new RFP prior to the end of fiscal year 2025 to attempt to secure a provider for our Title III-B supportive services. We will have both full and part time staff to provide services and spend the allocations.**

2. **GADD's Area Agency on Aging and Independent Living is requesting a waiver to be the provider for Nutrition Services Program including Title III-C congregate meals, Title III-C home-delivered meals, Homecare home-delivered meals, and nutrition counseling and education. There are no providers in this area that have expressed an interest in services provision. Gateway AAAIL also has discussed the situation with potential providers among our community partners and has not found any organization that is interested. Gateway will produce a new RFP prior to the end of fiscal year 2025 to attempt to secure a provider for our Nutrition Services Program. We will have both full and part time staff to provide services and spend the allocations.**

Actions taken prior to determination of direct service provisions

- **Names of potential providers contacted, their responses, and**
- **Names of newspapers and documentation of announcement of the availability of funds.**

Gateway advertised a solicitation requesting proposals for all the waiver-requested services in area newspapers in the December 2, 2021 edition, however no proposals were received for these services.

Scope of Work – One scope of work completed for each service.

1. **As per the Title III-B contract with DAIL to provide supportive services including: information and assistance, outreach, transportation, assisted transportation, health promotion and recreation throughout the District.**

2. **As per the Title III & Homecare contracts with DAIL to provide nutrition services including: congregate meals, home-delivered meals, and nutrition education in the District.**

Budget Justification – One budget justification for each service. Explain how AAAIL determined final unit cost.

1. **Title III-B Supportive services: I&A- $3.63, Outreach- $3.69, Transportation-$4.85. The unit cost determined by total expenses divided by the number of units.**

2. **Nutrition services: C1-$7.40, C2-$8.99, Homecare HDM- $11.63 unit cost determined by total expenses divided by the number of units.**

**Scope of work must be detailed further in the Area Plan, service section. Budgets must be detailed in plan budget section.*
Note: Additional information and/or documentation may be required by the State Agency.

B. PROGRAM APPROVAL/EXCEPTION REQUESTS FOR THE PERIOD OF THE PLAN

Special Program Approval

A request is required that includes justification for special program approval.

1. **GADD's AAAIL is requesting an approval to provide C1, C2, Homecare HDM, Title III-B & Title III-D in Bath, Menifee, Montgomery, Morgan, and Rowan Counties Senior Citizens programs due to EKISO provider ending contract with GADD on March 15, 2018. GADD AAAIL completed the RFP process each year thereafter and received no proposals. GADD is now requesting approval to deliver these services in-house. GADD feels that we can provide a superior quality of these services.**

2. **GADD will provide frozen and/or shelf-stable meals to eligible Home Delivered Meal participants. If approved, this will enable GADD to deliver meals more efficiently. Delivery personnel will have the opportunity to deliver meals over a longer duration of time on a given day, thus improving efficiency and resulting in less frequent trips to certain areas in the region. This will save on fuel and maintenance expenses attributed to the fleet of delivery vehicles. Given the volume of home delivered meals in certain counties, it is currently difficult to deliver meals during the required timeframe (four hours). The action will alleviate timeframe restrictions and allow for route consolidation; ensuring bus driver hours do not exceed 30 hours weekly. Additionally, this measure will be a time savings for center directors by eliminating the need to package hot meals on a daily basis.**
   Plan and timeline:

Senior Center Directors will work with the Regional Kitchen Project Director to maintain the ordering process for frozen meals.

Exception Requests (includes meals served less than 5 days per week and non-traditional meals requests)

A request for an exception of service is required. Exceptions are granted only on a temporary basis. Justification along with a plan and timeline for meeting program compliance is required.

1. **Gateway advertised a solicitation requesting proposals for all the waiver-requested services C1, C2, Homecare HDM, Title III-B & Title III-D services in each of the five area newspapers in March 2018, however no proposals were received for these services. On April 5, 2018, GADD hired all senior directors and support staff that had worked through EKISO to continue providing C1, C2, Homecare HDM, Title III-B & Title III-D services within the Senior Centers of the Gateway AAAIL district without interruption of any services.**

2. **GADD's Multipurpose Senior Center (Menifee County) shall be open, at a minimum, six (6) hours per day and five (5) days per week. The Multipurpose facility will serve at least four (4) congregate meals per week.**

   GADD Senior Center facilities (Bath, Montgomery, Morgan, and Rowan Counties) will be open at a minimum four (4) hours a day, three (3) or more days per week.

   All changes outlined, including the C2 Home Delivered Meal participants, were effective June 2019. This request is to extend the actions into the future.

