# EASTERN SIERRA AREA AGENCY ON AGING --Meeting of the ADVISORY COUNCIL--

Thursday, March 16, 2023 - 10:00 a.m. – 12:00 p.m.

This meeting is being held via video / telephone conference and at the following locations

To Join Meeting with Video Visit: https://us06web.zoom.us/j/88063768780?pwd=K3FWK1hyY2dDOEdzMjhE Qm0waG9pUT09

To Join Meeting via Telephone (no video) Dial: (669) 900-6833 And Enter Meeting ID: 880 6376 8780 Passcode: 195439

**CLINT G. QUILTER CONSOLIDATED OFFICE BUILDING** 

Training Room 103 1360 N. Main St., Bishop, CA 93514

### MAMMOTH CIVIC CENTER

Carson Room – 2<sup>nd</sup> Floor 1290 Tavern Rd., Mammoth Lakes, CA 93546

ANTELOPE VALLEY SENIOR CENTER

399 Mule Deer Road, Walker, CA 96107

# AGENDA

For meeting information or to request a complete meeting packet call (760) 873-3305

All members of the public are encouraged to participate in the discussion of any item on the agenda. You will be allowed to speak about each item before the Council takes action on it. Any member of the public may also make comments during the scheduled "Public Comment" period on this agenda concerning any subject related to the ESAAA Advisory Council.

# 1. Call to Order

# **ACTION/DISCUSSION SESSION**

- 2. Introductions of Advisory Council members and staff
- 3. Public Comment

# 4. Election of Chair and Vice Chair – ACTION

Chairperson will 1) Request nominations for Chair and Vice-Chair 2) Request a motion and second to appoint Chair and Vice-Chair 3) Ask for discussion 4) Call for the Vote

# 5. Approval of minutes from October 7, 2022 meeting - ACTION

Chairperson will: 1) request a motion and a second; 2) ask for discussion; 3) call for the vote.

# 6. Staff Reports - ACTION

- A. ESAAA Administrative Staffing Report Discussion regarding Advisory Counsel vacancies (3)
- B. ESAAA Services Report for PSA 16 for FY 2021-2022 and mid-year for FY 2022-2023
- C. Long-Term Care Ombudsman Report

# 7. <u>Public Hearing on the Annual Update of the Area Plan for PSA 16 (Staff will document comments.)</u> (Public Hearing Opened at \_\_\_\_\_)

Time

- A. Summary of outreach efforts for input from the institutionalized and/or disabled older individuals, and results of outreach surveys.
  - Any resulting need for Program Development or Program Coordination? Any major changes that would affect goals and objectives in the 4-Year Plan?
- B. Review of the Minimum Percentages for Title IIIB program funds:
  - Access (Transportation, Assisted Transportation, Case Management, Outreach, Comprehensive Assessment, Health, Mental Health, and Public Information) – 50%
  - In-Home Services (Personal Care, Homemaker, Chore, Adult Day/Health Care, Residential Repairs/Modifications, Respite Care, Telephone Reassurance, and Visiting) – 5%
  - Legal Assistance Required Activities (Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar) - 10%
- C. Discussion of any Program Development and Program Coordination activities, defined by California Department of Aging as follows:
  - I. Program Development activities that either establish a new service or expand or integrate existing services
  - II. Program Coordination activities that involve the active participation of the AAA staff to include liaison with non-OAA funded agencies and organizations for the purpose of avoiding duplication, improving services, resolving problems related to service delivery, and addressing the service needs of the eligible service population

Chairperson will allow attendees to comment/ testify in response to staff presentation about the Draft Area Plan Update, including the Minimum Percentages and Adequate Proportion of Title IIIB funds, or any other issues related to the Four-Year Area Plan.

(Public Hearing Closed at \_\_\_\_\_)

8. Advisory Council Support to Recommend to the Governing Board Approval of the Area Plan Update - ACTION

Chairperson will: 1) request a motion and second to recommend to the Governing Board approval of the Area Plan Update as reviewed and edited, and authorize the Advisory Council Chairperson to sign the Transmittal Letter; 2) ask for discussion; 3) call for the vote.

# 9. Budget Display for One Time Only Allocation Distribution Recommendation – ACTION

Chairperson will: 1) request a motion and second to recommend to the Governing Board approval of the OTO budget allocation and proposed Inyo/Mono Distribution and authorize the Advisory Council Chairperson to sign the Transmittal Letter; 2) ask for discussion; 3) call for the vote.

# **10. Advisory Council Member Reports**

11. Propose/Discuss Meeting Dates and Locations for ESAAA Advisory Council Meetings: April 26, 2023 or May 3, 2023

# Eastern Sierra Area Agency on Aging Advisory Council Meeting

Virtual Zoom Meeting and In Person

#### October 7, 2022 Minutes

Advisory Council Members Present: Sandra Lund, Roger Rasche, Heidi Dougherty, Rachel Lober, and Patti Hamic-Christensen

#### Other Attendees:

Melissa Best-Baker, Patricia Espinosa, Marilyn Mann, Morningstar Wagoner, Krista Cooper, Paulette Erwin, Darcia Blackdeer-Lent, Kathy Peterson

#### 1. Call to Order

ESAAA Chairperson Roger Rasche called the meeting to order as of 10:04 a.m.

#### 2. Public Comment

Chair Rasche entered public comment regarding the desire of Lone Pine congregate participants and Lone Pine Community to have the COVID testing be moved to another location in order to allow Statham Hall to return to community use.

#### 3. Approval of minutes from March 25, 2022 meeting

Chairperson will: 1) request a motion and a second; 2) ask for discussion; 3) call for the vote.

Motion made by Heidi Dougherty to approve as amended and seconded by Rachel Lober to approve – the motion carried as follows:

Ayes: Heidi Daugherty, Roger Rasche, Sandra Lund, Patti Hamic-Christensen, and Rachel Lober Nays: None

Absent: Supervisor Dan Totheroh, Kelli Davis, Teresa McFarland and JoAnn Poncho

#### 4. Budget Items

- a. FY 2022/2023 Inyo/Mono Baseline Allocations
- b. FY 2021/22-9/30/2024 Inyo Mono American Rescue Plan Allocation (ARPA) -
- c. FY 2022/2023 12/31/2024 Older Adults Recovery and Resilience (OARR) Includes proposed funding information
- d. PSA 16 HCBS NI Proposal for Inyo and Mono

Melissa Best-Baker reviewed the FY 2022/2023 Inyo/Mono Baseline Allocations, the FY 2021/2022 - 9/30/2024 Inyo/Mono American Rescue Plan Allocation, the FY2021/2022 - 9/20/2024 Older Adults Recovery and Resilience funding, and the PSA 16 HCBS NI (Infrastructure funding) Proposal for Inyo and Mono Counties and requested the Council take action to recommend adopting the budgets to the Board of Supervisors as presented.

There was no discussion regarding the first two items, but discussion regarding the new Older Adults Recovery and Resilience (OARR) funding included funds for legal services that will need to be activities provided in addition to current services. Additionally, the Family Caregiver Support funding is intended to increase outreach, engagement, and training of caregivers. Mono County was going to discuss some possible Mono County specific uses. Ms. Best-Baker confirmed that ESAAA did not receive fall prevention monies. The Council discussed various uses and received clarification. Mann suggested that for the purpose of moving forward, the Council approve a recommendation to the Board of Supervisors to approve the four agreements. This will not prevent the counties from working together to identify the best use of funding to meet the county-specific needs. Additional discussion occurred regarding the planned use of the infrastructure funding with the Council reviewing the proposed projects in both Inyo and Mono counties with general comments of support. Following discussion Chair Rasche requested a motion.

Motion made by Heide Dougherty to recommend acceptance of the four funding allocations and it was seconded by Patti Hamic-Christensen – the motion carried as follows:

Ayes: Heidi Daugherty, Roger Rasche, Sandra Lund, Patti Hamic-Christensen, and Rachel Lober

Nays: None

Absent: Supervisor Dan Totheroh, Kelli Davis, Teresa McFarland and JoAnn Poncho

# 5. Staff Reports

- A. Morningstar Willis-Wagoner provided an update on Inyo County staffing and services, as well as provided a service report for the PSA. Noted an increase in utilization of congregate meals from the prior year.
- B. Krista Cooper with Mono County provided an update on staffing and services in Mono County. An update was also provided regarding funding Mono County received through AT&T helping connect seniors to family.
- C. Paulette Erwin provided an update on the LTC Ombudsman. The program has been able to increase the number of visits to facilities with the hiring of the Assistant Human Services Supervisor, who has been certified as an Ombudsman. Complaints have increased also during the last year as the COVID restrictions have allowed more contact by the Ombudsman, as well as by family and friends. Reported that the facilities, primarily Bishop Care, are struggling with staffing. Paulette also reported how the program used CARES act funding to purchase rolling cards and iPads for seniors to be able to have virtual contact with their family. In response to a question about the success of the robotic pet project, Ms. Mann agreed to re-send the video that had been previously shared.

# 6. Next Meeting

The proposed meeting is January 25, 2023 at 10:00 am.

