

## Area Plan for Aging Services PLANNING CYCLE State Fiscal Years 2021-2024 SFY 2023 AREA PLAN

**December 15, 2022** 

## <u>Item #1 - Checklist</u> SFY 2023 <u>Area Plan Checklist</u> & <u>Area Plan Table of Contents</u>

Item #1 - Checklist and Area Plan Table of Contents	As applicable, place an "X" in the Column for "Yes", "No" "N/A" below.				
*Denotes Signature Required	Yes	No	N/A	Comments	
Area Plan Narrative Checklist Contents					
Item #2 - Letter of Intent*	X				
Item #3 - Executive Summary					
<ul> <li>#3a - Summary Description of Federal, State &amp; Local Aging Network</li> </ul>	x				
#3b - Overview of the Area Agency on Aging	Х				
#3c - AAA Roles and Responsibilities	Х				
• #3d - AAA Vision, Mission and Values	Х				
#3e - Purpose of Area Plan	Х				
Item #4 – Regional Context					
#4a - Current and Future Older Persons	Х				
#4b - Needs Assessment Process and Results for all Methods Utilized	X				
• #4c - Gap/Barriers/Needs to Improve Existing System	Х				
#4d - Special Needs	Х				
Item #5 - Descriptions of Services Delivery System					
<ul> <li>#5a(1) – Older Americans Act Programs and Services Funded through the "GA Department of Human Services Division of Aging Services Multi-Funded</li> </ul>	x				

Item #1 - Checklist and Area Plan Table of Contents	As applicable, place an "X" in the Column for "Yes", "No" "N/A" below.				
*Denotes Signature Required	Yes	No	N/A	Comments	
Services Contract" Table; with Services Provided Directly by the AAA Column.					
<ul> <li>#5a(2) Tables for Services Delivered Directly by the Area Agency on Aging</li> </ul>					
<ul> <li>#5a(3) Tables for Case Management Services the Area Agency on Aging Offers in its Planning and Service Area</li> </ul>					
<ul> <li>#5b – Contract/Commercial Relationships Services Delivery System Tables - Initiatives, Services/Programs Funded through DAS/ACL Discretionary Grants, Other Federal, State and Local Funds, and Commercial relationships such as with Health Partners, Insurance Agencies, IT Contracts, etc.</li> </ul>	x				
Item #6 - Location of Services Charts					
<ul> <li>Chart #1 - Home and Community Based Services (HCBS) - As identified in Item 5a(1).</li> </ul>	x				
Chart #2 - Access Services - As identified in Item     5a(1).	x				
<ul> <li>Chart #3 – Contract/Commercial Relationships Services Delivery System - Initiatives, Services/Programs Funded through DAS/ACL Discretionary Grants, Other Federal, State and Local Funds, and Commercial relationships such as with</li> </ul>	x				

Item #1 - Checklist and Area Plan Table of Contents	"N/A" below.					
*Denotes Signature Required	Yes	No	N/A	Comments		
Health Partners, Insurance Agencies, IT Contracts, etc <b>As identified in Item 5b.</b>						
Item #7 – Cost Share Implementation Plan Introduction and AAA's Cost Share Implementation Plan	x					
Item #8 - Allocation, Budget, and Units Plan						
<ul> <li>#8a - Allocations Methodology</li> </ul>	X					
#8b - Budget Narrative	Х					
#8c - Changes to Services/Units/Persons	Х					
Item #9 - 2020 – 2023 State Plan and AAA Area Plan Ali Objectives, and Measures Introduction	-	f Older A	mericans /	Act Mandate for Goals,		
Item #10 – Goal #1 Objectives and Measures Charts	X					
Item #11 – Goal #2 Objectives and Measures Charts	X X					
Item #12 – Goal #3 Objectives and Measures Charts Item #13 – Goal #4 Objectives and Measures Chart	X					
Item #14 – Goal #5 Objectives and Measures Charts	X					
Item #15 – AAA Initiated Goals, Objectives, and						
Measures Charts (Optional)			X			
AREA PLAN COMPLIANCE DOCUMENTS ATTACHMENTS	Yes	No	N/A	Comments		
Attachment A - Agency's Indirect Cost Allocation Plan						
for SFY 2023* (Or the current Agency Indirect Cost	х					
Allocation Plan is included, and it is documented on the title page for Att A within the AAA's Area Plan <b>when</b> the						

Item #1 - Checklist and Area Plan Table of Contents	As applicable, place an "X" in the Column for "Yes", "No" of "N/A" below.					
*Denotes Signature Required	Yes	No	N/A	Comments		
SFY 2023 Agency Indirect Cost Plan is to be approved and available to the DAS.)						
Attachments B:	X					
• B-1a - GA DHS DAS Request for Advance Payments						
Against Contracts Letter*			TIVE SFY	2022		
B-1b - GA DHS DAS Request for Advance Letter			INE SET	2022		
B-1c - Request for Advance Worksheet						
<ul> <li>Replacement Page for Area Plan Attachments B- 1a, B-1b and B-1c</li> </ul>	x					
B-2 - Letter of Fidelity/Assurance Bond Coverage     (Bonding Agency signature required)	x					
B-3 - Board Resolution*	Х					
B-4 – Standard Assurances*	Х					
B-5 - Letter(s) Requesting a Waiver of Standard						
Assurances is inserted* (Or it is noted on the B-5 Title page that no waiver(s) is/are requested.)			X			
Attachment C - Title III OAA Federal Allocation and Match Analysis (Excel) (Indicate applicable Budget Submission)	x					
Attachment D – Area Plan Provider Services List (DDS Report)	x					
Attachment E. How has the Dendemia COV/ID 40						
Attachment E – How has the Pandemic, COVID-19, Impacted the AAA?						



1181 Coastal Drive, SW Darien, GA 31305

Serving the Cities and Counties of Coastal Georgia since 1964

March 1, 2022

Breanna Thomas Deputy Commissioner, State Programs & Human Resources Acting Assistant Deputy Commissioner for Aging Services #2 Peachtree Street NW, Floor 33 Atlanta, GA 30303-3142

Dear Ms. Thomas:

The original Area Plan on Aging for the Planning Cycle of July 1, 2021 to June 30, 2024 is hereby submitted on behalf of the Coastal Regional Commission for the period of July 1, 2022 to June 30, 2023.

The Coastal Regional Commission Area Agency on Aging has the authority and responsibility to develop and administer the Area Plan in accordance with all requirements of the Older Americans Act (OAA), State of Georgia, and other federal and state programs as appropriate.

This plan reflects meeting all federal and state statutory and regulatory requirements and was approved by the Coastal Regional Commission Council at their meeting held February 9, 2022.

Sincerely, AAA Director Pamela Rogers

Executive Director Allen Burns

Aging Advisory Council Chairperson Mr. Farran Fullilove

Council Chairman

Jason Coley

## Item #3 – Executive Summary

## Item #3a - Summary Description of Federal, State and Local Aging Network

The foundation of the Aging Network was formalized with the passage of the Older Americans Act of 1965. This legislation was instrumental in defining and creating the beginnings of what we now refer to as the Aging Network. This network has grown considerably through the years, but still includes core organizations such as the Administration on Aging, state Units on Aging, Area Agencies on Aging and service providers. The US Administration for Community Living or ACL (formerly Administration on Aging or AOA) is the federally designated agency that oversees nutrition, home and community based services for older adults and caregivers. ACL is a division of the US Health and Human Services agency. While ACL's main office is located in the DC area, there are regional offices throughout the United States covering the 10 regions. ACL works closely with each State Unit on Aging to provide vision, funding and regulations for the implementation and operation of aging programs throughout the state.

The GA Department of Human Services Division of Aging Services (DAS) is designated as the state unit on aging for Georgia. DAS works with Area Agencies on Aging (AAA), regional offices located in each of the 12 regional planning and service areas in GA. The Coastal Regional Commission (CRC) is the designated AAA for the nine-county Coastal Georgia region, offering services in Bryan, Bulloch, Camden, Chatham, Effingham, Glynn, Long, Liberty and McIntosh counties. The AAA serves all residents regardless of income, race or national origin. The AAA assesses, plans, and coordinates services and programs for senior adults, persons with disabilities, and caregivers of the region. The AAA works with local service providers to operate services at the city and county level. The aging provider network includes city and county governments, non- profit organizations as well as for profit businesses. In order to carry out the aging plan, the AAA works with many consumers, partners and community groups across the region.

The AAA has the responsibility for addressing present and future aging and long-term care issues within Coastal Georgia's growing and diverse communities. In 2015, the AAA contracted with Kerr & Downs Research to perform a needs assessment of local adults, 55 years of age and older and caregivers, to develop a demographic trend analysis to effectively estimate the demand for services and activities through the year 2035. Findings from the Census 2010 offer the most recent and comprehensive demographic and service-related data available in the region, providing a strong foundation for future planning and program development for our region's elderly and disabled residents.

This Area Plan reflects the goals, objectives, and activities of the Coastal AAA over the four-year planning cycle, 2021 through 2024. The Plan is consistent with the Older Americans Act (OAA) legislation and the guidelines set forth by the Georgia Department of Human Services Division of Aging Services (DAS). Most importantly, the Area Plan seeks to inform the general

public and regional policymakers of the development and delivery of services designed to foster independence and improve the quality of life for one of our region's most priceless resources – our senior adults.

## Item #3b - Overview of the Area Agency on Aging

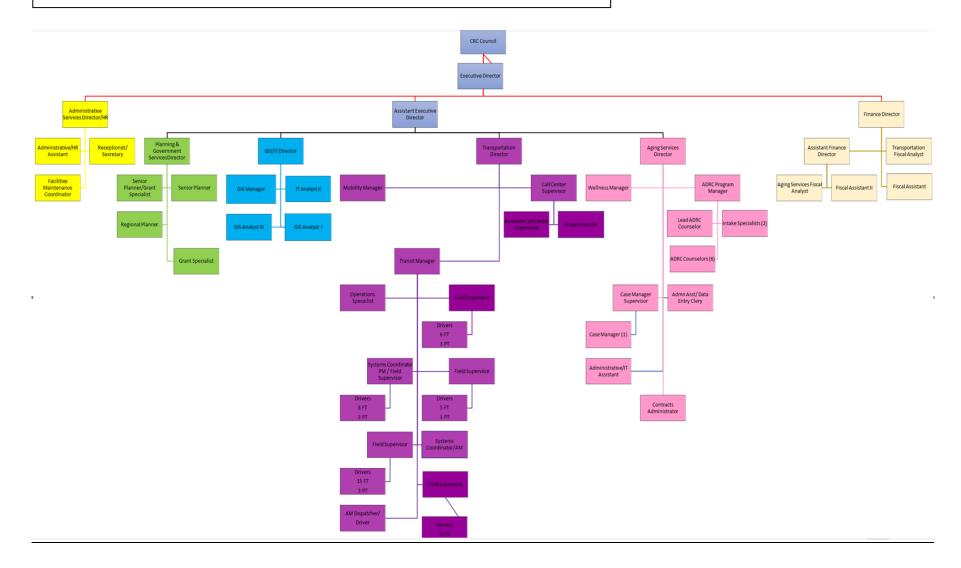
The Coastal Regional Commission (CRC) was formed in 1964, and has served as the Area Agency on Aging since 1973, providing nine counties and 30 cities with information and access to services for a growing and diverse aging population. Today, the CRC includes Screven County in its Planning and Service Area; however, for Aging programs, Screven continues to be served by the Central Savannah River Area Regional Commission.