   It is projected that GADD will save $10,500 annually in food materials by eliminating at least one congregate meal on a weekly basis region wide. Additional cost savings would be realized via supply and utility costs with the senior centers being in operation four days as opposed to five days. Transportation and fuel cost savings would also be realized by reducing the number of days of operation weekly.

   Hours of operation signs will be posted at each senior center site.

XXII. PROVIDER APPROVALS

List of Contracts with a Profit Making Organization

Instructions: List of contracts with profit making organizations and approval request - A new approval is required for all contracts with profit making organizations for a new multi-year area plan. Only submit one sample of a CONTRACT unless there are significantly different requirements between contracts.

The form below shall be used to list all of the for-profit contractors with information under each contractor containing:

- **Name and address of each for-profit service provider**
- **Service to be provided by provider**
- **The unit of service to be provided**
- **Total amount per unit of service not to exceed a certain amount per contract period**

Complete the list of contracts with any Profit Making Organization.

Important Note: *Any and all contractual relationships with a Profit Making Organization requires DAIL prior approval not less than thirty (30) days prior to signing of contract by the area agency and service provider. This includes contracts obtained through an NLE. You need to send a facsimile of your contract with a profit-making organization for prior approval for any and all contractual relationships.*

List of Contracts with Profit Making Organization(s) & Approval Request			
Name & Address For-Profit Services Provider	Services to be provided	Unit of Service to be provided	Cost/Unit of Service
Lifeline Homecare, Inc.: PO Box 429, Somerset, KY 42502	Homecare & Title III-B Services: PC, HM, CH, RE	TBD	$20.56 FY24 $22.08 FY25 $23.18 FY26
Mom's Meals: 3210 SE Corporate Woods Drive, Ankeny, Iowa 50021	HDM	TBD	$7.30

XXIV. ASSURANCES

1. **Each Area Agency on Aging and Independent Living shall assure that case management services under Title III of the OAA will not duplicate case management services through other federal and state-funded programs and will include in its annual plan the coordination of case management services between programs.**

2. **Each Area Agency on Aging and Independent Living shall provide for adequate and qualified staff for service provisions.**

3. **Each Area Agency on Aging and Independent Living assures that the Area Agency on Aging and Independent Living and Independent Living and its services provider staff are trained as required for their job functions.**

4. **Each Area Agency on Aging and Independent Living and Independent Living shall assure that there is an integrated regional client management data system.**

5. **Each Area Agency on Aging and Independent Living shall encourage local cities and towns to plan for the growing aging populations and needs.**

6. In accordance Sec. 306(a) of the Older Americans Act, each Area Agency on Aging and Independent Living shall assure that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services and will report annually, to the State Agency, in detail, the amount of funds expended for each such category during the fiscal year most recently concluded:

(a) Services associated with access to services transportation, health services (including mental health services)

(b) Outreach, information and assistance which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in public supported programs for which the consumer may be eligible

(c) Case management services

(d) In-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(e) Legal assistance.

7. Each Area Agency on Aging and Independent Living shall assure that it will establish specific objectives, consistent with State Policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need and older individuals at risk for institutional placement.

8. Each Area Agency on Aging and Independent Living shall assure that it will develop proposed methods to achieve the objectives described in Section 306(1), paragraph (4)(a)(i), clause I as follows:

(a) Set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;

(b) Include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;

(c) Include the proposed methods to achieve the objectives described in Section 306(a), paragraph (4)(a)(i), clause (I)

9. Each Area Agency on Aging and Independent Living shall provide information to extent to it meets the following objectives:

(a) Establishes specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;
(b) Includes specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas.

10. Each Area Agency on Aging and Independent Living shall assure that it will conduct outreach efforts that identify individuals eligible for assistance under this Act, with special emphasis on-older individuals residing in rural areas and older individuals with greatest social and economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas); older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas); older individuals with severe disabilities; older individuals with limited English proficiency; older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and inform the older individuals referred to above and the caretakers of such individuals, and older individuals at risk for institutional placements of the availability of such assistance.

11. Each Area Agency on Aging and Independent Living shall assure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

12. Each Area Agency on Aging and Independent Living shall assure that it will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to

individuals with severe disabilities, and individuals at risk for institutional placement with agencies that develop or provide services for individuals with disabilities.