# 7. Meeting Adjourned at 11:31 a.m.

# <u>ESAAA Services Report</u> July 1, 2021 through June 30, 2022

Ju	<b>July 1, 2021 through June 30, 2022</b>					
Senior Sites and Days Cong						
	Vednesday & I					
Bishop Monday-	~					
Independence Friday						
Lone Pine Monday-H	riday					
•	Monday-Friday					
Walker Monday-H	•					
5	•	ervices Prov	vided			
					Non-Registered	
					(Non-Seniors/One-	
	Congreg	ate Meals	Home Del	ivered Meals	Time Visitors)	
	Number	Units of	Number	Units of		
Service Area:	Served	Service	Served	Service	Units of Service	
Big Pin	e 15	925	*	*	*	
Bishor		7920	63	11,235	195	
Independence		*	*	*	*	
Lone Pine		3750	71	14,560	*	
Tecop	a 38	1738	15	2740	50	
Walke		2142	30	4841	187	
Mammot	1		15	1910		
Tri-Valley			23	3682		
Tota		16,475	217	38,968	432	
Home Delivered Meals Waiting	g List (Inyo Co				-2- as of	
09/30/2022	· · ·	•••				
-	Assisted Tr	ansportation				
	Number	Units of				
Service Area:	Served	Service				
Bisho	2	222				
Lone Pine		8				
Tecop		2			-	
Walke		271				
Tota		503			-	
	Respite Pe	rsonal Care	Respite I	Iomemaker		
	Number	Units of	Number	Units of		
Service Area:	Served	Service	Served	Service		
Bisho	o 3	143.25	3	210		
Lone Pin		*	*	*		
Tecop		*	*	*		
Mono Count		*	*	*		
Tota		143.25	3	210		

Non Registered Services						
	(Services Not Tr	acked to Spe		/		
	ype of Service		Units o	of Service P		
1	s Passes – Distributed out of					hop – 4090
	, Tri-Valley and Walker)				Lone	Pine - 1550
	n (Quarterly Newsletter)					*
Information and As						55
Telephone Reassur						52
Wellness Initiative	for Senior Education (WISE)					Pending
	Long Term Car		an Services		1	
		QTR1	QTR2	QTR3	QTR4	YTD
Acti	vities Provided	Units	Units	Units	Units	Units
	Sursing Facility (SNF) Visits*					
Residential Care	Facilities for Elderly (RCFE)	SNF - 15	SNF - 11	SNF -14	SNF 21	SNF - 61
	Visits*	RCFE - *	RCFE - 0	RCFE -0	RCFE -0	RCFE - *
	and Assistance to Individuals	29	20	20	22	91
	d Assistance To Facility Staff	10	10	8	16	44
Particip	bation in Facility State Survey	*	*	*	*	*
	Resident Council Facilitation	4	3	2	2	11
	Family Council Facilitation	6	7	6	4	23
	Community Education	*	*	*	5	5
	ng Sessions For Facility Staff	*	*	*	*	*
Training For Omb	budsman Staff and Volunteers	4	3	3	5	15
	Other Volunteer Time	1	1	1	1	4
-	vestigation and Resolution at SNF**	11	11	14	19	55
Complaint Ir	vestigation and Resolution at					
	RCFE**	*	*	*	*	*
1	int Related Visits – State Mini	1		~		D
Each Investig	gation averages 3-4 Visits to Fa	-	-	se Occurrin	ig within I	wo Days
		acted Serv	rices			
L 1 1 2021	Legal Service				1.5	
July 1, 2021	-	cated Count			15	
through September 30,	l otal C	Cases Closed	I in Quarter		10 YTI	D-Units
2021	Total Units of Serv	ice for Quart	ter (1 hour)	ç	90	90
October 1, 2021	Unduplicated Count for Quarter					
through	Total Cases Closed in Quarter					
December 31,						
2021	Total Units of Service for Quarter (1 hour)					
January 1, 2022	Unduplicated Count for Quarter			1	11	
through	Total Cases Closed in Quarter			1	1	
March 31, 2022	Total Units of Service for Quarter (1 hour)			4	14	44
April 1, 2022	•	cated Count	<u> </u>		13	
through		Cases Closed	<u>`</u>		14	
June 30, 2022	Total Units of Serv	ice for Quar	ter (1 hour)	48	.3	48.3

ESAAA Report July 2021 – June 30, 2022

# Types of Activities Offered at Senior Sites

Bingo Birthday Recognitions Theme Activities (e.g. Valentines, St. Patrick's...) Exercise- Walking groups, Chair Yoga AARP Tax Assistance **Blood Pressure Checks** Wii Bowling Scrabble **Educational Activities** Movie and Popcorn Crafts **Commodities Distribution** Medi-Cal Managed Care Outreach Cal Fresh Outreach Computer/Internet Access Nutrition Education **Prevention Activities** Working on starting a Book Club Donations received from Vons

Report Prepared By: Morningstar Willis-Wagoner Inyo County HHS, Aging Services

# <u>ESAAA Services Report</u> July 1, 2022 through December 31, 2022

Senior Sites and	Senior Sites and Days Congregate Meals Provided					
Big Pine		ednesday & H				
Bishop	Monday- Fr	•	induy			
Independence	Friday	Iddy				
Lone Pine						
Тесора	Monday-Fri	•				
Walker	Monday-Fri	•				
	5	•	ervices Prov	vided		
						Non-Registered
						(Non-Seniors/One-
		Congreg	ate Meals	Home Del	ivered Meals	Time Visitors)
		Number	Units of	Number	Units of	/
Service Area:		Served	Service	Served	Service	Units of Service
	Big Pine	13	390	*	*	*
	Bishop	173	6101	50	4785	173
]	Independence	*	*	*	*	*
	Lone Pine	66	2211	58	6035	*
	Тесора	23	324	11	1247	42
	Walker	45	1236	33	4386	222
	Mammoth			14	1071	
	Tri-Valley			20	1961	
	Total	320	10,262	186	18,565	437
Home Delivered M	Ieals Waiting I	List (Inyo Co	unty Only)			No Waiting list
<u></u>		Assisted Tr	ansportation			
		Number	Units of			
Service Area:		Served	Service			
	Bishop	3	102			
	Lone Pine	2	8			
	Tecopa	1	10			
	Walker	14	116			
	Total	20	236			
		Respite Pe	rsonal Care	Respite H	Iomemaker	
		Number	Units of	Number	Units of	
Service Area:		Served	Service	Served	Service	
	Bishop	2	25.50	2	24.50	
	Lone Pine	*	*	*	*	
	Tecopa	*	*	*	*	
	Mono County	*	*	*	*	
	Total	2	25.50	2	24.50	

Non Registered Services (Services Not Tracked to Specific Client)						
Т	ype of Service	acked to Spe		) of Service P	Provided	
	is Passes – Distributed out of					hop – 2970
- ``	, Tri-Valley and Walker)					Pine - 980
	n (Quarterly Newsletter)					*
Information and A						38
Telephone Reassur	rance					64
Active Living Ever	ry Day (ALED)					Pending
	Long Term Car	e Ombudsm	an Services			
		QTR1	QTR2	QTR3	QTR4	YTD
Acti	vities Provided	Units	Units	Units	Units	Units
Skilled N	Nursing Facility (SNF) Visits*					
	Facilities for Elderly (RCFE)	SNF – 22	SNF -16	SNF -*	SNF -*	SNF – 38
	Visits*	RCFE - 0	RCFE - 0	RCFE -*	RCFE -*	RCFE - 0
Information	and Assistance to Individuals	53	32	*	*	85
Information an	d Assistance To Facility Staff	26	17	*	*	43
	pation in Facility State Survey	*	1	*	*	1
	Resident Council Facilitation	2	2	*	*	4
	Family Council Facilitation	6	6	*	*	12
	5	5	*	*	10	
Traini	ing Sessions For Facility Staff	*	2	*	*	2
Training For Oml	Training For Ombudsman Staff and Volunteers			*	*	12
	Other Volunteer Time	1	1	*	*	2
Complaint I	nvestigation and Resolution at SNF**	21	29	*	*	50
Complaint In	nvestigation and Resolution at					
1	RCFE**	*	*	*	*	*
* Non-Compla	aint Related Visits – State Mini	mum Requii	rement is 1 V	/isit Per Qu	arter	
** Each Investi	gation averages 3-4 Visits to Fa	acility with I	First Respon	se Occurrin	ng Within T	wo Days
	Contr	acted Serv	vices			
	Legal Service	s				
July 1, 2022	Unduplic	cated Count	for Quarter	*		
through	Total C	Cases Closed	l in Quarter	*	YTI	<b>D-Units</b>
September 30, 2022	Total Units of Serv	ice for Ouar	ter (1 hour)	*		*
October 1, 2022				*		
through	Unduplicated Count for Quarter Total Cases Closed in Quarter			*		
December 31,					_	
2022	Total Units of Service for Quarter (1 hour)			*		*
January 1, 2023	Unduplicated Count for Quarter			*	_	
through	Total Cases Closed in Quarter			*		
March 31, 2023	Total Units of Service for Quarter (1 hour)			*		*
April 1, 2023	*	cated Count	<u>``</u>	*	_	
through	Total Units of Serv	Cases Closed	· ·	*	-	*
June 30, 2023	I otal Units of Serv	ice for Quar	ter (1 nour)	•		

ESAAA Report July 1, 2022- December 31, 2022

# Types of Activities Offered at Senior Sites

Bingo Birthday Recognitions Theme Activities (e.g. Valentines, St. Patrick's...) Exercise- Walking groups, Chair Yoga AARP Tax Assistance **Blood Pressure Checks** Wii Bowling Scrabble **Educational Activities** Movie and Popcorn Crafts **Commodities Distribution** Medi-Cal Managed Care Outreach Cal Fresh Outreach Computer/Internet Access Nutrition Education **Prevention Activities** Working on starting a Book Club Donations received from Vons

Report Prepared By: Morningstar Willis-Wagoner Inyo County HHS, Aging Services

ESAAA Report July 1, 2022- December 31, 2022

# EASTERN SIERRA AREA AGENCY ON AGING (ESAAA) for PLANNING & SERVICE AREA (PSA) 16

# **2023-2024 AREA PLAN UPDATE**

Submitted by The Eastern Sierra Area Agency on Aging Program of the Inyo County Health and Human Services Department 1360 North Main Street, Suite 201 Bishop, CA 93514 760 873-3305