The CRC Council serves as the governing body for the organization, and is comprised of thirty-nine (39) county, city, and at-large representatives from across the region. The CRC Executive Director reports directly to the Council and is responsible for the oversight and operations of the organization. In addition to the Aging Services, CRC supports four additional departments, including Administration, Finance, Transportation, and Economic Development/Planning & Government Services. Today, the CRC employs ninety-one (91) full-time and fourteen (14) part-time professionals and other contract staff.

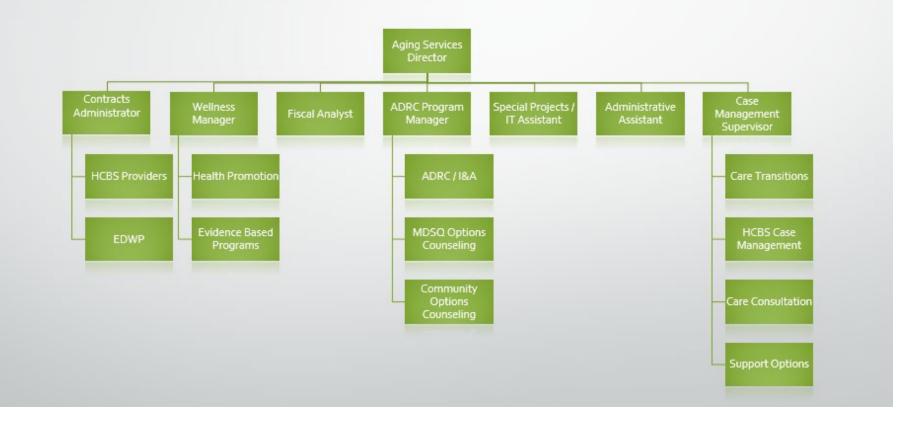
The Coastal AAA current staffing level is at 17.5 FTE's, and 1 independent consultant. The AAA sub-contracts with fourteen organizations to deliver information, programs, and services in a manner consistent with the vision, mission, and values of the organization, the Georgia Division of Aging Services, the Georgia Department of Community Health, and the U.S. Administration for Community Living. The staff of the AAA consists of a director, 5 lead/management staff, 11 front line staff and a half time Resource Specialist. In addition, we leverage other community resources to expand our reach, having had six university interns placed in our department within the last four years.

Volunteers of our programs are recruited and managed by respective Program Managers throughout the agency. Our vision is to grow our pool each year by providing engaging, meaningful assignments for those of all ages interested in volunteering their time and talents. CRC and AAA organizational charts are provided below:

## **Coastal Regional Commission Organizational Chart**



# **Aging Services Organization Chart**



In accordance with the Older Americans Act legislation, the AAA has an Advisory Council made up of three representatives from each of nine counties (and two from the City of Savannah) in the region, the majority of who are over age 60. The Council meets quarterly to review AAA programs and to provide input regarding service and training needs in the region. The Council has an Executive Committee made up of a Chair, Co-Chair, and a Secretary, and operates under established by-laws. On official matters requiring action, the Advisory Council takes a vote and makes its recommendations to the CRC Council for approval.

There are a total of twenty-nine (29) positions on the Coastal Aging Advisory Council. As of this writing, there are eight vacancies to be filled. Of the 21 active Council members, 14 are female, 7 are male, and 14 are minorities. The vast majority of members are retired from a wide variety of professions. Two members are retired educators, four are former local government officials, some work-for-private businesses, and others manage programs in social service or housing organizations.

## Aging Services Advisory Council Members

Bryan	Bulloch	Camden	Chatham	Effingham	Glynn	Liberty	Long	McIntosh	City of Savannah
Vacant	Alice Holloway	Ceola Foreman	Margaret Kramer- Ellison	Lucy Powell	William France	David Anderson	Lillian Simmons	Olive Hillery	Daniel Brantley
Vacant	Vacant	Farran Fullilove	Vacant	Linda Mercer	Zarack Hasbrouck	Henry Frasier	Mary Hamilton	Lorraine Koenn	Estelle Mannion
Vacant	Vacant	Laura Williams	Vacant	Linda Wright	Carrie Lewis	Douglas Harn	Vacant	Eunice Moore	N/A

## Item #3c - AAA Roles and Responsibilities

The AAA roles and responsibilities are outlined in the Older Americans Act of 1965. These responsibilities include both administrative roles and direct service roles. The administrative responsibilities include conducting a needs assessment of the planning and service area in regard to aging services, program development, coordinating a comprehensive network of services, contracting for the provision of services, training and technical assistance and evaluation. The direct service responsibilities include advocacy, outreach, case management, information and referral and access, and volunteer management. The following chart outlines the roles and responsibilities of key staff within the AAA.

Title	Summary of Responsibilities
Aging Services Director	This position is responsible for planning, advocacy, coordination, monitoring and administration of the Area Plan and other resources available to the Area Agency on Aging. The Director maintains day-to-day operations of the agency with oversight for 50+ paid and volunteer staff. Ensures the effective coordination of aging services among a network of providers in the nine-county coastal region.
Aging Services Fiscal Analyst	Responsible for the accurate accounting of program funds and preparing financial reports for funding agencies and boards. Analyzes all financial information to know the status of program budgets and funds. Monitors and evaluates the performance of aging contractors and provides technical assistance as needed. Serves as the DAS Data System Security Administrator, providing access, monitoring and technical assistance to contractors on the use of the data base.
Admin Assistant/ Data Entry Clerk	Responsible for data entry in DDS and provides clerical and administrative support to all members of the Aging Department.
Aging Services Resource Specialist	Responsible for updating and maintaining the resource database according to the prescribed schedule. Keeps Aging Services staff informed of new resources in the region. Assists with compilation of resource guides. Conducts training in the use of the database. Provides outreach and community education as needed.
HCBS Case Manager (1)	Provides information, assistance, and expanded case management services to individuals who may not be appropriate for HCBS service or waitlist admission. The care manager may also broker temporary services using the Direct Purchase of Services (DPS) model. Also provides Care Transitions and Care Consultation interventions.
Access (ADRC) Manager	Responsible for the management and day-to-day operations of the AAA's ADRC Department, including direct oversight of the Options Counseling Program and MDSQ Options Counselor. Also oversees access to services for Caregivers and the Aging and Disabilities Resource Connection (ADRC). Provides oversight of Assistive Technology and Money Follows the Person Programs.
ADRC Counselor (6)	Responds to all inquiries regarding access to aging and disability services in the region. Conducts client assessments and gathers other information required to evaluate individual needs for services. Coordinates with other service providers to ensure effective access to care. Conducts follow-up with consumers to determine outcomes as needed. Provides outreach and community education as needed.

Intake Specialist (2)	The trained intake specialist is the first contact for a customer. The intake specialist does an initial screening and assigns the referral to an ADRC Counselor depending upon the customer's county of origin.
Wellness Manager	Responsible for monitoring contracted nutrition providers for compliance, coordination, and program development for the nine-county region. Provides technical assistance, nutrition education and counseling, conducts health promotion activities, Medication Management activities, health screenings, and outreach which promotes health and wellness for seniors. Also responsible for implementing evidence-based wellness initiatives throughout the regions congregate centers.
Contracts Administrator	Responsible for assisting the Aging Services Director with the oversight of regional human service programs. Other tasks involve working with local partners and service providers to coordinate the delivery of services. Manages contracts and projects as assigned; contributes to the sustainability of the department and its services through developing strategies, supplying relevant implementation documents, and grant preparation and administration. Responsible for monitoring aging service providers for regulatory compliance. Provides technical assistance to providers in program operations. Assists in preparation of provider contracts and budgets.
Case Management Supervisor	Provides oversight and management of all case managers and case management protocols and interventions. Responsible for brokering services using the Direct Purchase of Services (DPS) model. Also provides Care Transitions, RCI REACH, and Care Consultation interventions.
Special Projects/ Aging IT Specialist	Responsible for assisting with the development and implementation of special projects that promote Aging Services and programs. Provides IT assistance to all members of the Aging department.
Community Options Counselor	Responsible for utilizing a person-centered approach in providing options counseling services to individuals wanting to speak with the AAA about living options, service options and community resources. Community Options Counselor shall be supervised by the ADRC Program Manager or by another staff person who is supervised by the ADRC Program Manager. Coastal AAA has 8 staff that are certified Options Counselors.

## Administration, Outreach, and Program Development

The AAA works very closely with the Georgia Department of Human Services Division of Aging Services to administer and provide oversight of all Older American Act funding and programs. The AAA Director is fully responsible for the planning, advocacy, coordination, monitoring, and administration of this Area Plan and resources available to the AAA. Each member of the AAA team plays a vital role in service delivery to individuals in the Coastal Region. Through careful planning and monitoring, the AAA selects qualified direct service providers in the community to deliver OAA programs. The Contracts Administrator also performs

periodic (quarterly and annually) program monitoring of all provider agencies. And the Fiscal Analyst ensures that all budgeted funds are expensed and accounted for appropriately.

## Aging & Disability Resource Connection (ADRC)

In the role of providing information and access, the AAA serves as the regional Aging and Disability Resource Connection (ADRC). The goal of the service is to empower individuals to make informed choices and to streamline access to long term support including a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. The vision is for the ADRC to serve as a highly visible and trusted place where people can turn for information on the full range of long term support options. The ADRC also serves as a single point of entry for both public and private-pay individuals to public long term support programs and benefits. The ADRC serves older adults, younger adults with disabilities and chronic conditions, family caregivers, as well as persons planning for future long term support needs. In addition, the ADRC is a resource for health and long term support professionals who provide services to the older adults and to people with disabilities.

The ADRC is supported by a strong technology-based infrastructure and a team-based approach for operations management. Trained professionals from multiple functional disciplines provide education, information, assessment, and customized referrals and connections to both private-pay and publicly-supported care options.

An Advisory Committee meeting at least three times each year provides input, feedback, connection to resources as well as provides outreach for the ADRC. The advisory committee consists of key stakeholders and is co-lead by our partner, Department of Behavioral Health and Development Disabilities (DBHDD). Our partner also is involved in program planning, outreach and decisions regarding the ADRC. In addition to assisting the AAA in the development of a comprehensive area plan, the advisory committee routinely receives reports on service gaps, customer satisfaction, call data and service requests and uses this data to drive their recommendations and input to the Coastal AAA leadership team.

Once a request for information or services is received; a trained intake specialist is the first contact for a customer. The intake specialist provides general information and assigns the referral to an ADRC Counselor if services are requested. In some cases, when customers request services, the Determination of Needs Revised (DON-R) assessment tool is completed in order to assess the person's levels of impairment and unmet needs. If the DON-R indicates a level of unmet need, and services are available, referrals are made for services. In counties with a waiting list for services, a triage process is utilized to prioritize or determine which customers will be served and in what order. Individuals placed on waiting lists may be screened periodically.