13. **Each Area Agency on Aging and Independent Living shall assure that in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), it will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2001 in carrying out such a program under this Title.**

14. **Each Area Agency on Aging and Independent Living shall provide information and assurances concerning services to older individuals who are older Native Americans including-information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the Area Agency on Aging and Independent Living will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title; an assurance that the Area Agency on Aging and Independent Living will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and an assurance that the Area Agency on Aging and Independent Living will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.**

15. **Each Area Agency on Aging and Independent Living shall provide assurances that the Area Agency on Aging and Independent Living will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.**

16. **Each Area Agency on Aging and Independent Living shall provide assurances that the Area Agency on Aging and Independent Living will disclose to the Assistant Secretary and the State agency --the identity of each non-governmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and the nature of such contract or such relationship.**

17. **Each Area Agency on Aging and Independent Living shall provide assurance that the AAAIL will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.**

18. **Each Area Agency on Aging and Independent Living shall provide assurances that the AAAIL will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.**

19. **Each Area Agency on Aging and Independent Living shall provide assurances that the AAAIL request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.**

20. **Each Area Agency on Aging and Independent Living shall provide assurances that preference in receiving services under this Title III of the Older Americans Act will not be given by the Area Agency on Aging and Independent Living to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this subchapter.**

21. **Each Area Agency on Aging and Independent Living shall provide assurances that funds received under this Title will be used; to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph Section 306(a)(4)(A)(i); and in compliance with the assurances specified in Section 306(a)(13) and the limitations specified in section 212 of the Older Americans Act.**

22. **Each Area Agency on Aging and Independent Living shall provide for a legal representation/advise in accordance with Chapter 4, Section 731 of OAA (Chapter 35, 42 U.S.S. 3058j) including a listing of the types of cases that will be accepted through this program.**

23. **Each Area Agency on Aging and Independent Living shall assure that its legal assistance provider will identify and serve those who are homebound by reason of illness, incapacity, disability or otherwise isolated.**

24. **Each Area Agency on Aging and Independent Living and independent living shall provide assurances that the legal assistance provider will make referrals and maintain an individual referral list for clients who request services but are not served.**

25. **Each Area Agency on Aging and Independent Living shall implement and oversee a community Elder Abuse Prevention program in accordance with Chapter 3, Section 721 of OAA (Chapter 35, 42 U.S.C. 3058i) for the prevention of elder abuse including neglect and exploitation. The program shall coordinate with LTC Ombudsman, senior centers, long term care facilities, judicial, law enforcement and other community agencies.**

26. **Each Area Agency on Aging and Independent Living shall develop programs, services and initiatives that support a comprehensive coordinated system of care for older Kentuckians.**

27. **Each Area Agency on Aging and Independent Living shall facilitate the coordination of community-based, long-term care services designed to enable older individuals to remain in their homes.**

28. **Each Area Agency on Aging and Independent Living shall maintain a plan for the development and administration of regional ADRC and coordinate information and access to regional services.**

29. **Each Area Agency on Aging and Independent Living shall provide assurance that if entering into an agreement with a profitmaking organization for the provision of services not otherwise receiving services under the OAA shall follow all provisions listed in Section 212 of the Older Americans Act.**

30. **Each Area Agency on Aging and Independent Living shall plan for the development of consumer directed options to expand service delivery and coordination with other service delivery.**

31. **Each Area Agency on Aging and Independent Living shall assure Title III-B Supportive Services will be delivered in the District in accordance with Section 321 of the OAA, as amended.**

32. **Each Area Agency on Aging and Independent Living shall assure service providers have an adequate process for referral, service scheduling, and an internal evaluation system to ensure quality services are provided.**

33. **Each Area Agency on Aging and Independent Living and independent living shall provide assurances for coordination of services described in Section 321 (a) of the OAA with other community agencies and voluntary organizations providing the same services, including agencies that carry out intergenerational programs or projects.**

34. **Each Area Agency on Aging and Independent Living shall implement services in accordance with 910 KAR 1: 180 for the provision Homecare services to be delivered in the District.**

35. **Each Area Agency on Aging and Independent Living shall provide a process used to ensure the Homecare program coordinate services for individuals with other publicly funded community long-term living services.**

36. **Each Area Agency on Aging and Independent Living shall implement services in accordance with 910 KAR 1:160 for the provision of Adult Day Care and Alzheimer's respite services.**

37. **Each Area Agency on Aging and Independent Living receiving funds to implement Personal Care Assistance Program (PCAP) in the district, shall provide for the implementation and oversight of the PCAP program and its provisions according to 910 KAR 1:090**

38. **Each Area Agency on Aging and Independent Living shall provide a plan for the provision of SHIP services which includes those provided by Title III-B Legal Services and ACL funds.**