Inyo County Board of Supervisors/ESAAA Governing Board Chairperson Jennifer Roeser ESAAA Advisory Council Chairperson Roger Rosche ESAAA Director Marilyn Mann mmann@inyocounty.us

#### EASTERN SIERRA AREA AGENCY ON AGING (ESAAA) AREA PLAN UPDATE FOR 2023-2024

# AREA PLAN UPDATE (APU) CHECKLIST PSA 16

# 

Use for APUs only

P Guidance Section	APU Components (To be attached to the APU)	Check Includ				
	Update/Submit <b>A)</b> through <b>I)</b> <u>ANNUALLY</u> :					
n/a	<b>Transmittal Letter-</b> (requires <u>hard copy</u> with original ink signatures or official signature stamp- <b>no photocopies)</b>		$\triangleleft$			
n/a	B) APU- (submit entire APU electronically only)		$\triangleleft$			
2, 3, or 4	Estimate- of the number of lower income minority older individuals in the PSA for the coming year					
7	D) Public Hearings- that will be conducted		$\triangleleft$			
n/a	E) Annual Budget					
10	Service Unit Plan (SUP) Objectives and LTC Ombudsman Program Outcomes		$\triangleleft$			
18	G) Legal Assistance		$\triangleleft$			
	Update/Submit the following only if there has been a CHANGE or the section was not included in the 2020-2024					
5	Minimum Percentage/Adequate Proportion		N/C			
5	Needs Assessment		$\boxtimes$			
9	AP Narrative Objectives:		$\boxtimes$			
9	System-Building and Administration		$\boxtimes$			
9	Title IIIB-Funded Programs		$\boxtimes$			
9	Title IIIB-Transportation		$\boxtimes$			
9	Title IIIB-Funded Program Development/Coordination (PD or C)		$\boxtimes$			
9	Title IIIC-1		$\boxtimes$			
9	Title IIIC-2		$\boxtimes$			
9	Title IIID	$\boxtimes$				
20	Title IIIE-Family Caregiver Support Program		$\boxtimes$			
9	HICAP Program		$\boxtimes$			
12	Disaster Preparedness					
14	Notice of Intent-to Provide Direct Services		$\boxtimes$			
15	Request for Approval-to Provide Direct Services	$\boxtimes$				
16	Governing Board	$\boxtimes$				
17	Advisory Council	$\boxtimes$				
21	Organizational Chart(s)	$\boxtimes$				

#### TRANSMITTAL LETTER

#### **2020-2024 Four Year Area Plan/ Annual Update Check <u>one</u>: □ FY 20-24 □ FY 21-22 □ FY 22-23 ⊠ FY 23-24**

AAA Name: Eastern Sierra Area Agency on Aging

**PSA** <u>16</u>

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

1.<u>Jennifer Roeser</u> (Type Name)

Signature: Governing Board Chair<sup>1</sup>

2. <u>Roger Rasche</u> (Type Name)

Signature: Advisory Council Chair

3. <u>Marilyn Mann</u> (Type Name)

Signature: Area Agency Director

<sup>1</sup> Original signatures or official signature stamps are required.

Date

Date

Date

### **SECTION 1. MISSION STATEMENT**

### PSA <u>16</u>

The guiding mission of Health and Human Services is **Strengthening Resilience & Well-Being in Our Community** and the mission of ESAAA is

"To provide leadership in addressing issues that relate to older Californians; to develop communitybased systems of care that provide services which support independence within California's interdependent society, and which protect the quality of life of older persons and persons with functional impairments; and to promote citizen involvement in the planning and delivery of services."

#### SECTION 2. DESCRIPTION OF THE PLANNING AND SERVICE AREA PSA 16

Planning and Service Area (PSA) 16, which includes the Counties of Inyo and Mono, is located at the eastern edge of California, approximately midway between the northern and southern boundaries of the state. The two-county area is a long triangle of which Mono County forms the apex and Inyo County the base. The east side of the triangle comprises about 300 miles of the California-Nevada border. Kern, San Bernardino, Fresno, Tulare and Alpine Counties share borders on the north, south and west. Total area exceeds 13,000 square miles and the total year-round population is approximately 32,211 (2020 US Census), but visitors and second homeowners double this at certain times of the year. The total aging population, based on the 2022 CDA Population Demographic Projections, is approximately 10,917 individuals aged 60 and older, an increase from prior year projections of a little over 1200, with 33% seventy-five years or older. The majority of our aging population resides in Inyo County (~62% in general and ~64% of those 75 or older).

Resources are targeted based upon the Older Americans Act priority populations, looking not just at age distribution but also at issues of poverty, isolation, frailty, HIV status, and cultural/social isolation. These priority populations are distributed across the PSA with higher percentage of distribution in Inyo County. Close to 12% of our population is isolated geographically with 63% of those individuals residing in the Inyo County area. Approximately 1,214 individuals are eligible for Medi Cal, an increase from prior year projections, with approximately 900 considered low-income. The majority of low-income people over the age of 60, approximately 74%, also reside in Inyo County. Our minority population consists primarily of Native American and Latino community members. Our minority population comprises approximately 12% of our aging population or approximately 3,904, an increase from prior year projections, with approximately 3,904, an increase from prior year projections, with approximately (~70%) residing in Inyo County (2019 Data from California Department of Public Health). Extrapolating demographic information such as the number of individuals ages 60 or older is suppressed as this could potentially provide identify markers.

Connecting services to our most geographically isolated residents can be challenging. The PSA's area can be divided into essentially two geographic regions. The Western portion includes the Sierra Nevada Mountain range, which, with its forest, lakes, streams, and ski slopes, plays a major role in the resources and economy of the area, attracting outdoors enthusiasts for hiking, backpacking, hang gliding, snow skiing, snowboarding, fishing, camping and hunting. The Eastern two-thirds of the area is made up essentially of desert basins and mountain ranges, featuring the Death Valley National Park. Emphasizing the contrasting topography of the area is the fact that the western edge of Inyo County contains Mt. Whitney, the highest peak in the United States outside of Alaska, while the eastern region includes Death Valley, in which is found the lowest point in the western hemisphere. Most of the population of the counties is located along US Highway 395 – in Inyo County's Owens Valley along the base of the Sierra Nevada Mountains, and in the mountain communities of Mono County. Small pockets of population also are found along Highway 6 in Mono County and, in Inyo County, east of the Death Valley National Park boundary.

This expansive geographic region of over 13,000 square miles, spread out over desert and mountain terrain, coupled with the dispersed and diverse population pockets, also provides significant constraints and challenges in the delivery of services and in the development of overarching systems for services.

As part of a county health and human services agency, ESAAA service delivery in Inyo County is carefully braided into other service delivery systems; such braided funding occurs also in Mono County service delivery systems, specifically including in both counties:

those funded through Social Services such as In-Home Supportive Services and Adult

Protective Services

• those funded through Mental Health, including Mental Health Services Act

Direct services are provided by ESAAA staff in both Inyo and Mono Counties in all funded service categories, except for Elderly Nutrition Program services, Transportation, Assisted Transportation and Legal Assistance. A contract with the County of Mono allows Mono County employees to provide elderly nutrition, transportation and assisted transportation to Mono County elderly; those same services are provided in Inyo County as a direct service by ESAAA staff. A contract with California Indian Legal Services provides legal assistance in both Inyo and Mono Counties.

NA

# **SECTION 4. PLANNING PROCESS / ESTABLISHING PRIORITIES**

NA

### **SECTION 5 - NEEDS ASSESSMENT**

NA

### **SECTION 6. TARGETING**

NA

#### SECTION 7. PUBLIC HEARINGS

At least one public hearing must be held each year of the four-year planning cycle. CCR Title 22, Article 3, Section 7302(a)(10) and Section 7308, Older Americans Act Reauthorization Act of 2016, Section 314(c)(1).

Fiscal Year	Date	Location	Number of Attendees	Presented in languages other than English? <sup>2</sup> Yes or No	Was hearing held at a Long- Term Care Facility? <sup>3</sup> Yes or
2020-2021	5/28/2020	Virtual due to COVID-19	17	No	No
2021-2022	3/24/2021	Via Zoom	17	No	No
2022-2023		1360 North Main Street, Bishop, CA Virtual: Mammoth Civic Center, Mammoth Lakes, CA AND			
	3/23/2022	Lone Pine Senior Center, Lone Pine, CA	17	No	No
2023-2024		1360 North Main Street, Bishop, CA Mammoth Civic Center, Carson Room 2nd floor, 1290 Tavern Road, Mammoth Lakes, CA Antelope Valley Senior Center, 399 Mule Deer Road, Walker, CA			
		Public can attend Virtually		No	No

#### The following must be discussed at each Public Hearing conducted during the planning cycle:

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

Each facility has been provided iPads with Zoom access for use by residents for family access as well as to access other services. The LTC Ombudsman assisted in the coordination with our two LTC facilities to make virtual attendance available to interested residents through the use of the iPads. Additionally, the agency ensured that all home-delivered meal recipients and caregivers received information on how to access the meeting virtually.

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



Yes. Go to question #3

 $\overline{\boxtimes}$  Not applicable, PD and/or C funds are not used. Go to question #4

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

Not Applicable

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

 $\boxtimes$ Yes. Go to question #5

No, Explain:

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

The minimum percentages set during the four-year planning process were reviewed at the public hearing held on March 16, 2023. Discussion regarding the current percentages set for Transportation/Assisted Transportation, In-home Services and Legal services resulted in the Advisory Council acting to recommend maintaining the current minimum percentages as set during the Area Planning process.