Community Transitions (formerly Money Follows the Person Program) and Nursing Home Transitions are integral services within the ADRC. These programs are designed to help individuals who are in nursing or intermediate care homes, return to the

community. These programs serve people with developmental or physical disabilities as well as those who are aging, and wish to transition back into the community. These programs can provide assistance such as security and utility deposits, furnishings and basic household items, moving costs, environmental modifications to make a home or apartment accessible, connection with peer supporters and other community resources, and other additional services. Each resident wishing to leave the institutional setting is assigned a Transition Coordinator (TC) who provides guidance through the transition process. (All individuals under the age of 65 are referred to the local Center for Independent Living for services.) Each resident must be screened to determine the level of support needed for a successful transition into the community. Monthly contact is maintained for a period of one year (365 days) in order to offer additional support as needed.

Options counseling, using a person-centered approach, offers individuals, families and caregivers information about community living services and supports. Options counseling explores public and private pay options with the consumer based on individual's identified needs, values and preferences. Options counseling is completed by the MDSQ Options Counselor (OC) who goes to the nursing home or intermediate home to complete face to face assessments with consumers. It is the role of the OC to help the individual to consider the pros and cons of his/her various service options in assisting the individual in making an informed decision. Long-term follow-up is a component of Options counseling that allows the OC to offer continued support and resources to the consumer following the face to face assessment. Options counseling is also provided through the ADRC to callers identified as needing assistance in exploring options related to long term supports and services. This counseling is provided by the Community Options Counselor to individuals not residing in a residential facility/ nursing home.

ADRC staff receive annual and ongoing trainings on topics such as Options Counseling, motivational interviewing, HIPAA, and many other topics to enhance services offered. In addition, ADRC staff are AIRS certified, and several have earned a Certificate in Gerontology from Boston University School of Social Work.

The ADRC is responsible for outreach in the community to increase the general public's awareness of the ADRC and services offered. To achieve this, ADRC staff participate in community fairs throughout the nine counties on a monthly basis. To supplement these efforts, staff also provides trainings/presentations to discharge planners, social work departments and similar groups to promote the ADRC.

The ADRC partners with GeorgiaTech, Tools 4 Life, Friends of Disabled Adults and Children (FODAC) and Living Independence for Everyone (LIFE) Center for Independent Living to enhance the interactive Assistive Technology Lab. Assistive Technology (AT) is an item or piece of equipment that is used to increase, maintain or improve the functional capabilities of individuals with disabilities in all aspects of life. AT ranges on a continuum from low tech to high tech. The AT lab is housed at the AAA in cooperation with GeorgiaTech. The lab is set up like a studio apartment; giving individuals the opportunity to actually put their hands on items designed to make everyday life more manageable or leisure time more fun. Items in the lab include those that assist people with mobility issues, dementia care, vision loss, communication problems, hearing loss and much more. ADRC Counselors encourage consumers to consider AT as optional resources. The AT lab is open weekly for demonstrations and training. Coastal AAA contracts with the LIFE to provide one-on-one consultations one day a week in the assistive technology lab.

#### Other Roles of the AAA

Coastal AAA is active in the communities we serve and strives to participate in activities and collaborations that keep us relevant at the local, state and national levels. The AAA works with other departments within the Regional Commission to always consider aging issues for integration in the regional planning process. For example in economic development activities, resources for older adults, caregivers and those with disabilities in our communities can be discussed with potential employers as a way to showcase what will be available to their future employees. In addition, attracting retirees to the area should be considered as part of the economic development strategy. For regional planning, the AAA plays a vital role in the link between planning and developing livable communities. Similarly, when assisting local governments with grant applications, the AAA assists by reviewing any grants pertaining to building senior centers, adult day care centers, assisted living facilities and similar projects. It is the AAA/ADRC's broad knowledge of the unmet needs and service requests of our target populations that make us a lead and key player in the development of a comprehensive service system.

The AAA is using the call data collected through our ADRC on a regular basis to guide our decision making and service planning for Coastal seniors, individuals with disabilities, family caregivers and service provider agencies. Call data is shared with our ARDC Advisory Council members that provide valuable input and evaluation of the ARDC's referral process and ability to serve our target populations and partner service agencies. During the screening process ADRC Counselors look for opportunities to match client care needs with assistive technology and nontraditional services, programs and resources. Community Options Counselors meet with clients and families in community settings in an effort to overcome barriers to services and to increase access to care.

The AAA participates in many committees and advisory groups within the region including groups such as Healthy Glynn, Family Connections, healthcare alliances/associations, federally qualified health centers, and faith-based organizations. AAA staff also actively participates on statewide boards and committees and are involved in projects through these groups. The organizations we work with promote the enhancement of the aging services network in our region and throughout the state and nation.

## Working Relationships with Community Organizations

To be successful, the AAA develops and maintains a variety of connections to a large array of community organizations. Many of our partnerships with agencies such as Adult Protective Services, Mental Health, public health and others are forged through participating on one of our many advisory groups. The AAA currently oversees or supports an advisory committee for the ADRC,

Wellness, Coastal Georgia Caregiver Network (CARE-Net) as well as our Aging Advisory Council. These groups all have charters or purposes for existing and have attendees that are appropriate.

Advocacy for persons with disabilities is supported by participating in the Mayor's Committee on Services for the Disabled (Brunswick). We are active with our various Family Connection programs, attending meetings and providing education about our programs and services. We attend our local mental health collaboratives hosted by our community service boards and partner with our local health departments and federally qualified health centers.

The AAA views the older worker as a great source for our community because of the wisdom, skill, and work ethic they possess. Because of this value, the AAA provides training placement for older workers enrolled in the Senior Community Service Employment Program (SCSEP). In addition, the AAA has provided space and oversight for VISTA volunteers working on projects to help reduce poverty and increase volunteerism.

Coastal AAA is committed to developing and fostering partnerships that help our agency fulfill our service goals and support the Division of Aging Services in strengthening our aging services network and service delivery system. To that end, Coastal AAA has focused our community partnership efforts towards building stronger and engaging collaborations with community service boards, mental health service providers, hospital systems, and managed care organizations as we work towards operating an agency that is business ready and sustainable in a competitive human service market. Further we are engaging in business planning, marketing and leadership activities that better prepare us for competing with non-profit as well as for-profit service providers.

## Item #3d - AAA's Vision, Mission and Values

The Area Agency on Aging reviews the mission, vision and value statements for the agency periodically and involves all levels of employees in this process. The process allows employees to share their input on the vision of the AAA in order to update it and make it resonate with the customers we serve. Management uses staff input to update the AAA's mission, vision, and value statements. Our current mission, vision and values are relevant to the AAA responsibilities listed in the Older Americans Act (OAA) and mandated by DAS, as are our priorities.

**Our Vision:** All seniors, persons with disabilities, and family caregivers residing in Coastal Georgia will have access to information and services that promote physical health, mental well-being and options for living that ensure personal dignity and individual choice.

**Our Mission:** The mission of Georgia Area Agency on Aging is to foster the development of a comprehensive, coordinated system of services which promotes the independence and well-being of coastal area older adults and those with disabilities, and to provide these individuals and their caregivers with information and access to needed services.

Our agency policy and procedures include sound ethical standards and an antifraud policy. Employees are required to complete a Code of Conduct Questionnaire annually and all staff demonstrates conduct consistent with agency ethics and values.

## Item #3e - Purpose of Area Plan

Under the Older Americans Act of 1965 as amended, the AAA is responsible for developing a regional plan for aging services to meet the needs of older adults, caregivers and those with disabilities. The purpose of the area plan is to provide a comprehensive and coordinated system of supportive services, nutrition services and senior centers, and the process used to determine the need for supportive services, nutrition services and senior centers within the planning & service area administered by the area agency. The plan describes how the area agency will implement, directly or through contractual or other arrangements, programs and services to meet identified needs within the region in accordance with the plan. Planning efforts and service delivery address the needs of older individuals with greatest economic need and older individuals with greatest social need, including low-income minority individuals, and individuals with limited English. In addition, through the development and implementation of the area plan, other agencies and organizations in the Coastal region can identify shared interests and work cooperatively to meet the needs of Coastal Region's older adults, caregivers and those with disabilities.

## Items #4 - Regional Context

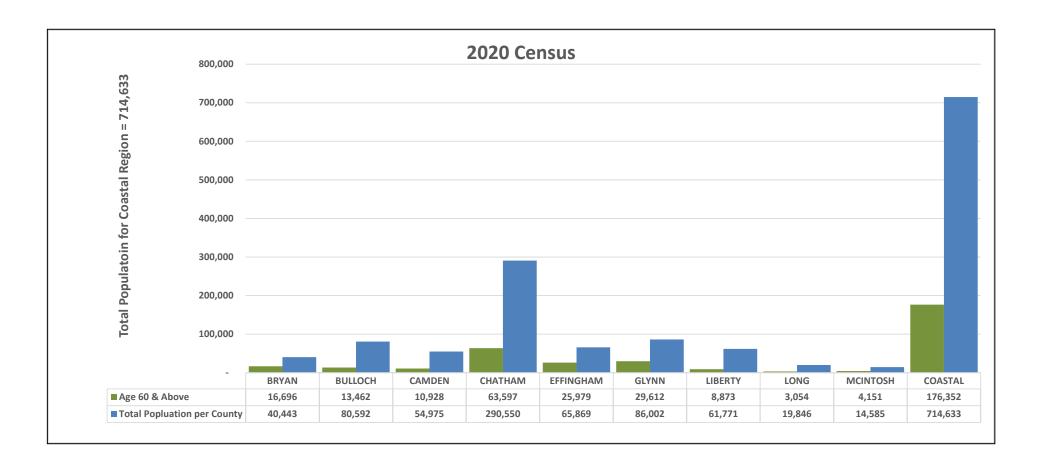
### Item #4a - Current and Future Older Persons

The future needs of Coastal Georgia's elderly population will largely be driven by the rapid population changes that will occur over the next 30 years. The rising numbers of Baby Boomers reaching retirement age along with the growing in-migration to Georgia's coastal areas is expected to significantly impact services to seniors. In order to meet this paramount need, the Area Agency on Aging (AAA) remains committed to building lasting partnerships with organizations, private businesses, and local governments to ensure that our most frail and economically disadvantaged elders receive the care and services necessary to sustain healthy, independent, and dignified lives.

Population trends were analyzed using the US 2020 Census data, and the State of Georgia Governor's Office of Planning and Budget (OPB) Georgia Residential Population Projections by County: 2020 – 2065. These documents provided valuable insight for planning for the increasing senior population of the Coastal region.

### Growth in the Senior Population

The following graph reflects data taken from the 2020 Census and Georgia Governor's OPB. The total senior population for Coastal Georgia has reached 176,352. While the number of seniors age 60 and over are projected to increase in every county each year, there will be a shift in where they reside. It is projected that by the year 2040, Chatham County will be home to 38% of the seniors in the region, a drop of almost 8% from 2010. Over the same period, Bryan, Camden, and Effingham Counties will increase significantly in their percentage of Coastal elders. The remaining counties will see little change over the next 25 years.



The charts below show the *projected growth* of the Coastal region compared to the state of Georgia, according the Governor's Office of Planning & Budget through the year 2065.