39. **Each Area Agency on Aging and Independent Living shall provide for locally accessible counseling to individual beneficiaries unable to access other channels of information or needing and preferring locally based individual counseling services.**

40. **Each Area Agency on Aging and Independent Living assure that the SHIP program will target outreach in order to address access to counseling for low-income, dual-eligible, and hard-to-reach populations.**

41. **Each Area Agency on Aging and Independent Living enhance the counselor work force including the recruitment and training of counselors and volunteers and shall ensure that all SHIP counseling sites have access to a computer with Internet access and are registered on the SHIP NPR website: www.shipnpr.acl.gov.**

42. **Each Area Agency on Aging and Independent Living ensure participation in SHIP education and communication activities, thus enhancing communication to assure that SHIP counselors are equipped to respond to counseling**

needs and that the regional coordinator will disseminate information as needed and conduct quarterly meetings with SHIP staff and volunteers.

43. **Each Area Agency on Aging and Independent Living provide for the implementation and management of Title III C-1 (Congregate) Services and maintain a plan for back up food preparation sites and nutrition sites.**

44. **Each Area Agency on Aging and Independent Living shall provide for the implementation and management of Title III C-2 (Home-Delivered Meal) Services, including an emergency plan for back up food preparation sites and nutrition sites.**

45. **Each Area Agency on Aging and Independent Living shall provide nutritionally balanced meals that comply with the most recent Dietary Guidelines, published by the Secretary of Health and Human Services and the Secretary of Agriculture, and Dietary Reference Intakes as established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences for meals funded through Title III-C Nutrition Services Program.**

46. **Each Area Agency on Aging and Independent Living shall provide for nutritional screening, nutrition education, and where appropriate nutrition counseling.**

47. **Each Area Agency on Aging and Independent Living shall comply with applicable provisions of State or local laws regarding the safe and sanitary handling of food, equipment, and supplies used in the storage, preparation, service, and delivery of meals to an older individual.**

48. **Each Area Agency on Aging and Independent Living shall implement a plan for furnishing emergency meals during inclement weather conditions, power failure, any disaster that may cause isolation, medical emergencies, or those with a special need. At least three menus that meet the nutritional requirements of the program shall be planned.**

49. **Each Area Agency on Aging and Independent Living shall provide for Title III D services as outlined in Sections 361 & 362 of OAA (Chapter 35, 42 U.S.C. 3030M), by providing integrated health promotion and disease prevention programs to older adults that are evidence-based as defined by the ACL to promote healthy lifestyles and behaviors.**

50. **Each Area Agency on Aging and Independent Living provide or arrange for medication management programs in accordance to Title III D, including activities to screen to prevent drug reactions and incorrect prescriptions.**

51. **Each Area Agency on Aging and Independent Living provide for a healthy aging initiative, including coordination with state health and wellness programs and senior games.**

52. **Each Area Agency on Aging and Independent Living coordinate the recruitment, supervision, retention, recognition and training of volunteers, including senior centers, long term care ombudsman and SHIP (benefits counseling) volunteers within Area Agency on Aging and Independent Living programs.**

53. **Each Area Agency on Aging and Independent Living assist with and coordinate activities to encourage opportunities for older persons to stay active and involved through community volunteerism.**

54. **Each Area Agency on Aging and Independent Living provide for support of caregivers though regional programs that provide information, assistance accessing resources, training, respite, counseling, support groups and other services provided in National Family Caregiver Support Program in accordance with Section 373 of OAA (Chapter 35, 42 U.S.C. 3030s-1.**

55. **Each Area Agency on Aging and Independent Living shall provide for support of grandparents/relative caregiver though regional programs that provide information, assistance accessing resources, training, respite, counseling, support groups and other services provided in National Family Caregiver Support Program and Kentucky Caregiver Support Program.**

56. **Each Area Agency on Aging and Independent Living shall inform the public, including policy makers, about the challenges the elderly face when disability changes their lives. Maintain an AAAIL Advisory Council consisting of older individuals, including older rural and minority who are participants or who are eligible for programs assisted under OAA.**

57. **Each Area Agency on Aging and Independent Living shall provide for coordination and delivery of Title III services to residents of long-term care facilities including community based services which residents may access, when other public resources are not available to provide such services.**

58. **Each Area Agency on Aging and Independent Living provide community awareness regarding the needs of residents of long-term care facilities.**

59. **Each Area Agency on Aging and Independent Living shall provide for a formal process to receive/identify, investigate and resolve inquiries and complaints that are made by or on behalf of residents of licensed Long Term Care facilities.**