6. List any other issues discussed or raised at the public hearing.

Pending any Public Comment

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

Pending Public Hearing

#### **SECTION 8 - IDENTIFICATION OF PRIORITIES**

There is no anticipated change in priorities or services identified. The identified priorities were confirmed by the governing body following the public hearing.

# **SECTION 9 - AREA PLAN NARRATIVE GOALS AND OBJECTIVES**

NA

#### SECTION 10 - Service Unit Plan (SUP) Objectives

#### TITLE III/VIIA SERVICE UNIT PLAN OBJECTIVES CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) uses the Older Americans Act Performance System (OAPPS) Categories and units of service. They are defined in the OAPPS State Program Report (SPR).

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

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

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

#### Unit of Service = 1 hour

ci sonai Cai c			Chit of Service Thou
Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	-0-	-0-	
2021-22	-0-	-0-	
2022-23	-0-	-0-	
2023-24	-0-	-0-	

#### 2. Homemaker (In-Home)

### Unit of Service = 1 hour

omemaker (1	n nome,		
Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	-0-	-0-	
2021-22	-0-	-0-	
2022-23	-0-	-0-	
2023-24	-0-	-0-	

# 3. Chore (In-Home)

# **Unit of Service = 1 hour**

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	-0-	-0-	
2021-22	-0-	-0-	
2022-23	-0-	-0-	
2023-24	-0-	-0-	

# 4. Home-Delivered Meal

# Unit of Service = 1 meal

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	37,000	1	
2021-22	40,000	1	
2022-23	40,000	1	
2023-24	40,000	1	

# 5. Adult Day/ Health Care (In-Home)

# Unit of Service = 1 hour

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	-0-	-0-	
2021-22	-0-	-0-	
2022-23	-0-	-0-	
2023-24	-0-	-0-	

# 6. <u>Case Management (Access)</u>

<u>Unit of Service = 1 hour</u>

Unit of Service = 1 one-way trip

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	-0-	-0-	
2021-22	-0-	-0-	
2022-23	-0-	-0-	
2023-24	-0-	-0-	

# 7. Assisted Transportation (Access)

	por tation (11et		e int of set tiee i one way trip
Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	150	1,2	
2021-22	100	1,2	
2022-23	100	1,2	
2023-24	100	1,2	

# 8. Congregate Meals

# Unit of Service = 1 meal

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	20,000	1,2	
2021-22	15,000	1,2	
2022-23	15,000	1,2	
2023-24	15,000	1,2	

9. Ni	itrition Cour	nseling	Unit of Ser	vice = 1 session per participant
	Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
	2020-21	10	1	
	2021-22	10	1	
	2022-23	10	1	
	2023-24	10	1	

# **10. Transportation (Access)**

Unit of Service = 1 one-way trip

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	8,500	1,2	
2021-22	8,500	1,2	
2022-23	8,500	1,2	
2023-24	8,500	1,2	

# 11. Legal Assistance

Unit of Service = 1 hour

<u> </u>	7 -		
Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	100	1,2	
2021-22	100	1,2	
2022-23	100	1,2	
2023-24	100	1,2	

# 12. Nutrition EducationUnit of Service = 1 session per participant

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	2,400	1	
2021-22	2,400	1	
2022-23	2,400	1	
2023-24	2,400	1	

# 13. Information and Assistance (Access)

ioi mation ai	iu Assistance (	Access	Unit of Service – I contact
Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	800	1,2,3	
2021-22	800	1,2,3	
2022-23	800	1,2,3	
2023-24	800	1,2,3	

# 14. Outreach (Access)

# **Unit of Service = 1 contact**

Unit of Service = 1 contact

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-21	-0-	-0-	
2021-22	-0-	-0-	
2022-23	-0-	-0-	
2023-24	-0-	-0-	

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

- □ Each <u>**Title IIIB**</u> "Other" service must be an approved NAPIS Program servicelisted on the "Schedule of Supportive Services (III B)" page of the Area Plan Budget (CDA 122) and the CDA Service Categories and Data Dictionary.
- Identify <u>**Title IIIB**</u> services to be funded that were <u>not</u> reported in NAPIS categories. (Identify the specific activity under the Other Supportive Service Category on the "Units of Service" line when applicable.)

# Title IIIB, Other Priority and Non-Priority Supportive Services

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

- Other **Priority Supportive Services include**: Alzheimer's Day Care, Comprehensive Assessment, Health, Mental Health, Public Information, Residential Repairs/Modifications, Respite Care, Telephone Reassurance, and Visiting
- Other Non-Priority Supportive Services include: Cash/Material Aid, Community Education, Disaster Preparedness Materials, Emergency Preparedness, Employment, Housing, Interpretation/Translation, Mobility Management, Peer Counseling, Personal Affairs Assistance, Personal/Home Security, Registry, Senior Center Activities, and Senior Center Staffing

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

### **Other Supportive Service Category**

**Unit of Service =1 contact** 

Telephone Reassurance (In-Home)

elephone recussu	cphone Reassurance (In-Home)				
Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers		
2020-21	120	1			
2021-22	200	1			
2022-23	100	1			
2023-24	100	1			

# 3. Title IIID/Health Promotion—Evidence Based

• Provide the specific name of each proposed evidence-based program.

# Unit of Service = 1 contact

Evidence-Based Program Name(s): <u>ACTIVE LIVING EVERY DAY (ALED)</u>

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (Required)
2020-21	25	1	1.9
2021-22	5	1	1.9
2022-23	25	1	1.9
2023-24	25	1	1.9

Add additional lines if needed.

#### **<u>TITLE IIIB and Title VIIA:</u>**

### LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES

#### 2020–2024 Four-Year Planning Cycle

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

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

Complete all Measures and Targets for Outcomes 1-3.

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

#### **Measures and Targets:**

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

1. FY 2018-2019 Baseline Resolution Rate: Number of complaints resolved <u>81</u> + number of partially resolved complaints <u>0</u> divided by the total number of complaints received <u>88</u> = Baseline Resolution Rate <u>92</u> % FY 2020-2021 Target Resolution Rate <u>90</u> %

2. FY 2019-2020 Baseline Resolution Rate: Number of complaints partially or fully resolved <u>95</u> divided by the total number of complaints received <u>101</u> = Baseline Resolution Rate <u>94 %</u> FY 2021-2022 Target Resolution Rate <u>90 %</u>

3. FY 2020 - 2021 Baseline Resolution Rate: Number of complaints partially or fully resolved <u>62</u> divided by the total number of complaints received <u>63</u> = Baseline Resolution Rate <u>98 %</u> FY 2022-2023 Target Resolution Rate <u>90 %</u> 4. FY 2021-2022 Baseline Resolution Rate:
Number of complaints partially or fully resolved <u>79</u> divided by the total number of complaints received <u>92 =</u> Baseline Resolution Rate <u>90</u>%
FY 2023-2024 Target Resolution Rate <u>86</u>%

Program Goals and Objective Numbers: 1

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

FY 2018-2019 Baseline: Number of Resident Council meetings attended **14** FY 2020-2021 Target: <u>15</u>

FY 2019-2020 Baseline: Number of Resident Council meetings attended <u>7</u> FY 2021-2022 Target: <u>6</u>

FY 2020-2021 Baseline: Number of Resident Council meetings attended <u>4</u> FY 2022-2023 Target: <u>4</u>

FY 2021-2022 Baseline: Number of Resident Council meetings attended FY 2023-2024 Target: <u>9</u>

Program Goals and Objective Numbers: 1

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

FY 2018-2019 Baseline: Number of Family Council meetings attended <u>16</u> FY 2020-2021 Target: <u>10</u>

FY 2019-2020 Baseline: Number of Family Council meetings attended <u>32</u> FY 2021-2022 Target: <u>12</u>

FY 2020-2021 Baseline: Number of Family Council meetings attended <u>31</u> FY 2022-2023 Target: <u>12</u>

FY 2021-2022 Baseline: Number of Family Council meetings attended FY 2023-2024 Target: <u>23</u>

Program Goals and Objective Numbers: 1

#### **D. Information and Assistance to Facility Staff** (NORS Elements S-53 and S-54)

mormation and Assistance to Facility Star (NORS	Liements 5 55 and 5 54)
FY 2018-2019 Baseline: Number of Instances 31	
FY 2020-2021 Target: <u>30</u>	
FY 2019-2020 Baseline: Number of Instances <b>52</b>	
FY 2021-2022 Target: <u><b>30</b></u>	
FY 2020-2021 Baseline: Number of Instances 43	
FY 2022-2023 Target: <u><b>30</b></u>	
FY 2021-2022 Baseline: Number of Instances 56	
FY 2023-2024 Target: <u>30</u>	
Brogram Goals and Objective Numbers: 1	
Program Goals and Objective Numbers: 1	

### E. Information and Assistance to Individuals (NORS Element S-55)

FY 2018-2019 Baseline: Number of Instances <u>89</u> FY 2020-2021 Target: <u>50</u>	
FY 2019-2020 Baseline: Number of Instances <u>157</u> FY 2021-2022 Target: <u>50</u>	
FY 2020-2021 Baseline: Number of Instances <u>95</u> FY 2022-2023 Target: <u>50</u>	
FY 2021-2022 Baseline: Number of Instances <u>111</u> FY 2023-2024 Target: <u>50</u>	
Program Goals and Objective Numbers: 1	

### F. Community Education (NORS Element S-68)

FY 2018-2019 Baseline: Number of Sessions <u>13</u> FY 2020-2021 Target: <u>5</u>

FY 2019-2020 Baseline: Number of Sessions **6** 

FY 2021-2022 Target: 5

FY 2020-2021 Baseline: Number of Sessions 2

FY 2022-2023 Target: 5

FY 2021-2022 Baseline: Number of Sessions  $\underline{6}$ 

FY 2023-2024 Target: 5

Program Goals and Objective Numbers: 1

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

#### FY 2020-2021

**FY 2020-2021 Systems Advocacy Effort(s):** Recognizing that California's older population is projected to grow, a new goal for the Ombudsman Program is to implement a public awareness campaign that focuses on the changing long-term care resident population and its needs. The Ombudsman program will adopt a strategy of working with other organizations, to further this goal and will conduct community and facility educational events.