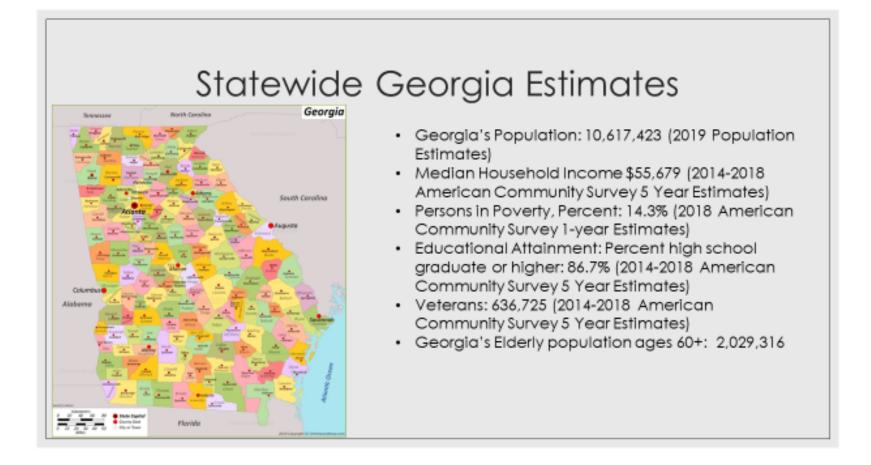
	Census 2020	2025	2030	2040	2050	2060	2065	% growth 2020 to 2025	% growth 2020 to 2065
Georgia	10,707,203	11,335,283	11,979,787	13,006,562	13,944,564	14,933,998	15,425,346	5.9%	28.3%
Bryan	40,443	44,962	51,025	61,808	73,657	85,920	91,573	11.2%	52.9%
Bulloch	80,592	87,076	93,233	105,549	118,064	132,128	140,013	8.0%	39.0%
Camden	54,975	57,255	59,056	62,037	64,216	66,311	67,506	4.1%	17.1%
Chatham	290,550	303,392	315,524	335,211	350,796	366,403	373,753	4.4%	20.7%
Effingham	65,869	74,425	85,054	103,498	123,250	144,621	155,084	13.0%	54.5%
Glynn	86,002	90,306	96,110	98,151	102,445	105,468	104,510	5.0%	18.5%
Liberty	61,771	62,501	62,286	61,727	61,485	61,018	60,932	1.2%	-1.2%
Long	19,846	21,606	23,327	26,607	28,956	31,228	32,503	8.9%	36.4%
McIntosh	14,585	15,808	17,234	17,361	18,097	19,231	19,710	8.4%	24.2%
Coastal	714,633	757,331	802,849	871,949	940,966	1,012,328	1,045,584	6.0%	29.4%
Region % of Total pop	6.67%	6.68%	6.70%	6.70%	6.75%	6.78%	6.78%		

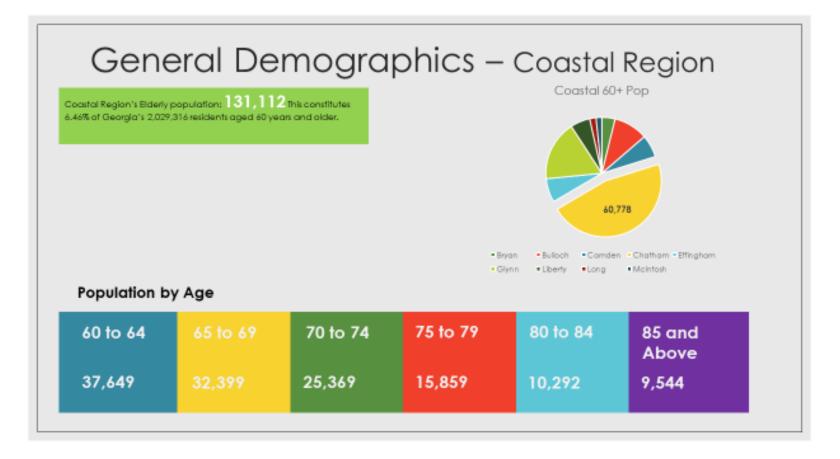
#### Coastal Georgia TOTAL Population Projections

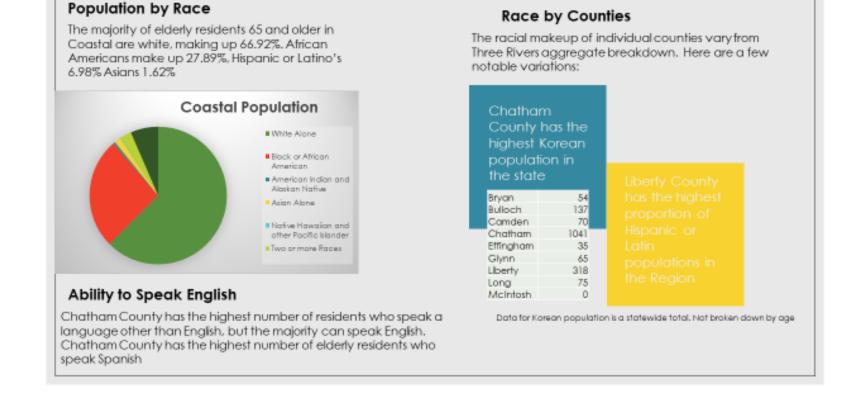
Coastal out Pop	Census 2020	2025	2030	2040	2050	2060	2065	% growth 2020 to 2025	% growth 2020 to 2065
Georgia 60+	2,395,283	2,740,632	3,091,353	3,621,980	3,889,388	4,152,458	15,738,636	14.4%	42.3%
Bryan	16,696	16,086	16,633	19,810	20,320	20,848	89,545	-3.7%	19.9%
Bulloch	13,462	16,647	19,561	23,462	27,037	31,628	100,169	23.7%	57.4%
Camden	10,928	12,411	13,202	13,788	14,556	16,121	64,885	13.6%	32.2%
Chatham	63,597	72,165	78,753	84,893	91,093	99,396	390,501	13.5%	36.0%
Effingham	25,979	25,148	26,700	33,498	33,201	33,496	144,526	-3.2%	22.4%
Glynn	29,612	28,512	29,341	32,510	32,272	32,672	152,247	-3.7%	9.4%
Liberty	8,873	10,090	10,901	12,443	15,350	17,661	57,657	13.7%	49.8%
Long	3,054	4,045	4,987	6,362	7,518	8,435	25,966	32.4%	63.8%
McIntosh	4,151	4,068	4,493	5,825	5,406	5,334	23,943	-2.0%	22.2%
Coastal	176,352	189,172	204,571	232,591	246,753	265,591	1,049,439	7.3%	33.6%
Region % of 60+ pop	7.36%	6.90%	6.62%	6.42%	6.34%	6.40%	6.67%		

#### Coastal 60+ Population Projections

The charts below uses data from the 2014-2018 American Community Survey. It outlines the general demographics of the Coastal Region.







## Item #4b - Needs Assessment Process and Results for All Methods Utilized

Historically, Coastal AAA has contracted with a marketing and research firm to conduct formal Needs Assessments, in preparation of each 4-year area plan cycle. The firm worked with the AAA to finalize questions which resulted in a 15-20 minute phone conversation. The study was conducted via random digit telephone interviewing during the months of May/June. The purpose of the study was to: (a) catalogue the needs of individuals aged 55+ in ten counties within the CRC service area, and (b) conduct a "demographic trends analysis to document the numbers of 55+ year olds in the service area who will need specific services in

the future. The study examined physical and mental health needs, personal and home related needs, nutritional and dietary needs, social and recreational needs and financial needs and self-sufficiency.

For this current plan cycle, the AAA did not engage in a formal Needs Assessment, but instead re-visited the results of the three previous studies and resolved that the overriding recommendations year over year remained the same and are still relevant moving into this plan year. Formal studies were conducted in 2005, 2010, and 2015. Results were reflective of the needs of all people 55 and older rather than only the needs of elders who are already accessing community resources through various agencies, organizations, churches and local government.

Overriding recommendations from the formal Needs Assessments include:

- Document area's aggregate capabilities to serve those who need services
- Identify gaps between capability to serve and needs
- Prioritize funding/resources needed
- Publicize agency's efforts

Each year, Coastal AAA also conducts public hearings throughout the region to help evaluate the needs of clients and regional constituents. This year, four public hearings were held in various cities within the region (Savannah, Richmond Hill, Statesboro, and Darien). Attendees at public hearings included, citizens (of all ages), service providers, and elected officials. Attendees were given the opportunity to respond to several questions regarding services in the community. The table below captures a few of the questions and the corresponding responses from attendees.

Questions	Compilation of Responses
<ol> <li>What are the three (3) most important service areas needed by older adults (people over 60) in your community?</li> </ol>	Answers are generally the same for those over 60, people with disabilities, and caregivers; home delivered meals, in-home health care services, assistive technology, including transportation along with communicating the availability of transportation services.

2. What are three (3) most important service areas most needed by people with physical or developmental disabilities in your community?	Help navigating services, affordable housing, supportive services (calling tree) to check on clients
3. What additional or new services are most needed to help older adults and adults with disabilities to remain in their homes and communities as long as possible?	More affordable housing for seniors, better transportation, home delivered meals, home repairs

Public hearing dates and times were printed in local newspapers throughout the coastal region as public service announcements. See a public service announcement example below.

#### PUBLIC SERVICE ANNOUNCEMENT

For Release: October 19, 2021

#### NOTIFICATION OF VIRTUAL PUBLIC MEETING

The Coastal Regional Commission (CRC) Area Agency on Aging (AAA) will conduct a virtual public meeting to provide an overview of Older Americans Act programs and services, and to seek input from the public on the development of the FY2022 – FY2023 Area Plan for senior citizen services.

Under contract with the Georgia Department of Human Services (DHS), Division of Aging Services (DAS), the AAA provides home and community-based services to seniors, those with disabilities, and their caregivers. These services include congregate, and home delivered meals, information and assistance, Case Management, Community Options counseling, access to public services, advocacy and legal assistance, in-home services, and respite care. The AAA serves Bryan, Bulloch, Camden, Chatham, Effingham, Glynn, Liberty, Long and McIntosh Counties. The public is invited to join the virtual meeting by video conference via your computer, iPad, notebook, or mobile device using the following information:

Thursday, December 9, 2021, at 10:00AM

Join Microsoft Teams Link available at https://www.coastalrc.ga.gov/aging

This is a virtual meeting and is open to the public. For more information, contact Algertha Taylor at (912)437-0844 or ataylor@crc.ga.gov.

## **PUBLIC HEARING VIRTUAL PUBLIC MEETING December 9, 2021 10am - 12pm**

JOIN MEETING VIA PHONE Dial (404)796-9265 or (Toll-free) (833) 215-3184 Phone Conference ID: 402 043 10#

JOIN MEETING VIA VIDEO CONFERENCE https://www.coastalrc.ga.gov/aging



- Don't be left out of this very important dialog!
- Share in the conversation about programs and services for older adults, individuals with disabilities and family caregivers in your community.
- We want to hear from you!
- Attend a public hearing to learn how the Area Agency on Aging is planning for your service needs as you age.
- This is a virtual meeting and is open to the public. For more information, please call (800)580-6860.



## Item #4c - Gap/Barriers/Needs to Improve Existing System

Based on the 2015 Elder Needs Assessment and Demographic Trends Analysis, information gathered at public hearings, feedback gathered from client surveys, input from the Coastal Advisory Council and contracted providers, analysis of client records, call data and upon review of monthly AAA waiting list reports, there remain several serious gaps and barriers within the existing service system which prevent the AAA from achieving its vision for all seniors, those with disabilities, and caregivers of the region. In general, service gaps can be attributable to funding limitations, lack of available transportation, lack of resources, services and programs that met the needs of diverse families and older adults, and the need for increased education with outreach to access needed services.