60. **Each Area Agency on Aging and Independent Living shall maintain a management system which ensures accountability of the district office to respond to the resident's needs including certified back-up in absence of the District Long Term Care Ombudsman.**

61. **Each Area Agency on Aging and Independent Living provide to the general public, potential residents of long-term care facilities and facility residents information and education regarding: The LTC Ombudsman Program, navigating the long-term care system, Residents' Rights in Long-Term Care facilities.**

62. **Each Area Agency on Aging and Independent Living shall utilize the state-provided system to document information on complaints and conditions in long-term care facilities; maintaining confidentiality and prohibiting disclosure of identity of any complainant or resident, except as allowed under 42 U.S.C. 3058g (5)(D)(iii). Submit quarterly, annual and special reports as required by the State Long Term Care Ombudsman and DAIL.**

63. **Each Area Agency on Aging and Independent Living shall provide for adequate legal counsel, without conflicts of interest, to provide advice and consultations for the protection of health, safety, and welfare of residents, and support the district LTC Ombudsman by representing older adults as provided under the Act for legal representation.**

64. **Each Area Agency on Aging and Independent Living will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.**

65. **Each Area Agency on Aging and Independent Living shall provide assurances to provide for a District LTC Ombudsman Advisory Council in accordance with state requirements.**

66. **Each Area Agency on Aging and Independent Living provide for the support of the District LTC Ombudsman program with state funds (CMP) as well as with funds from the federal Title VII Ombudsman and Elder Abuse Prevention program.**

67. **Each Area Agency on Aging and Independent Living provide for the expansion of the District LTC Ombudsman program as additional funding is provided.**

68. **Each Area Agency on Aging and Independent Living make use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing services offered through the AAAIL. As appropriate and possible, work in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as organizations carrying out Federal service programs administered by the Corporation for National and Community Service), in community service settings.**

69. **Each Area Agency on Aging and Independent Living shall coordinate with the state, local and/or regional public mental health services agency to: increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the Area Agency on Aging and Independent Living with mental health services provided by community health centers and by other public agencies and local mental health organizations to facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings. Coordination shall be conducted in a manner that is responsive to the needs and preferences of older individuals and their family caregivers, by: collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care. In coordination with local mental health entities, continuously analyze and recommend strategies as needed to modify the local system of long-term care to**

better: respond to the needs and preferences of older individuals and family caregivers; facilitate the provision, by service providers, of long-term care in home and community-based settings.

70. **Target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings; implementing, through the agency or service providers, evidence-based programs to assist older individuals and their family caregivers in learning about and making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals; and providing for the availability and distribution of public education programs provided through the Aging and Disability Resource Center, the Area Agency on Aging and Independent Living, and other appropriate means relating to: the need to make individual improvements in daily health and wellness habits; plan in advance for long-term care; and (ii) the full range of available public and private long-term care (including integrated long-term care) programs, options, service providers, and resources.**

71. **Each Area Agency on Aging and Independent Living shall provide assurances that funds received will be used: to provide benefits and services to older individuals, giving priority to older individuals with greatest economic need, older individuals with greatest social need and older individuals at risk for institutional placement, low income minority older individuals, older individuals with limited English proficiency, and older individual residing in rural areas; and in compliance with the assurances Section 306(a)(13) and the limitations specified in Section 212.**

72. **Each Area Agency on Aging and Independent Living will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for disaster relief service delivery.**

73. **Each Area Agency on Aging and Independent Living shall include in the area plan statistical data indicating projected changes in the number of older individuals residing in the AAAIL over the next 10-year period, the impact of changes in population to older individuals and the AAAIL's services, statistical data regarding projected changes in minority, low-income, number of older rural individuals and other target populations over the next 10-year period for which data is available. Further, the AAAIL shall provide an overview of an analysis regarding how programs, policies, resources and services can be adjusted to meet the needs of the changing population of older individuals in the planning and service area, particularly supportive services to address the change in the number of individuals age 85 and older in the planning and service.**

74. **Each Area Agency on Aging and Independent Living shall provide services in cooperation with government officials, State agencies, tribal organizations, or local entities, may make recommendations to government officials in the planning and service area and the State, on actions determined by the AAAIL to build the capacity in the planning and service area to meet the needs of older individuals for: health and human services; land use; housing; transportation; public safety; workforce and economic development; recreation; education; civic engagement; emergency preparedness; and any other service as determined by the AAAIL in coordination with public officials.**

75. **Each Area Agency on Aging and Independent Living shall provide, to the extent feasible, the provision of services under the Older Americans Act and Kentucky Administrative Regulations consistent with self-directed care.**