#### FY 2021-2022

**Outcome of FY 2020-2021 Efforts:** With the COVID-19 Pandemic, the System Advocacy Effort for 2020-2021 was focused on the changing environment within Long-Term Care facilities and working with the facilities, family member, and the community to help meet the needs of the very isolated residents. The LTC Ombudsman was able to coordinate with facility staff and families to allow residents to connect via teleconferencing and other no-contact means.

**FY 2021-2022 Systems Advocacy Effort(s):** (Provide one or more new systems advocacy efforts) Due to COVID-19, the agency was not able to fully implement and complete the systems advocacy efforts from FY2020-2021. The agency will be focusing on the same systems advocacy efforts of: Recognizing that California's older population is projected to grow, a new goal for the Ombudsman Program is to implement a public awareness campaign that focuses on the changing long-term care resident population and its needs. The Ombudsman program will adopt a strategy of working with other organizations, to further this goal and will conduct community and facility educational events.

#### FY 2022-2023

**FY 2022-2023 Systems Advocacy Effort(s):** (Provide one or more new systems advocacy efforts) The LTC Ombudsman program will work to foster participation in Family Councils and Resident Councils. Planning effort to include the development of education on the councils and their purpose, promotion of council meetings, and creating a quarterly newsletter to raise awareness around residents' rights and person-centered care. The program will work to improve the skills of resident and family members in conducting council meetings to empower them to advocate for change in areas of concern. Ombudsman staff will provide information so councils can participate in legislative advocacy efforts related to LTC issues. The LTC Ombudsman program will organization an annual Inyo County Virtual Family Council meeting opportunity for the councils' members to network with one another and share strategies, obstacles, success, and resources.

#### FY 2023-2024

**FY 2023-2024 Systems Advocacy Effort(s):** The LTC Ombudsman Programs goal is to provide an understanding of an older person's view and their circumstances that put them at risk of losing their independence. Through an interactive training, participants will learn how age-related changes in sensory-motor functions affect daily living activities. Participants will increase knowledge about resident's rights and will increase sensitivity to the feelings of older adults when functional skills are impaired. After the interactive training, a discussion will be initiated among the participants that will increase their knowledge about person-centered care practices that lead to better care and quality of life for the residents.

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

#### Measures and Targets:

**A.** Routine Access: Nursing Facilities (NORS Element S-58) Number of nursing facilities within the PSA that were visited by an Ombudsman representative at least once each quarter **not** in response to a complaint. NOTE: This is not a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no nursing facility can be counted more than once.

FY 2018-2019 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint  $\underline{2}$  divided by the total number of Nursing Facilities  $\underline{2}$ 

= Baseline <u>100 %</u>

FY 2020-2021 Target: 100%

FY 2019-2020 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint  $\underline{0}$  divided by the total number of Nursing Facilities  $\underline{2}$ 

= Baseline  $\underline{0}$  %

FY 2021-2022 Target:<u>100</u>%

FY 2020-2021 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint  $\underline{1}$  divided by the total number of Nursing Facilities  $\underline{2}$ 

= Baseline **50** %

FY 2022-2023 Target: 100%

FY 2021-2022 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint <u>2</u> divided by the total number of Nursing Facilities = <u>2</u> Baseline <u>100</u> % FY 2023-2024 Target: <u>100%</u>

Program Goals and Objective Numbers: 1

#### A. Routine access: Residential Care Communities (NORS Element S-61)

FY 2018-2019 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>1</u> divided by the total number of RCFEs <u>1</u> = Baseline <u>100</u>% FY 2020-2021 Target: <u>100%</u>

FY 2019-2020 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>0</u> divided by the total number of RCFEs <u>1</u> = Baseline <u>0</u>% FY 2021-2022 Target: <u>100 %</u>

FY 2020-2021 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint  $\underline{0}$  divided by the total number of RCFEs  $\underline{0}$  = Baseline  $\underline{0}$  % FY 2022-2023 Target: <u>%</u>

FY 2021-2022 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>0</u> divided by the total number of RCFEs <u>0</u> = Baseline <u>0</u>% FY 2023-2024 Target: <u>%</u>

Program Goals and Objective Numbers: 1

#### **B.** Number of Full-Time Equivalent (FTE) Staff (NORS Element S-23)

 FY 2018-2019 Baseline: 1.39 FTEs

 FY 2020-2021 Target: 1.39 FTEs

 FY 2019-2020 Baseline: 1.39 FTEs

 FY 2021-2022 Target: 1.39 FTEs

 FY 2020-2021 Baseline: 1.62 FTEs

 FY 2020-2021 Baseline: 1.62 FTEs

FY 2022-2023 Target: <u>1.62</u> FTEs

FY 2021-2022 Baseline: <u>1.62</u> FTEs

FY 2023-2024 Target: FTEs 1.62

Program Goals and Objective Numbers: 1

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

FY 2018-2019 Baseline: Number of certified LTC Ombudsman volunteers <b>1</b> FY 2020-2021 Projected Number of certified LTC Ombudsman volunteers <b>2</b>
FY 2019-2020 Baseline: Number of certified LTC Ombudsman volunteers <u>2</u> FY 2021-2022 Projected Number of certified LTC Ombudsman volunteers <u>2</u>
FY 2020-2021 Baseline: Number of certified LTC Ombudsman volunteers <u>1</u> FY 2022-2023 Projected Number of certified LTC Ombudsmanvolunteers <u>1</u>
FY 2021-2022 Baseline: Number of certified LTC Ombudsman volunteers <u><b>0</b></u> FY 2023-2024 Projected Number of certified LTC Ombudsman volunteers <u><b>0</b></u>
Program Goals and Objective Numbers: 1

# Outcome 3. Ombudsman representatives accurately and consistently report data about their complaints and other program activities in a timely manner. [Older Americans Act Reauthorization Act of 2016, Section 712(c)]

#### Measures and Targets:

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

Some examples could include:

- Hiring additional staff to enter data
- Updating computer equipment to make data entry easier
- Initiating a case review process to ensure case entry is completed in a timely manner

The LTC Ombudsman program will:

- 1.) Enter data into ODIN in a timely manner, to ensure data is complete for each quarter.
- 2.) Regularly attend NORS Consistency training opportunities provided by the OSLTCO and online courses provided by the National Long-Term Care Ombudsman Resource Center (NORC)
- 3.) Ensure all new volunteers are training and attend the same system trainings that staff are attending.
- 4.) Allow staff and volunteers to have "protected" time to ensure data entry is not interrupted.

#### TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

The program conducting the Title VIIA Elder Abuse Prevention work is:

Х	Ombudsman Program
	Legal Services Provider
	Adult Protective Services
	Other (explain/list)

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

#### TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

The agency receiving Title VIIA Elder Abuse Prevention funding is Inyo County Health and Human Services – Eastern Sierra Area Agency on Aging (ESAAA)

Fiscal Year	Total # of Public Education Sessions
2020-2021	-0-
2021-2022	-0-
2022-2023	-0-
2023-2024	-0-

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

Fiscal Year	Total # of Training Sessions for Professionals
2020-2021	-0-
2021-2022	-0-
2022-2023	-0-
2023-2024	-0-

Fiscal Year	Total # of Hours Spent Developing a Coordinated System
2020-2021	-0-
2021-2022	-0-
2022-2023	-0-
2023-2024	-0-

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2020-2021	5000	Annual Newspaper Publication of "Everyone can do Something to Prevent Elder Abuse" advertisement.
2021-2022	5000	Annual Newspaper Publication of "Everyone can do Something to Prevent Elder Abuse" advertisement.
2022-2023	5000	Annual Newspaper Publication of "Everyone can do Something to Prevent Elder Abuse" advertisement.
2023-2024	5000	Annual Newspaper Publication of "Everyone can do Something to Prevent Elder Abuse" advertisement.