As the demographic data indicated, the growth in the senior population will reach unprecedented proportions between now and the year 2035. The rising numbers of elderly coupled with the skyrocketing costs of healthcare in the U.S. significantly impacts the number of seniors on waiting lists for publicly funded home and community-based services. Coastal AAA has responded to this anticipated population growth and increased client need by pursuing grant dollars and forging new partnerships that help leverage limited local and state dollars and community resources to serve more clients and offer effective programs. As of February 2022, 320 older adults and family caregivers are waiting for services in the Coastal region (duplicated count), a significant decrease from those waiting for services as of January 2020 (501). However, this decrease is not indicative of being able to serve more people by providing them with HCBS services. Rather, it is a result of a more strategic approach to management of the waitlist and the triage process mandated by the Division of Aging Services. It should also be noted that additional emergency funding to aid with COVID1-19 relief has significantly reduced waiting lists. Working with the DAS, Coastal AAA has developed processes to prioritize which clients receive services. Based on this prioritization, if it is anticipated that a client may spend more than one year on the waitlist, other options are provided, and a waitlist placement is not made. More than ever, clients are recognizing CCSP as a more viable option than waiting on the ever-growing waiting list for Home and Community Based Services, despite cost shares and estate recovery associated with CCSP.

In the Demographic Trends Analysis conducted by Kerr & Downs (2015), more than a third of the Coastal residents (35%) indicated that it was difficult to find others to perform essential errands to secure food, medical assistance, etc. Transportation to medical appointments, church, pharmacy, grocery store, and other shopping areas remains an unmet need for most seniors and those with disabilities in this largely rural region. The vast majority of seniors and other consumers rely on family and friends to get them where they need to go. For many, there are few or no alternatives, and isolation can become problematic. At each public hearing and group gathering held this year, transportation was consistently the number one service requested by seniors.

Coastal AAA continues to work with DHS Coordinated Transportation on strategies to better serve seniors and provide Quality of Life (QoL) trips to individuals not already connected to the senior center. These QoL trips my include transport of patients to

dialysis or other medical appointments. While DHS Coordinated Transportation, through Coastal Regional Coaches, has added a much-needed option for transportation throughout most of the region, the program has limitations and restrictions that lessen its impact on the need for transportation services to older adults. Coastal AAA continues to be an active member of the Region 12 RTCC, a collaborative of rural transportation service providers working to enhance transportation services in the Coastal region. The group meets quarterly and is committed to expanding transportation services. To further address the growing transportation disparity, Coastal AAA implemented a QOL project in Glynn County providing fixed-route transportation to and from Wal-Mart Super Center from a senior-housing development. The voucher transportation program will provide seniors transportation twice a month to a grocery outlet that includes home goods, pharmacy and vision (optometrist) services. The pilot transportation project provided Coastal AAA valuable insight into the transportation needs of older adults and their patterns for utilization of transportation services. As a result of this project, Coastal AAA continues to provide QOL life trips for at least one senior community in Glynn County and is continuing to explore other viable options for increasing QOL trips.

In the Demographic Trends Analysis conducted by Kerr & Downs (2015), significant healthcare needs among seniors in the region were identified. More than half of older adults (54%) in the Coastal Georgia region suffered from diabetes, hypertension, cancer, arthritis, or some other on-going condition. Further, many of these older adults have difficulty accessing what they need to maintain their physical and mental health. Lack of money is noted as the key obstacle that keeps people in the Coastal Georgia region from accessing what they need to maintain their health. More than 1 in seven (14%) of Coastal seniors indicated they could not afford health insurance or medical prescriptions. This data suggest that significant numbers of Coastal seniors are at risk for increased chronic conditions and symptoms of mental illness due to gaps in healthcare.

## Item #4d - Special Needs

Coastal AAA is increasingly working with more family members who are caring for loved ones with Special Needs. Many are under the age of 60 and are among the most vulnerable in the community. Outreach is done through professional organizations, health fairs, education seminars, mail outs, senior centers and the communities at large, in an effort to reach those in need of assistance to help them remain in their homes.

The ADRC provides information and assistance, referrals and resources to persons who request information about availability of services. Every effort is made to reach those living in rural areas to educate them about opportunities which might be available to them. Most recently, the ADRC, through its AT lab initiative, provide tours and in-service workshops for educators of Special Needs children in the local school system.

Coastal AAA works closely with organizations that target minorities, individuals with low income and Limited English Proficiency, as well as persons at risk for institutional placement. Partnerships with local county health departments, clinics, hospitals, Departments of Family and Children Services, Adult Protective Services, Georgia Legal Services, Su Casa and other community social service agencies help us reach the most vulnerable citizens in the Coastal region.

The information systems used by our agency to house client data captures income levels, impairments, unmet needs, limited English proficiency, race and ethnicity. All this data is available to the ADRC staff when making referrals for service. This allows us to identify, prioritize and serve those with the greatest needs. The ADRC staff has been trained to assist LEP/SI persons both face to face and by telephone. Program information is printed in both Spanish and English.

## Item #5 – Descriptions of Services Delivery System

<u>Item #5a(1)</u> - Older Americans Act Programs and Services Funded through the "GA Department of Human Services Division of Aging Services Multi-Funded Services Contract". Include any Relationships and/or Agreements that Provides Clients Access to Services. (Include all relationships and/or agreements that provide clients access to services.)

	Item #5a(1) - Older Americans Act Programs and Services Table						
	Service	Service Description	Is the Service <u>Contracted Out</u> or does the AAA Provide <u>Directly</u> ?				
1.	Material Aid - Assistive Technology	Any item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to increase, maintain, or improve functional capabilities of individuals. Items can range from low tech to high tech and include eye glasses, dental care, and hearing aids.	Both				
2.	Care Consultation	An evidence-based information and coaching service delivered by telephone which empowers people to understand options, manage care, and make decisions more effectively. Participants must complete periodic contacts based on program guidelines	AAA provides directly				

(Add lines to the table below as necessary.)

	Item #5a(1) - Older Americans Act Programs and Services Table					
	Service	Service Description	Is the Service <u>Contracted Out</u> or does the AAA Provide <u>Directly</u> ?			
3.	Health Promotion & Disease Prevention	"The provision of evidence-based program activities promoting wellness, nutrition, and physical activity, disease prevention and risk management, healthy lifestyle and safety in a group setting.	Contracted out			
		Staff activities will include: Disease Management Medications Management Physical Activity Health Promotion Health Indicators, Outcomes, Evaluation Health Literacy Preventative Action Self-Care/Self-Management"				
4.	ADRC Information and Assistance	A service that: (A) provides individuals with information on services available within the communities; (B) links individuals to the services and opportunities that are available within the communities; (C) to the maximum extent practicable, establishes adequate follow-up procedures. Internet web site "hits" are to be counted only if the information is requested and supplied. The ultimate goal of the ADRCs is to serve all individuals with long-term care needs regardless of their age or disability by providing easier access to public and private resources.	AAA provides directly			
5.	Congregate Meals	A meal provided to a qualified individual in a congregate or group setting. The meal as offered meets all of the requirements of the Older Americans Act and State/Local laws. Used only for services provided during disaster relief.	Contracted Out			
6.	Home Delivered Meals	A meal provided to a qualified individual in his/her place of residence. The meal is served in a program administered by SUAs and/or AAAs and meets all of the requirements of the Older Americans Act and State/Local laws. May include assistive technology required for dining.	Contracted Out			
7.	Adult Day Care - Mobile	Personal assistance for dependent elders in a supervised, protective, and congregate setting during some portion of a day. Services offered in conjunction with adult day care typically include social and recreational activities, training, and counseling. Mobile Adult Day Care are services provided by staff who travel from a central location to an off-site location(s), primarily, but not limited to, rural areas.	Contracted Out			
8.	Homemaker	Assistance such as preparing meals, shopping for personal items, managing money, using the telephone or doing light housework.	Contracted Out			

		Item #5a(1) - Older Americans Act Programs and Services Table	
	Service	Service Description	Is the Service <u>Contracted Out</u> or does the AAA Provide <u>Directly</u> ?
9.	Personal Care	Providing personal assistance, stand-by assistance, supervision, or cures for individuals having difficulties with basic activities of daily living such as bathing, grooming, dressing, eating. Personal assistance, stand-by assistance, supervision or cues.	Contracted Out
10.	Respite Care - In-home	Services that offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers. Respite includes: In-Home Respite (personal care, homemaker, and other in-home respite)	Contracted Out
11.	Elderly Legal Assistance	Legal advice, counseling and representation by an attorney or other person acting under the supervision of an attorney.	Contracted Out
12.	MFP - Transition Coordination	Transition Coordination is the assistance of eligible Money Follows the Person (MFP) participants, through HCBS services, to transition from an institutional setting (i.e. Skilled Nursing Facility, Hospital) back into the community. Transition Coordinators leverage MFP services, community-based services, and expanded circles of support to achieve transition from these institutions based on an Individualized Transition Plan (ITP) and maintains MFP Support for one year after day of transition.	Contracted Out
13.	Support Options Coordination	Providing skills training and support to consumers in meeting their responsibilities as participants in the consumer-directed model of services, including training, coaching, and providing technical assistance to consumers to assist them in using their budgets correctly and avoiding overspending.	AAA Provides Directly
14.	Case Management	Short-term assistance on behalf of an older person or caregiver who is experiencing immediate risk to health and safety, is at high risk of institutional placement, or has complex needs across multiple domains of care. Activities of case management include such practices as comprehensive assessment, often across multiple domains; and developing and monitoring short-term care plans. Case Management can be provided to older adults, persons with disabilities, caregivers, or relative caregivers raising children.	AAA Provides Directly
15.	Adult Day Care	Personal assistance for dependent elders in a supervised, protective, and congregate setting during some portion of a day. Services offered in conjunction with adult day care typically include social and recreational activities, training, and counseling.	Contracted Out
16.	Nursing Home Transitions	Transition Coordination is the assistance of eligible participants (non-MFP), through HCBS services, to transition from an institutional setting (i.e. Skilled Nursing Facility, Hospital) back into the community. Transition Coordinators leverage NHT Transition Services, community-based services, and expanded circles of support to achieve	Contracted Out

	Service	Service Description	Is the Service <u>Contracted Out</u> or does the AAA Provide <u>Directly</u> ?
		transition from these institutions based on a prescribed Care Plan and maintains support for 365 days after day of transition.	
17.	Falls Prevention - A Matter of Balance	Developed by researchers in Maine, this is an 8 week evidence based program designed to address the fear individuals have of falling. It combines education about falls prevention as well as an introduction to physical activities that can help improve balance and stability. A completer is a participant who attends at least five of the eight sessions.	AAA Provides Directly
18.	Powerful Tools for Caregivers	Powerful Tools for Caregivers is an evidence based six week education program designed to provide family caregivers with tools necessary to increase their self care and confidence. The program improves self-care behaviors, management of emotions, self-efficacy, and use of community resources. Completers are participants who attend 2/3 of the sessions (4 of 6 sessions).	AAA Provides Directly
19.	CDSME – CDSMP	A Stanford University (SMRC) evidence-based, train the trainer program held for two an a half hours, once a week, for six consecutive weeks. Workshops and Lay Leader Trainings are facilitated by either non-health care professionals or health care professionals able to adhere to the fidelity of the program, and giving preference to individuals with chronic conditions themselves. The objective is to empower workshop participants to problem solve, and set weekly goals to improve skills needed to manage symptoms experienced by participants with chronic conditions as well as caregivers of persons with chronic conditions. Curriculum includes: medications management, developing goals around establishing/enhancing exercise programs, healthier nutrition habits, and other personal weekly action items, learning better communication techniques, managing of pain and fatigue, working with healthcare professionals and the healthcare system, and much more.	AAA Provides Directly

## Item #5a(2) Services Delivered Directly by the Area Agency on Aging

The Older Americans Act, as amended, requires that for an Area Agency on Aging to deliver a service directly, the service shall comply with one of three exceptions to the requirement that they not deliver such services (42 U.S.C. §3027 (a)(8)(A)) except under one of three circumstances: *Provide the following information for each service delivered by AAA staff other than Case Management or Information and Assistance.* 

Insert Attachment #5a(2) in its entirety into the AAA's Area Plan Document. For each service identified in the <u>ltem</u> <u>#5a(1) - Older Americans Act Programs and Services Table</u> above as being "provided directly by the AAA" (other than Case Management or Information and Assistance, complete a Service Table below. Add and/or delete tables as needed.

If no services are provided directly by the AAA staff other than Case Management or Information and Assistance, indicate <u>"the AAA does not provide any other services directly</u>" on this page below. Do not delete Item #5a(2) from the AAA's Area Plan Update document.

	Item #5a(2) – Services Delivered Directly by the Area Agency on Aging Service Table #1	
Name and I	Description of Service Provided/Received:	
	Material Aid - Assistive Technology	
Date First F	Provided by AAA Staff: Prior to the SFY2021-2024 Area Plan Cycle	
Date Last C	Competitively Bid: Proposed timeline tentatively Fall of 2023	
Budgeted F	Funds (Annual): \$50,000 Staff F.T.E. funded: 0.25	
Clients Ser	ved (Annual): 106	
Units Provi	ded (Annual): Coastal's Unit Cost is \$1 per unit, 50,000 units annually	
	X Client Definition same as OAA Other Click or tap here to enter text.	
Justificatio	n (AAA must maintain documentation to support):	
X De	livery by the AAA is necessary to assure an adequate supply of the service in the PSA	
	No other provider available to provide or AAA has access to materials unavailable to other providers	
□ Se	ervice is directly related to the AAA's administrative function	
	Is delivered as part of the Area Plan administration, including staffing	
□ Se	ervice is provided more economically and with comparative quality to other providers	
	ternal controls in place to prevent: a. X Conflicts of Interest b. X Preferential delivery to any client/group	

	Item #5a(2) – Services Delivered Directly by the Area Agency on Aging Service Table #2
Name and Descr	iption of Service Provided/Received:
Fa	Is Prevention -A Matter of Balance
Date First Provid	led by AAA Staff: Prior to the SFY2021-2024 Area Plan Cycle
	etitively Bid: Proposed timeline tentatively Fall of 2023
	(Annual): \$3,361 Staff F.T.E. funded: 0.05
Clients Served (A	Annual): 6
Units Provided (	Annual): 2
Х	Client Definition same as OAA Other Click or tap here to enter text.
Justification (AA	A must maintain documentation to support):
X Delivery	by the AAA is necessary to assure an adequate supply of the service in the PSA
No	other provider available to provide or AAA has access to materials unavailable to other providers
Service	is directly related to the AAA's administrative function
	delivered as part of the Area Plan administration, including staffing
	is provided more economically and with comparative quality to other providers
	I controls in place to prevent: a. X Conflicts of Interest b. X Preferential delivery to any client/group

	<u>Item #5a(2) – Services Delivered Directly by the Area Agency on Aging</u> Service Table #3
	scription of Service Provided/Received:
	CDSME - CDSMP
	vided by AAA Staff: Prior to the SFY2021-2024 Area Plan Cycle
	npetitively Bid: Proposed timeline tentatively Fall of 2023
Budgeted Fur	ids (Annual): \$6,723 Staff F.T.E. funded: .0.10
<b>Clients Serve</b>	d (Annual): 0
<b>Units Provide</b>	d (Annual): 0 not provided during this plan cycle to date due to pandemic. Workshops scheduled for FY2023
	X Client Definition same as OAA Other Click or tap here to enter text.
	AAA must maintain documentation to support):
	ery by the AAA is necessary to assure an adequate supply of the service in the PSA
	No other provider available to provide or AAA has access to materials unavailable to other providers
	ice is directly related to the AAA's administrative function
	Is delivered as part of the Area Plan administration, including staffing
	ice is provided more economically and with comparative quality to other providers
AAA has inter	nal controls in place to prevent: a. X Conflicts of Interest b. X Preferential delivery to any client/group

Item #5a(2) – Services Delivered Directly by the Area Agency on Aging Service Table #4				
Name and Description of Service Provided/Received:				
Powerful Tools for Caregivers				
Date First Provided by AAA Staff: Prior to the SFY2021-2024 Area Plan Cycle				
Date Last Competitively Bid: Proposed timeline tentatively Fall of 2023				
Budgeted Funds (Annual): \$6,723 Staff F.T.E. funded: 0.10				
Clients Served (Annual): 25				
Jnits Provided (Annual): 3				
X Client Definition same as OAA Other Click or tap here to enter text.				
Justification (AAA must maintain documentation to support):				
X Delivery by the AAA is necessary to assure an adequate supply of the service in the PSA				
No other provider available to provide or AAA has access to materials unavailable to other providers				
□ Service is directly related to the AAA's administrative function				
Is delivered as part of the Area Plan administration, including staffing				
□ Service is provided more economically and with comparative quality to other providers				
AAA has internal controls in place to prevent: a. X Conflicts of Interest b. X Preferential delivery to any client/group				

#### <u>ltem #5a(3)</u>

#### Case Management Services

The Older Americans Act, as amended, specifies how Case Management Services may be delivered and allows Area Agencies on Aging to provide directly such services.

Insert Attachment #5a(3) in its entirety into the AAA's Area Plan Document.

For each Case Management Service offered in your planning and service area, complete the requested information in a table below.

Add and/or delete tables as needed.

<u>Item #5a(3) – Case Management Services</u> Service Table #1	
me and Description of Service Provided:	
HCBS Case Management	
te First Provided by a. X AAA Staff, Prior to the SFY2021-2024 Area Plan Cycle	
te Last Competitively Bid: Service has not been put out for bid	
dgeted Funds (Annual): \$162,211.60 Staff F.T.E. funded: 2	
ents Served (Annual): 316	
its Provided (Annual): 6,589	
X Client Definition same as OAA Other Click or tap here to enter text.	
se Management Staff Receive Specialized Training: X Yes □No % of staff trained 100%	
se Management Services:	
Do Not Duplicate services provided through other Federal and State Programs: X Yes ⊡No	
Provides clients a list of similar services available within the jurisdiction of the AAA: X Yes □No	
Provides clients a statement specifying their right to make an independent choice: X Yes DNo	
Documents each client's receipt of the statement concerning independent choice: X Yes DNo	
Case Managers act as agents for clients not as promoters of provider agencies: X Yes DNo	
AAA has internal controls in place to prevent: a.X Conflicts of Interest b. X Preferential referrals to any provider	

<u>Item #5a(3) – Case Management Services</u> Service Table #2	
ne and Description of Service Provided:	
Support Options Coordination	
e First Provided by a. X AAA Staff, SFY2021 (Feb 2021)	
e Last Competitively Bid: N/A.	
Igeted Funds (Annual): \$144,000 Staff F.T.E. funded: N/A	
ents Served (Annual): 7	
ts Provided (Annual): Units entered as HCBS CM	
X Client Definition same as OAA Other Click or tap here to enter text.	
e Management Staff Receive Specialized Training: XYes □No % 100	
e Management Services:	
Do Not Duplicate services provided through other Federal and State Programs: X Yes □No	
Provides clients a list of similar services available within the jurisdiction of the AAA: XYes ⊟No	
Provides clients a statement specifying their right to make an independent choice: X Yes DNo	
Documents each client's receipt of the statement concerning independent choice: X Yes DNo	
Case Managers act as agents for clients not as promoters of provider agencies: X Yes DNo	
AAA has internal controls in place to prevent: a.X Conflicts of Interest b. X Preferential referrals to any provider	

	<u>Item #5a(3) – Case Management Services</u> Service Table #3
Name an	d Description of Service Provided:
	Care Consultation
	t Provided by a. X AAA Staff, Prior to the SFY2021-2024 Area Plan Cycle
	Competitively Bid: N/A
•	I Funds (Annual): \$18,433 Staff F.T.E. funded: 0.33
	erved (Annual): 14
Units Pro	vided (Annual):
	X Client Definition same as OAA Other Click or tap here to enter text.
Case Ma	nagement Staff Receive Specialized Training: X Yes □No % of staff trained 100%
Case Ma	nagement Services:
De	Not Duplicate services provided through other Federal and State Programs: X Yes DNo
Pr	ovides clients a list of similar services available within the jurisdiction of the AAA: X Yes $\Box$ No
Pr	ovides clients a statement specifying their right to make an independent choice: X Yes DNo
	cuments each client's receipt of the statement concerning independent choice: X Yes □No
	se Managers act as agents for clients not as promoters of provider agencies: X Yes ⊡No
	A has internal controls in place to prevent: a.X Conflicts of Interest b. X Preferential referrals to any provider

#### Item #5b – Contract/Commercial Relationships Services Delivery System

#### Insert Attachment #5b in its entirety into the AAA's Area Plan Document. (Add or Delete Contractor/Vendor Tables, as necessary.)

The Older Americans Act, as amended (42 U.S.C. §2026 (a)(13)), requires that Area Agencies on Aging provide assurances that contractual and commercial relationships maintain the integrity and public purpose of services provided under contracts and commercial relationships, and indicates ways that such assurance may be demonstrated. Further (42 U.S.C. §2026 (a)(14)), Area Agencies must provide assurances that preference in receiving services under this subchapter will not be given by the AAA to particular older individuals as a result of a contract or commercial relationship.

Complete a listing below, including each requested data element, for each contract or commercial relationship which affects delivery of services to older individuals. Do not complete a listing for providers and services that the AAA has included by name in the area plan and budget. Attach as many continuation pages as necessary to provide a complete listing.

#### Item #5b – Contract/Commercial Relationships Contractor/Vendor Table #1

#### Area Agency on Aging: Coastal Fiscal Year: SFY2023

Contractor/Vendor, Legal Name: Georgia Department of Community Health

Contractor is: X Georgia Govt. Agency

**Description of Service Provided/Received or Goods Purchased:** 

ADRC/ EDWP (DCH)

Date First Effective: Prior to the SFY2021-2024 Area Plan Cycle Expiration Date: Annual Contract expires 6-30-2023

Revenue Received: \$849,780 Funds Expended: \$849,780

Clients Served: 497 Units Provided: 497

**X Client Definition same as OAA Other** Click or tap here to enter text.

How does the AAA:

1. Demonstrate that a loss in the quantity or quality of services delivered under the OAA has not and will not result from this contract/relationship?

The contract helps to supplement the ADRC. Screening for CCSP can be performed in conjunction with screening for HCBS.

2. Demonstrate that an enhancement in the quantity or quality of services delivered under the OAA has resulted from this contract/relationship?

The contract provides the AAA additional staff resources and fosters sustainability.