Fiscal Year	Total Number of Individuals Served	
2020-2021	5000	
2021-2022	5000	
2022-2023	5000	
2023-2024	5000	

#### TITLE HIE SERVICE UNIT PLAN OBJECTIVESPSA 16

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

#### 2020-2024 Four-Year Planning Period

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

# **Direct and/or Contracted IIIE Services**

CATEGORIES	1	2	3
Family Caregiver Services	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Caregivers of Older Adults			
Information Services	# Of activities and Total est. audience for above		
2020-2021	# Of activities: -0- Total est. audience for above:		
2021-2022	# of activities: -0- Total est. audience for above:		
2022-2023	# of activities: -0- Total est. audience for above:		
2023-2024	# of activities: -0- Total est. audience for above:		
Access Assistance	Total contacts		
2020-2021	-0-		
2021-2022	-0-		
2022-2023	-0-		
2023-2024	-0-		

Access Assistance	Total contacts		
Support Services	Total hours		
2020-2021	15	1	
2021-2022	15	1	
2022-2023	15	1	
2023-2024	15	1	
Respite Care	Total hours		
2020-2021	100	1	
2021-2022	100	1	
2022-2023	100	1	
2023-2024	100	1	
Supplemental Services	Total occurrences		
2020-2021	-0-		
2021-2022	-0-		
2022-2023	-0-		
2023-2024	-0-		

## Direct and/or Contracted IIIE Services

Older Elderly Relative	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Information Services	# Of activities and Total est. audience for above		
2020-2021	# of activities: -0- Total est. audience for above:		
2021-2022	# of activities: -0- Total est. audience for above:		
2022-2023	# of activities: -0- Total est. audience for above:		
2023-2024	# of activities: -0- Total est. audience for above:		

Older Elderly Relative	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Access Assistance	Total contacts		
2020-2021	-0-		
2021-2022	-0-		
2022-2023	-0-		
2023-2024	-0-		
Support Services	Total hours		
2020-2021	-0-		
2021-2022	-0-		
2022-2023	-0-		
2023-2024	-0-		
Respite Care	Total hours		
2020-2021	-0-		
2021-2022	-0-		
2022-2023	-0-		
2023-2024	-0-		
Supplemental Services	Total occurrences		
2020-2021	-0-		
2021-2022	-0-		
2022-2023	-0-		
2023-2024	-0-		

#### HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP) SERVICE UNIT PLAN CCR Article 3, Section 7300(d)

**MULTIPLE PSA HICAPs**: If you are a part of a multiple-PSA HICAP where two or more AAAs enter into an agreement with one "Managing AAA," to deliver HICAP services on their behalf to eligible persons in their AAA, then each AAA is responsible for providing HICAP services in the covered PSAs in a way that is agreed upon and equitable among the participating parties.

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

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

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

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

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

AAA's should demonstrate progress toward meeting or improving on the Performance requirements established by CDA and ACL as is displayed annually on the *HICAP State and Federal Performance Measures* tool located online at:

https://www.aging.ca.gov/ProgramsProviders/AAA/Planning/

For current and future planning, CDA requires each AAA ensure that HICAP service units and related federal *Annual Resource Report* data are documented and verified complete/ finalized in CDA's Statewide HICAP Automated Reporting Program (SHARP) system per the existing contractual reporting requirements. HICAP Service Units do not need to be input in the Area Plan (with the exception of HICAP Paid Legal Services, where applicable).

	3.1 Estimated Number of	
Fiscal Year (FY)	Clients Represented Per FY (Unit of Service)	Goal Numbers
2020-2021	-0-	
2021-2022	-0-	
2022-2023	-0-	
2023-2024	-0-	
Fiscal Year (FY)	3.2 Estimated Number of Legal Representation Hours Per FY (Unit of Service)	Goal Numbers
2020-2021	-0-	
2021-2022	-0-	
2022-2023	-0-	
2023-2024	-0-	
Fiscal Year (FY)	3.3 Estimated Number of Program Consultation Hours Per FY (Unit of Service)	Goal Numbers
2020-2021	-0-	
2021-2022	-0-	
2022-2023	-0-	
2023-2024	-0-	

#### HICAP Legal Services Units of Service (if applicable)<sup>6</sup>

NOTE: PSA 16 DOES NOT PROVIDE HICAP SERVICES DIRECTLY – HICAP FUNDING IS ALLOCATED TO PSA 21 WHO CONTRACTS FOR HICAP SERVICES IN PSA 16 SERVICE AREA – PLEASE REFER TO THEIR AREA PLAN AND HICAP DOCUMENTS FOR ADDITIONAL INFORMATION.

#### **SECTION 12. Disaster Preparedness**

### PSA <u>16</u>

1. Description of how the AAA coordinates its disaster preparedness plans and activities with local emergency response agencies, relief organizations, state and local governments, and other organizations responsible for emergency preparedness and response as required in OAA, Title III, Section 310.

According to the 2010 "Disaster Assistance Handbook for Area Agencies on Aging" prepared by California Department of Aging, a local AAA must prepare for disasters and participate in disaster-assistance activities on behalf of older persons and persons with disabilities within their span of control.

Eastern Sierra Area Agency on Aging (ESAAA), as part of the local Inyo County Health and Human Services Department, coordinates disaster preparedness plans and activities with local Office of Emergency Services (OES) through the HHS/ESAAA Director. The Director historically receives early notification from the local OES Commander about disaster alerts, and begins the coordination with other local, state, and federal government organizations, as well as with local hospitals and private health care entities. Regularly updated telephone call trees, and annual staff trainings ensure activation of groups of HHS employees to provide: (1) access to the updated GPS database identifying the residential location of all functional access need elderly individuals in Inyo County, as well as their identified health care issues and needs; (2) evacuation and shelter care; (3) basic food and nutrition; (4) coordination with Red Cross and Salvation Army; (5) access to client databases and direct client records; and (6) medical/health care response.

As a two-county PSA, the Director also coordinates with the contracting agency in Mono County to ensure service delivery and other needs are addressed in the event of a disaster. The point person in Mono County is the Social Services Director who, like the HHS/ESAAA Director, is charged with coordination with their OES during a disaster.

2. Identify each of the local Office of Emergency Services (OES) contact person(s) within the PSA that the AAA will coordinate with in the event of a disaster.

Name	Title	Telephone	E-Mail
Kathy Peterson	Mono County	Office: 760	kpeterson@mono.ca.gov
	Social Services	924-1763	
	Director	Cell: 760 937-	
		6518	
Nate Greenberg	Inyo County	Office: 760	ngreenberg@inyocounty.us
	Administrative	878-0377	
	Officer		

### 3. Identify the Disaster Response Coordinator within the AAA.

Name	Title	Telephone	E-Mail
Mikaela Torres	Emergency Services Manager	Office: 760 878-0120	mtorres@inyocounty.us
Taylor Hartshorn	Disaster Program Manager	Cell: 760 878-8294	thartshorn@inyocounty.us

describe how these services will be delivered.			
Critical Services	How Delivered?		
a. Outreach to frail, vulnerable older adults for well-being checks, identified through GPS database and California Aging Reporting System (CARS) database, Adult Protective Services, and In-Home Supportive Services caseload information.	a. By telephone and door-to-door, as determined by OES in consultation with AAA Disaster Response Coordinator		
b. Provision of emergency shelters and/or heating/cooling centers	b. Community-based shelters and centers will be available within close travel distances; assisted transportation will be provided, as needed.		
c. Basic food and nutrition	<ul> <li>c. (1) Delivery of hot and/or frozen meals as capability allows, including shelf-ready         <ul> <li>(2) Access to disaster related</li> </ul> </li> </ul>		
	CalFresh services		
d. Access to critical medications, health services	d. Via local OES-Red Cross vendor agreements for pharmaceuticals, oxygen/other health care apparatus		
e. After-disaster follow-up assessment	and care e. Telephone and/or in-person welfare checks		

# 4. List critical services the AAA will continue to provide after a disaster and describe how these services will be delivered.

5. List any agencies with which the AAA has formal emergency preparation or response agreements.

ESAAA is part of local County government, and as such, is formally obligated to be part of the local government OES system, as is the contracting agency in Mono County. As part of the County Emergency Response Systems:

Red Cross-Los Angeles chapter

Inland Counties Emergency Medical Services Authority (ICEMA) CalFresh (Food Stamps) agreement between Inyo and Mono Counties 6. Describe how the AAA will identify vulnerable populations, and follow-up with these vulnerable populations after a disaster event.

Identification of vulnerable populations will be conducted in Inyo County through a GPS-linked database showing residential locations of all individuals with access and functional needs. Also available in both Inyo and Mono Counties are client records and the CARS database, as well as IHSS data systems.

County law enforcement agencies in both counties typically send personnel doorto-door for well-being checks of those individuals identified in the GPS database and for those identified by staff accessing the CARS database or other proprietary databases. Telephone and door-to-door follow-up also is provided by a range of County employees, in consultation with AAA Disaster Response Coordinator, to identify needs and request services.

#### SECTION 15 - REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES PSA 16

Older Americans Act Reauthorization Act of 2020 Section 307(a)(8) CCR Article 3, Section 7320(c), W&I Code Section 9533(f)

Complete and submit for CDA approval a separate Section 15 for each direct service not specified in Section 14. The request for approval may include multiple funding sources for a specific service.

□ Check box if not requesting approval to provide any direct services.

#### Identify Service Category: <u>Health Promotion Evidence-Based</u>

Check applicable funding source:

□ IIIB

□ IIIC-1

□ IIIC-2

🛛 IIID

 $\Box$  VIIA

□ HICAP

Request for Approval Justification:

☑ Necessary to Assure an Adequate Supply of Service <u>OR</u>

 $\Box$  More cost effective if provided by the AAA than if purchased from a comparable service provider.

Check all fiscal year(s) the AAA intends to provide service during this Area Plan cycle.