3. Demonstrate that preference in receiving OAA services will not be given to particular older individuals as a result of this contract/relationship?

Clients served under this contract are funneled into EDWP (Medicaid Waiver Services). If through the screening process clients are identified as being more appropriate for HCBS or another service avenue, then the clients are referred accordingly without a lag in service.

#### Item #5b – Contract/Commercial Relationships Contractor/Vendor Table #2

#### Area Agency on Aging: Coastal Fiscal Year: SF2023

Contractor/Vendor, Legal Name: SOWEGA Council on Aging

Contractor is: X Another Georgia Area Agency on Aging

Description of Service Provided/Received or Goods Purchased:

Case Management/ Care Management (GG)

Date First Effective: 2018 Expiration Date: 2023 (Annual Contract)

Revenue Received: Unable to disclose. Funds Expended: Unable to disclose

Clients Served: Units Provided: Click or tap here to enter text.

#### □Client Definition same as OAA X Other Anthem members

#### How does the AAA:

- 1. Demonstrate that a loss in the quantity or quality of services delivered under the OAA has not and will not result from this contract/relationship? There is no WL for CM. Gaining experience/expertise in the private market about what is required to meet service delivery requirements and analyzing health outcomes.
- 2. Demonstrate that an enhancement in the quantity or quality of services delivered under the OAA has resulted from this contract/relationship? This funding supplements CM funding and assists with sustainability. This meets a goal of receiving 2% of our funding from non-DAS sources.
- 3. Demonstrate that preference in receiving OAA services will not be given to particular older individuals as a result of this contract/relationship?

There is no WL for CM which prevents these clients from getting priority or preference.

#### <u>Item #5b – Contract/Commercial Relationships</u> Contractor/Vendor Table #3

Area Agency on Aging: Coastal Fiscal Year: SF2023

Contractor/Vendor, Legal Name: Southeast Georgia Regional Health System

Contractor is: X Hospital System

Description of Service Provided/Received or Goods Purchased:

Care Transitions (SEGHS)

Date First Effective: 2013 Expiration Date: No Expiration

Revenue Received: \$16,700. Funds Expended: 5,719.22

Clients Served: 40 Units Provided: 40

□Client Definition same as OAA X Other Anthem members

How does the AAA:

- 1. Demonstrate that a loss in the quantity or quality of services delivered under the OAA has not and will not result from this contract/relationship? There is no WL for CM. We are gaining experience/expertise in the private sector and analyzing health outcomes.
- 2. Demonstrate that an enhancement in the quantity or quality of services delivered under the OAA has resulted from this contract/relationship? This funding supplements CM funding and assists with sustainability. This meets a goal of receiving 2% of our funding from non-DAS sources.
- 3. Demonstrate that preference in receiving OAA services will not be given to particular older individuals as a result of this contract/relationship?

There is no WL for CM which prevents these clients from getting priority or preference.

#### Item #6 – LOCATION OF SERVICES CHARTS

Item #6: CHART #1 - <u>Home and Community Based Services (HCBS)</u> as provided in each county. (Include HCBS Services, HCBS In-Home Services, HCBS Nutrition/Wellness, Congregate Meals, Home Delivered Meals, HCBS Caregiver, HCBS Kinship Care Programs, Support Options, Alzheimer's, Evidence Based Programs, etc.) (Add/Delete Lines)

Chart #1	Counties	Bryan	Bulloch	Camden	Chatham	Effingham	Glynn	Liberty	Long	McIntosh	
1.	Adult Day Care				Χ		X				
2.	Adult Day Care - Mobile							Χ			
3.	Congregate Meals	X	Χ	X	Χ	X	X	X	Χ	X	
4.	Home Delivered Meals	X	X	X	Χ	Χ	X	X	Χ	X	
5.	Homemaker	X	X	X	Χ	Χ	Χ	X	Χ	X	
6.	Respite Care - In-Home	X	X	X	Χ	Χ	X	Χ	Χ	X	
7.	Personal Care	X	X	X	Χ	X	X	X	Χ	Х	
8.	HCBS Case Management Services	X	Χ	X	Χ	Х	X	X	Χ	Χ	
9.	Support Options Coordination	X	Χ	X	Χ	Χ	X	X	Χ	Χ	
10.	Care Consultation	Χ	X	X	Χ	Χ	X	Χ	Χ	X	
11.	DHS Coordinated Transportation	Χ	X	X	Χ	X	X	X	Χ	X	
12.	Material Aid -Assistive Technology	X	X	X	Χ	X	X	X	Χ	X	
13.	Falls Prevention - A Matter of Balance	Χ	X	X	Χ	X	X	X	Χ	X	
14.	Powerful Tools for Caregivers	X	X	X	Χ	Χ	X	X	Χ	Χ	
15.	CDSME – CDSMP	X	X	X	Χ	Χ	X	X	Χ	Χ	
16.											
17.											
18.											
19.											
20.											

#### Item #6 – LOCATION OF SERVICES CHARTS Continued...

Item #6: Chart #2 – <u>Access Services</u> Provided in Each County Chart (Include ADRC, Elderly Legal Assistance Program, Nursing Home Transitions, Money Follows the Person, Options Counseling, etc. as provided in each county. (Add/Delete Lines)

Chart #2	Counties	Bryan	Bulloch	Camden	Chatham	Effingham	Glynn	Liberty	Long	McIntosh	
1.	ADRC Information and Assistance	X	X	X	Χ	X	X	Χ	Χ	X	
2.	Elderly Legal Assistance	X	X	X	Χ	X	X	Χ	Χ	X	
3.	MFP - Transition Coordination	X	X	X	Χ	X	X	Χ	Χ	X	
4.	Support Options Coordination	X	X	X	X	X	X	X	Χ	X	
5.	Nursing Home Transitions	X	X	X	X	X	X	X	X	X	
6.											
7.											
8.											
9.											
10.											

#### Item #6 – LOCATION OF SERVICES CHARTS Continued...

Item #6: Chart #3 – Initiatives and Services/Programs Funded through DAS/ACL Discretionary Grants, Other Federal, State and Local Funds, and Commercial relationships such as with Health Partners, Insurance Agencies, IT Contracts, etc. as provided in each County. (Add/Delete Lines)

Chart #3	Counties	Bryan	Bulloch	Camden	Chatham	Effingham	Glynn	Liberty	Long	McIntosh	
1.	ADRC/ EDWP (DCH)	X	X	X	Χ	X	X	Χ	Χ	X	X
2.	Case Management/ Care Management (GG)	Х	X	X	Χ	X	X	Χ	Χ	Х	X
3.	Care Transitions (SEGHS)			Χ			X			X	
4.											
5.											
6.											
7.											
8.											
9.											
10.											

### Item #7 – Cost Share Implementation Plan

**Introduction:** The OAA permits states to implement cost sharing. DAS established the fee-for-service system to be used specifically to leverage state community-based services funding to generate additional resources through client fees. AAAs use a fee scale provided by the DAS to determine the amount of cost share based on a declaration of income by the individual served for both, state funded and OAA funded services. Coastal AAA implementation plans for cost share ensure that low income older persons will not be adversely affected, with particular attention to low income minority individuals. The cost share scale is revised annually based on revised Federal Poverty Guidelines.

Services subject to cost sharing for state funded or OAA funded services include, but are not limited to:

- Adult Day Care/Health Services
- Chore Services
- Emergency Response Services
- Homemaker Services
- Home Modification and Repairs
- Personal Support Services

- Respite Care Services
- Transportation Services
- Senior Center Activities
- Recreation Services
- Wellness Program Services

Voluntary contributions are allowed from service recipients, their caregivers or their representatives. AAAs are encouraged to inform service recipients of the actual cost of a service to allow informed consideration about the amount of voluntary contributions. The AAAs consult with service providers and older individuals in the planning and service area to develop methods for collecting, safeguarding and accounting for voluntary contributions. The AAAs ensure that each service provider will provide each recipient with an opportunity to voluntarily contribute to the cost of the service.

Coastal AAA cost share plan mirrors MAN 5600, CH 2026 including services subject to and excluded from cost share. Coastal AAA assesses clients for cost share annually during reassessment and utilizes the HCBS Income Worksheet as a guide in interviewing clients regarding income. Coastal AAA has implemented a cost share plan that includes specific guidelines for terminating clients for failure to pay cost shares and includes a provision for waiving cost share for clients with evidence of extenuating circumstances. Coastal AAA is not currently providing any direct services that are subject to cost sharing.

### Items #8 - Allocation, Budget and Units Plan

#### Item #8a - Allocation Methodology

The Coastal AAA uses the intrastate funding formula to formulate a basis for allocating the funds throughout the region. A great deal of care and consideration are taken to ensure that current clients will continue to receive services as well as redistributing funds from counties that have excess funding to those that have a significant amount of people on their waiting lists. The primary goals are to ensure that funds are utilized according to federal and state guidelines, and that they are allocated in an equitable manner.

#### Item #8b - Budget Narrative

Due to recalculation of the Interstate Funding Formula with 2020 census data, Aging will see an increase in funds of \$79,244 with most of the increase coming from Title III. There will be an increase of Title III A finds of \$8,553, an increase of III B of \$48,049, an increase of Title III C1 funds of \$25,659, an increase of Title III C2 funds if 1,204.

#### Item #8c - Changes to Services/Units/Persons

In SFY 2022, Altamaha HomeCare are no longer a contract service provider of in-home services for Coastal AAA. Help at Home is Coastal's new service provider for in-home services in Camden, Glynn, Liberty, Long and McIntosh Counties. Coastal continues to work with providers to secure other funding sources to ensure service delivery in all counties. Coastal will monitor provider budgets and units to safeguard client services for SFY 2023

### Item #9 - 2020 – 2023 State Plan and AAA Area Plan Alignment of Older Americans Act Mandate for Goals, Objectives and Measures

**Introduction:** In compliance with the Older Americans Act, as amended through P.L. 114 – 114, enacted April 19, 2016, the Georgia DHS/DAS has established a four-year planning cycle such that area plans are developed in the first year and amended as required in the succeeding three years. State plan development is accomplished in the fourth year of the schedule and uses area plan information and performance data as the basis against which compliance with standard assurances, evaluation of regional capacity, effectiveness of service delivery and the degree to which target populations are served are measured. The state plan establishes statewide goals and objectives for the next area plan cycle to which Area Agencies on Aging must align new area plans developed in the new planning cycle. Area agencies on Aging are provided the option to include area specific targets appropriate to serve regional needs absent conflicts with statewide direction.

The Georgia DHS/DAS developed the following measurable goals and objectives that meet the Administration for Community Living's (ACL) focus areas. The goals embrace person-centered and consumer-directed approaches to improve service delivery, strengthen the aging network and increase safety for older Georgians and people with disabilities.

## Item #10 – Goal #1 Objectives and Measures Charts

<u>Goal #1</u> - Provide long-term services and supports that enable older Georgians, their families, caregivers and persons with disabilities to fully engage and participate in their communities for as long as possible.