#### □ FY 20-21 □ FY 21-22 □ FY 22-23 ⊠ FY 23-24

**Justification:** Comparable service provider not available within this service area.

#### PSA <u>16</u>

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

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

#### Total Number of Board Members: 5

#### Name and Title of Officers:

Jennifer Roeser, Chairperson	January 2025
Scott Marcellin, Vice Chairperson	January 2027

Name and Title of All Members:	<b>Board Term Expires:</b>
Matt Kingsley	January 2025
Jeff Griffiths	January 2025
Trina Orrill	January 2027

#### **Office Term Expires:**

#### **SECTION 17 - ADVISORY COUNCIL**

#### ADVISORY COUNCIL MEMBERSHIP 2020-2024 Four-Year Planning Cycle

Older Americans Act Re	authorization Act	of 2020 Section 30	06(a)(6)(D)
4	5 CFR, Section 13	321.57	
CCR A	Article 3, Section 7	7302(a)(12)	
Total Council Membership (include	vacancies) <u>9</u>		
Number of Council Members over a	ge 60 <u>6</u>		
	% of PSA's		% on
	60+Population	<u>1</u>	Advisory Counci
<b>Race/Ethnic Composition</b>			- ·
White	64%		100%
Hispanic	25%		0%
Black	1%		0%
Asian/Pacific Islander	2%		0%
Native American/Alaskan Native	8%		0%
Other (2 or more)	3%		0%
Office Term Expires:			
Roger Rasche			December 2024

Roger Rasche	December 2024
Sandy Lund	December 2024
Kelli Davis	December 2023
Heidi Dougherty	December 2024
Trina Orrill	January 2024
Patti Hamic-Christensen	December 2023
Vacant - Recruiting	
Vacant - Recruiting	
Vacant - Recruiting	

#### **Office Term Expires:**

(no other members)	

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

	Yes	No	
Low Income Representative	$\bowtie$		Roger Rasche
Disabled Representative	$\square$		Roger Rasche
Supportive Service Provider Representative	$\overline{\boxtimes}$		Kelli Davis, Patti Hamic-
			Christensen
Health Care Provider Representative	$\bowtie$		Teresa McFarland
-			
Family Caregiver Representative		$\boxtimes$	Vacant
Local Elected Officials	$\overline{\boxtimes}$		Trina Orrill
Individuals with Leadership Experience in			
Private and Voluntary Sectors	$\bowtie$		Kelli Davis, Sandra Lund,
-			Roger Rasche,
			Heidi Dougherty

Explain any "No" answer(s): This position is being recruited.

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

Vacant positions are advertised in local media and includes targeted outreach to fill unfilled categories of representation, while also working to ensure appropriate geographical representation. Upon the closing of the recruitment, the appointment of Advisory Council members will be placed on the agenda for a public meeting of the Governing Board, at which time the Governing Board will appoint Advisory Council members for designated terms of office. All such meetings are publicly noticed in accordance with Brown Act requirements.

#### 2020-2024 Four-Year Area Planning Cycle

This section <u>must</u> be completed and submitted annually. The Older Americans Act Reauthorization Act of 2020 designates legal assistance as a priority service under Title III B [42 USC 3026(a)(2)]<sup>12</sup>.

CDA developed *California Statewide Guidelines for Legal Assistance* (Guidelines), which are to be used as best practices by CDA, AAAs and LSPs in the contracting and monitoring processes for legal services, and located at: <u>https://aging.ca.gov/Providers\_and\_Partners/Legal\_Services/#pp-gg</u>

- 1. Based on your local needs assessment, what percentage of Title IIIB funding is allocated to Legal Services? **Discuss:** Needs identified during the needs assessment clustered in the largest numbers around isolation, transportation, assistance with activities of daily living, and having enough money to meet the basic needs of food, clothing, and shelter. While legal services were not identified as one of the higher priorities, assistance with legal issues such as wills/trusts, evictions, and benefits was identified as a need. The minimum percentage identified during the area planning and subsequent updates is 10%. However, funding has been provided at a higher level than the minimum percentage.
- 2. Specific to Legal Services, has there been a change in your local needs in the past four years? If so, please identify the change (include whether the change affected the level of funding and the difference in funding levels in the past four years). Yes/No,Discuss: No There were minimal significant changes noted in local needs, although there has been a new focus on housing/eviction related issues and advanced health care directives as reported by the contractor, with the needs assessment priority still identifying legal assistance for matters such as contracts, wills, estate planning and related issues. The pandemic did result in some increased need as it relates to navigating legal issues related to housing and funds provided through relief funding were allocated in this manner. The base allocation, and subsequent one-time only funding, continued to be contracted at the 10% minimum percentage with an additional ~\$10,000 of supportive service funding.
- **3.** Specific to Legal Services, does the AAA's contract/agreement with the Legal Services Provider(s) (LSPs) specify that the LSPs are expected to use the California Statewide Guidelines in the provision of OAA legal services? **Yes/No, Discuss: Yes** ESAAA contracts legal services in compliance with CDA requirements and ensures that the contractual agreement includes the expectation that the contractor will use California Statewide Guidelines in the provision of legal services.
- 4. Does the AAA collaborate with the Legal Services Provider(s) to jointly establishspecific priority issues for legal services? If so, what are the top four (4) priority legal issues in your PSA? Yes/No, Discuss: Yes The top four legal issues include housing/eviction related issues, advanced health care directives, assistance with public funding access, and legal matters involving contracts, wills and estate planning.

- **5.** Specific to Legal Services, does the AAA collaborate with the Legal Services Provider(s) to jointly identify the target population? **Yes/No, Discuss: Yes** The AAA and contractor communicate as needed to ensure that more isolated and target populations' legal needs are addressed through access. Sharing information as to types of calls and identifying any trends in types of calls or underserved populations/areas is communicated in order to better coordinate and plan.
- 6. Specific to Legal Services, what is the targeted senior population and mechanismfor reaching targeted groups in your PSA? **Discuss:** The targeted aging population is low-income and disabled seniors. However, other target population factors such as language access, HIV, geographic isolation are also prioritized for service.
- 7. How many legal assistance service providers are in your PSA? Complete table below.

Fiscal Year	# of Legal Assistance Services Providers
2020-2021	1
2021-2022	1
2022-2023	1
2023-2024	1

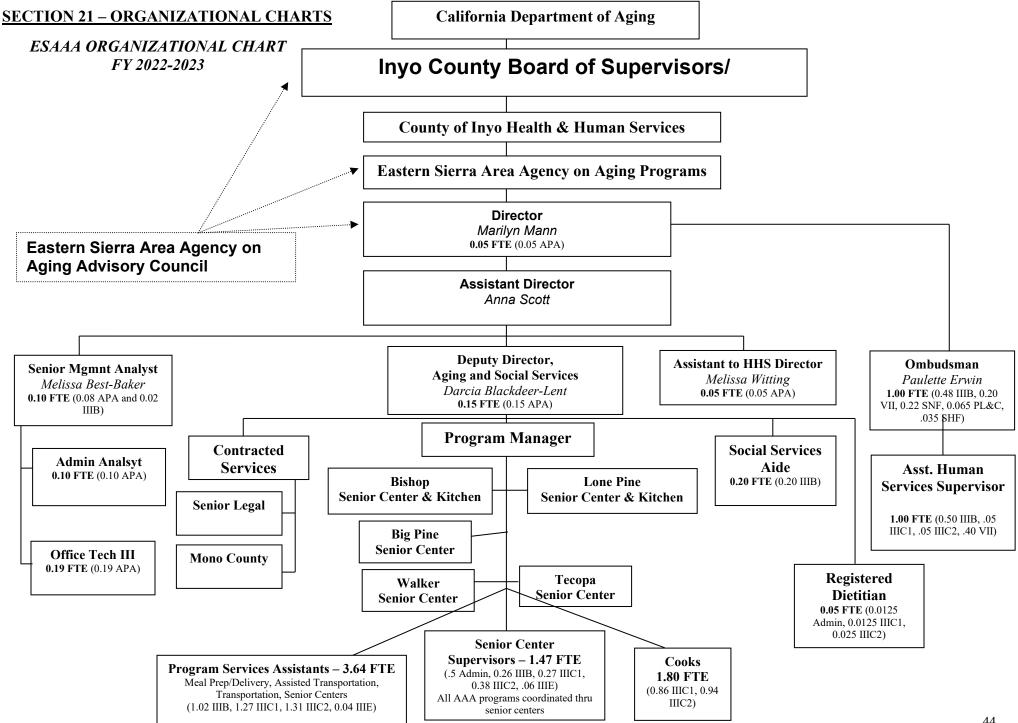
8. What methods of outreach are Legal Services Providers using? **Discuss:** Outreach methods include, but are not limited to, a combination of written materials provided at congregate meal sites and through home-delivered meals, mailings to family caregivers, and in-person and/or videoconference presentation at Senior Centers throughout the PSA.

<sup>&</sup>lt;sup>2</sup> For Information related to Legal Services, contact Jeremy A. Avila at 916 419-7500 or <u>Jeremy.Avila@aging.ca.gov</u>

9. What geographic regions are covered by each provider? **Complete table below:** 

Fiscal Year	Name of Provider	Geographic Region covered
2020-2021	California Indian Legal Services	Inyo and Mono Counties
2021-2022	California Indian Legal Services	Inyo and Mono Counties
2022-2023	California Indian Legal Services	Inyo and Mono Counties
2023-2024	California Indian Legal Services	Inyo and Mono Counties

- 10. Discuss how older adults access Legal Services in your PSA and whether they can receive assistance remotely (e.g., virtual legal clinics, phone, U.S. Mail, etc.). **Discuss:** Access is affected in person, by phone, through remote outreach, and virtual platforms.
- 11. Identify the major types of legal issues that are handled by the Title IIIB legal provider(s) in your PSA (please include new legal problem trends in your area). **Discuss:** As indicated above, assistance with evictions/rental issues, advanced health care directives, contracts/wills/estates, and assistance with accessing public aid. More recently, during the pandemic, there was an increase in need for eviction/rental related legal issues.
- 12. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. **Discuss:** Barriers within the PSA include the expansive 13,000 + square miles of geography, which is sparsely populated and unreliable and/or unavailable internet/technology options. These two factors combine to make it difficult for private sector for-profit businesses or health care providers to sustain services in the PSA. Therefore, much of the specialty care and shopping requires extensive assistance with transportation out of the PSA and event within the PSA. The prioritization of supportive services dollars towards access to services results in less funding availability for legal assistance. However, to support maximizing the available funding to extend to these remote areas, virtual access has been made available at 5 of the 6 focal points, allowing eligible residents access to legal service resources.
- 13. What other organizations or groups does your legal service provider coordinate services with? Discuss: The provider coordinates services with other ESAAA programs, Social Services programs in both counties, the LTC Ombudsman, and with the local bar to ensure a continuum of legal information/services throughout the PSA>



FY 21/22 Administrative (APA) FTE's is 1.12 = \$80,666 in Salaries and Benefits + \$31,068 in other costs (A-87, rent, etc.) for a total of 106,015, which is covered by the CDA Administrative Allocation of \$163,242 and match in the amount of \$54,507 cash.

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#### AREA PLAN Budget Display Fiscal Year 2022-23 Base and OTO Allocations Eastern Sierra Area Agency on Aging

Total Supportive Services 100,042 7,572 107,614 97,746 9,868 90,293 7,45	Allocations - - - - - - - - - - - - - - - - - - -	Mono Difference - - 253 706 - 959	Change - 1,682 1,262 5,047
Baseline         OTO         Total         County         County         Baseline Allocations         Different Different           Supportive Services         Legal         20,000         20,000         20,000         20,000         -           0.2 I&A         15,798         1,514         17,312         17,312         15,630         1,68           0.15 Transportation (80/20)         11,848         1,136         12,984         10,387         2,597         9,378         1,00           0.6 Assisted Transportation (86/14)         47,394         4,543         51,937         44,665         7,271         40,325         4,34           0.05 Telephone Reassurance         5,002         379         5,381         -         4,960         44           Total Supportive Services         100,042         7,572         107,614         97,746         9,868         90,293         7,44	Ce Allocations - - - - - - - - - - - - - - - - - - -	Difference - 253 706 -	- 1,682 1,262
Supportive Services         20,000         20,000         20,000         20,000         -           0.2 I&A         15,798         1,514         17,312         15,630         1,66           0.15 Transportation (80/20)         11,848         1,136         12,984         10,387         2,597         9,378         1,06           0.6 Assisted Transportation (86/14)         47,394         4,543         51,937         44,665         7,271         40,325         4,36           0.05 Telephone Reassurance         5,002         379         5,381         -         4,960         42           Total Supportive Services         100,042         7,572         107,614         97,746         9,868         90,293         7,44	- 82 - 09 2,344 40 6,565 21 -	- 253 706 -	1,682 1,262
Legal         20,000         20,000         20,000         20,000         -           0.2         I&A         15,798         1,514         17,312         17,312         15,630         1,66           0.15         Transportation (80/20)         11,848         1,136         12,984         10,387         2,597         9,378         1,00           0.6         Assisted Transportation (86/14)         47,394         4,543         51,937         44,665         7,271         40,325         4,34           0.05         Telephone Reassurance         5,002         379         5,381         -         4,960         44           Total Supportive Services         100,042         7,572         107,614         97,746         9,868         90,293         7,44	09 2,344 40 6,565 21 -	- 253 706 -	1,682 1,262
0.2         18A         15,798         1,514         17,312         15,630         1,68           0.15         Transportation (80/20)         11,848         1,136         12,984         10,387         2,597         9,378         1,00           0.6         Assisted Transportation (86/14)         47,394         4,543         51,937         44,665         7,271         40,325         4,34           0.05         Telephone Reassurance         5,002         379         5,381         -         4,960         42           Total Supportive Services         100,042         7,572         107,614         97,746         9,868         90,293         7,45	09 2,344 40 6,565 21 -	- 253 706 -	1,682 1,262
0.15         Transportation (80/20)         11,848         1,136         12,984         10,387         2,597         9,378         1,00           0.6         Assisted Transportation (86/14)         47,394         4,543         51,937         44,665         7,271         40,325         4,34           0.05         Telephone Reassurance         5,002         379         5,381         -         4,960         42           Total Supportive Services         100,042         7,572         107,614         97,746         9,868         90,293         7,45	09 2,344 40 6,565 21 -	253 706 -	1,262
0.6         Assisted Transportation (86/14)         47,394         4,543         51,937         44,665         7,271         40,325         4,34           0.05         Telephone Reassurance         5,002         379         5,381         -         4,960         42           Total Supportive Services         100,042         7,572         107,614         97,746         9,868         90,293         7,45	40 6,565 21 -	706 -	
0.05 <u>Telephone Reassurance</u> 5,002 379 5,381 <u>5,381 - 4,960 42</u> Total Supportive Services 100,042 7,572 107,614 <u>97,746</u> 9,868 90,293 7,45	<mark>21</mark> -	-	5,047
Total Supportive Services 100,042 7,572 107,614 97,746 9,868 90,293 7,44		- 959	
	53 8,909	959	421
		000	8,412
Ombudsman			
Federal Title IIIB 23,483 3,257 26,740 - 23,565 3,17	75 -	-	3,175
	- 09	_	709
General Fund IIIB 111,168 111,168 111,168 112,227 (1,05			(1,059)
	64)		(64)
State Health Facilities Citation 1,233 1,123 2,356 2,356 1,222 1,13	· · ·	-	1,134
SNF Quality & Accountability 16,673 16,673 16,673 16,673 16,975 (30		-	(302)
Total Ombudsman 191,184 5,214 196,398 196,398 - 192,805 3,59	93 -	-	3,593
Congregate Nutrition (84/16)			
Federal Title IIIC1 105,790 1,978 107,768 90,525 17,243 104,454 (13,92	29) 19,896	(2,653)	(16,582)
General Fund C1 131,565 131,565 131,565 21,050 126,346 (15,85	· · · · · · · · · · · · · · · · · · ·	(3,016)	(18,847)
NSIP C1 15,001 15,001 2,400 9,514 3,00	· · · · · · · · · · · · · · · · · · ·	588	3,675
Total Congregate Nut 252,356 1,978 254,334 213,641 40,693 240,314 (26,6)		(5,081)	(31,754)
Home-Delivered Meals (80/20)			
Federal Title IIIC2 98,989 9,814 108,803 87,042 21,761 80,495 6,5		1,637	8,184
General Fund C2 708,714 708,714 566,971 141,743 279,229 287,74		71,936	359,678
NSIP C2 25,999 25,999 25,200 17,218 3,56 Total Home Delivered 833,702 9,814 843,516 674,813 168,703 376,942 297,85		896 74,468	4,477 372,339
		,	012,000
Disease Prevention			
	<mark>88</mark> -	-	788
Total Disease Preven 2,804 678 3,482 - 2,694 76	88 -	-	788
Family Caregiver			
Federal Title IIIE 19,761 1,843 21,604 - 18,978 2,62	26 -	_	2,626
Total Family Caregive 19,761 1,843 21,604 21,604 - 18,978 2,62		-	2,626
Elder Abuse Federal Title VII Elder Abuse Pre 590 83 673 - 568 10	05 -		105
	05 -		105
			105
Administration			
	92 -	-	692
General Fund 100,000 100,000 - 100,000 - 100,000	- 00		100,000
Total Administration 163,934 163,934 163,934 - 63,242 100,69	92 -		- 100,692
Grand Total - All Funds         1,564,373         27,182         1,591,555         1,372,290         219,265         985,836         386,44	55 148,918	70,347	456,801
Funding Summary			
Federal Funds 491,510 26,059 517,569 461,098 56,471 446,263 14,83	35 55,045	1,426	16,261
General Fund 1,051,447 - 1,051,447 888,654 162,793 517,802 370,85		68,920	439,772
	64)	00,020	(64)
SNF Quality & Accountability 16,673 16,673 16,673 16,673 16,975 (30		_	(302)
Special Deposit 1,233 1,123 2,356 - 1,222 1,13		-	1,134
1,564,373 27,182 1,591,555 1,372,290 219,265 985,836 386,43		70,347	456,801

AREA PLAN Budget Display Fiscal Year 2022/23 County of Inyo Eastern Sierra Agency on Aging FY 22/23 Baseline Allocations Additions of OTO Monies									
		Inyo	Mono	Additions of OTO Monies					
	Baseline	County	County	ΟΤΟ	County	County			
Supportive Services	20,000	20,000							
Legal <b>0.2</b> I&A	20,000 15,798	20,000 15,798	0	1,514	1,514				
<b>0.15</b> Transportation (80/20)	15,798	9,479	2,370	1,514	908	227			
<b>0.6</b> Assisted Transportation (86/14)	47,394	40,759	2,370 6,635	4,543	3,906	637			
<b>0.05</b> In Home	47,394 5,002	40,759 5,002	0,035	4,543	3,900	037			
Total Supportive Services	100,042	91,037	- 9,005	7,572	6,708	864			
<b>Congregate Nutrition (84/16)</b> Federal Title IIIC1 General Fund C1	105,790 131,565	88,864 110,515	16,926 21,050	1,978	1,661	317			
NSIP C1	15,001	12,601	2,400						
Total Congregate Nutrition Home-Delivered Meals (80/20)	252,356	211,979	40,377	1,978	1,661	317			
Federal Title IIIC2 General Fund C2 NSIP C2	98,989 708,714 25,999	79,191 566,971 20,799	19,798 141,743 5,200	9,814	7,851	1,963			
Total Home Delivered Meals	833,702	666,962	166,740	9,814	7,851	1,963			
Grand Total - All Funds	1,186,100	969,978	216,122	19,364	16,220	3,144			
Funding Summary Federal Funds State General Fund	345,821 840,279	292,492 677,486	53,329 162,793	19,364	16,220	3,144			
	1,186,100	969,978	216,122	19,364	16,220	3,144			