	AAA #1.1 Objective: <u>Money Follows the Person Program (MFP)</u> Increase number of participants completing 365 days in all transition programs.							
		A Strategies						
1.	Transitions clients from institutional settings through the MF							
2.	Provide MDSQ Options Counseling to clients in institutional	settings						
3.								
	Марацию	Baseline: SFY 2018 Due 2/1/2020 Undete for SEX 2010						
1	Measure	Due 3/1/2020 – Update for SFY 2019:						
1.	Increase the number of completed transitions by 1% annually.	SFY 2018 Baseline: 10 clients completed 365 days in FY2018						
	Measure	Due 3/1/2021 – Update for SFY 2020:						
1.	Increase the number of completed transitions by 1% annually.	SFY 2020 – 11 transitions completed 365 days = 10% increase over						
1.		baseline. Goal Met						
	Measure	Due 3/1/2022 – Update for SFY 2021:						
1.	Increase the number of completed transitions by 1% annually.	SFY 2021 – 10 MFP Transitions completed 365 days = 0% increase						
		over baseline and 9% decrease over previous year						
	Measure	Due 3/1/2023- Update for SFY 2022:						
1.	Increase the number of completed transitions by 1% annually.							
	Measure	Due 3/1/2024 – Update for SFY 2023:						
1.	Increase the number of completed transitions by 1% annually.							
	M							
4	Measure	Due 3/1/2025 – Update for SFY 2024:						
1.	Increase the number of completed transitions by 1% annually.							
		#1						

		ing Home Transitions (NHT)							
	Decrease the number of participants who re-institutionalized in the Nursing Home Transitions Program each year.								
1	AAA Strategies								
1.	Transitions clients from institutional settings through the NHT								
2.	Provide MDSQ Options Counseling to clients in institutional se	ettings							
3.		Baseline: SFY 2018							
	Measure								
4		Due 3/1/2020 – Update for SFY 2019:							
1.	Decrease the number of re-institutionalizations by 1% annually.	SFY 2018 Baseline: 0 participants re-institutionalized in FY 2018.							
	Measure	Due 3/1/2021 – Update for SFY 2020:							
1.	Decrease the number of re-institutionalizations by 1% annually.	SFY2020 – 1 participant re-institutionalized – Goal as stated cannot							
	, , , , , , , , , , , , , , , , , , ,	be met with baseline of 0.							
	Measure	Due 3/1/2022 – Update for SFY 2021:							
1.	Decrease the number of re-institutionalizations by 1% annually.	SFY2021 - 0 participants re-institutionalized - Re-institutionalizations							
		decreased in number from last year by 1 = a decrease of 100%. Goal							
		Met.							
	Measure	Due 3/1/2023- Update for SFY 2022:							
1.	Decrease the number of re-institutionalizations by 1% annually.								
	Measure	Due 3/1/2024 – Update for SFY 2023:							
1.	Decrease the number of re-institutionalizations by 1% annually.								
	Measure	Due 3/1/2025 – Update for SFY 2024:							
1	Decrease the number of re-institutionalizations by 1% annually.								
1.		#2							
		π2							

#### AAA #1.3 Objective: <u>Aging & Disability Resource Connection (ADRC)</u> Expand the number of AAAs providing Community Options Counseling to 100% by 2022.

	AAA Strategies		
1.	Coastal ADRC Counselors offer Community Options Counseling to 90+% of callers completing the intake process.		
2.			
3.			
	Measure	Baseline: SFY 2018 Due 3/1/2020 – Update for SFY 2019:	
1.	Increase the number of AAAs participating in the program to 12 by 2022.	SFY 2018 Baseline: Coastal AAA MFP target for SFY2018 was 6 MFP and 10 NHT transitions. Coastal AAA is offering Community Options Counseling and has provided COC services to approximately 20 clients this fy.	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	Increase the number of AAAs participating in the program to 12 by 2022.	Coastal AAA provided Community Options Counseling for 32 individuals in SFY 2020	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	Increase the number of AAAs participating in the program to 12 by 2022.	Coastal AAA provided Community Options Counseling for 8 individuals in SFY 2021	
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	Increase the number of AAAs participating in the program to 12 by 2022.		
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	Increase the number of AAAs participating in the program to 12 by 2022.		
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	Increase the number of AAAs participating in the program to 12 by 2022.		
		#3	

	AAA #1.4 Objective: <u>Home and Community Based Services (HCBS)</u> Reduce hunger and nutrition risks for meal recipients.		
	AAA Strategies		
1.	Conduct at least 12 outreach events to targeted populations an		
2.	Conduct a marketing campaign that includes printed materials	and billboard advertisement.	
3.			
	Measure	Baseline: SFY 2019 Due 3/1/2020 – Update for SFY 2019:	
1.	Decrease hunger and nutrition risk by 10% from the client baseline after a meal is received by 2023.	SFY 2019 Baseline:	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	Decrease hunger and nutrition risk by 10% from the client baseline after a meal is received by 2023.		
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	Decrease hunger and nutrition risk by 10% from the client baseline after a meal is received by 2023.	No Update is <u>required</u> for SFY 2021 in the AAA's 3/1/2022 Area Plan Update Submission.	
	Measure	Due 3/1/2023 - Update for SFY 2022:	
1.	Increase persons served with Home and Community Services (HCBS) as defined by the Older Americans Act from Regional Baseline to 25% increase by June 30, 2024.	SFY 2021 Baseline (As of June 30, 2021): XXXXX unduplicated HCBS consumers served in FY2021	
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	Increase persons served with Home and Community Services (HCBS) as defined by the Older Americans Act from Regional Baseline to 25% increase by June 30, 2024.		
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	Increase persons served with Home and Community Services (HCBS) as defined by the Older Americans Act from Regional Baseline to 25% increase by June 30, 2024.		
		#4	

	AAA #1.5 Objective: <u>Home and Community Based Services (HCBS)</u> Serve target populations in need of HCBS.		
	AAA Strategies		
1.	Conduct at least 12 outreach events to targeted populations an	nually.	
2.	Review clients meeting 0 target criteria.		
3.		T	
	Measure	Baseline: SFY 2019 Due 3/1/2020 – Update for SFY 2019:	
1.	By 2024, ensure that a minimum of 75% of clients receiving HCBS	SFY 2019 Baseline:	
	meet at least one target criteria.	85.2%. Goal Met.	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	By 2024, ensure that a minimum of 75% of clients receiving HCBS meet at least one target criteria.	Strategy 1: For SFY2020 no outreach events were held due to the pandemic. Strategy 2: To date 90.2% of the clients served this fiscal year meet at least one of the target criteria. During fourth quarter the Contracts Administrator will review at least 10% of clients meeting 0 target criteria.	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	By 2024, ensure that a minimum of 75% of clients receiving HCBS	92.8% of clients receiving HCBS meet at least one target criteria.	
	meet at least one target criteria.	Goal Met.	
		Reviewed 10% sample of 155 individuals = 15.	
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	By 2024, ensure that a minimum of 75% of clients receiving HCBS		
	meet at least one target criteria.		
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	By 2024, ensure that a minimum of 75% of clients receiving HCBS meet at least one target criteria.		
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	By 2024, ensure that a minimum of 75% of clients receiving HCBS meet at least one target criteria.		
		#5	

1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.       SFY 2019 Baselin During last fiscal ye Health First Aid Training last fiscal ye Health First Aid Training by 10% over the baseline         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.       Due 3/1/2021 – Up During last fiscal ye Health First Aid Training by 10% over the baseline         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       Due 3/1/2022 – Up During last fiscal ye Health First Aid Training by 10% over the baseline	istal region
1.       Coastal AAA will look for Mental Health First Aid Training opportunities in or near the Coalling of the composition	stal region
3.       Baseline: SFY 201         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.       SFY 2019 Baseline During last fiscal ye Health First Aid Training by 10% over the baseline         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       Due 3/1/2021 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.       Due 3/1/2021 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       Due 3/1/2022 – Up	
Measure         Baseline: SFY 201 Due 3/1/2020 – Up           1.         Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.         SFY 2019 Baselin During last fiscal ye Health First Aid Training by 10% over the baseline           1.         Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.         Due 3/1/2021 – Up           1.         Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.         Due 3/1/2022 – Up           1.         Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline         Due 3/1/2022 – Up           1.         Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline         Due 3/1/2022 – Up           1.         Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline         During last fiscal ye Health First Aid Training by 10% over the baseline	
MeasureDue 3/1/2020 – Up1.Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.SFY 2019 Baseline During last fiscal ye Health First Aid Training During last fiscal ye Health First Aid Training Due 3/1/2021 – Up1.Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.Due 3/1/2021 – Up During last fiscal ye Health First Aid Training During last fiscal ye Health First Aid Training by 10% over the baseline1.Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.Due 3/1/2022 – Up During last fiscal ye Health First Aid Training by 10% over the baseline1.Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baselineDue 3/1/2022 – Up During last fiscal ye Health First Aid Training by 10% over the baseline	-
Mental Health First Aid Training by 10% over the baseline annually.       During last fiscal ye Health First Aid Training         Measure       Due 3/1/2021 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.       Due 3/1/2021 – Up         Measure       During last fiscal ye Health First Aid Training         Measure       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       During last fiscal ye Health First Aid Training by 10% over the baseline	9 date for SFY 2019:
annually.       Health First Aid Training         Measure       Due 3/1/2021 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.       During last fiscal ye Health First Aid Training         Measure       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       During last fiscal ye Health First Aid Training	
Measure       Due 3/1/2021 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.       During last fiscal ye Health First Aid Training         Measure       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       During last fiscal ye Health First Aid Training by 10% over the baseline	ar none of the Coastal AAA staff received Mental
1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.       During last fiscal ye Health First Aid Training         1.       Measure       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       Due 3/1/2022 – Up	ining.
1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline annually.       During last fiscal ye Health First Aid Training         1.       Measure       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       Due 3/1/2022 – Up	date for SFY 2020:
Mental Health First Aid Training by 10% over the baseline annually.       Health First Aid Training         Measure       Due 3/1/2022 – Up         1.       Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline       During last fiscal ye Health First Aid Training	ar none of the Coastal AAA staff received Mental
Measure         Due 3/1/2022 – Up           1.         Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baseline         During last fiscal ye	
1.Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baselineDuring last fiscal ye Health First Aid Training by 10% over the baseline	
1.Increase the number of aging network staff who have received Mental Health First Aid Training by 10% over the baselineDuring last fiscal ye Health First Aid Training by 10% over the baseline	date for SFY 2021:
	ar none of the Coastal AAA staff received Mental
	ining.
annually.	
Measure Due 3/1/2023- Upo	ate for SFY 2022:
1. Increase the number of aging network staff who have received	
Mental Health First Aid Training by 10% over the baseline	
annually.	
	date for SFY 2023:
1. Increase the number of aging network staff who have received	
Mental Health First Aid Training by 10% over the baseline	
annually.	
	date for SFY 2024:
1. Increase the number of aging network staff who have received	
Mental Health First Aid Training by 10% over the baseline	
annually.	

	AAA #1.7 Objective: <u>Home and Co</u> Increase number of Quality of	
		Strategies
1.	Allocate 10 trips per month for QOL purposes	
2.	Review utilization of the 10 monthly allocated QOL trips Quarte	rly.
3.	Develop a targeted Outreach plan for Year 2.	
	Measure	Baseline: SFY 2019 Due 3/1/2020 – Update for SFY 2019:
1.	Increase number of Quality of Life and Health related trips by 40% by 2024.	SFY 2019 Baseline: Coastal AAA provided approximately 30 QOL trips during SFY2019 as part of a transportation pilot project. Increase the number QOL trips by 40% by 2024 (42), over baseline in FY 2019 (30).
	Measure	Due 3/1/2021 – Update for SFY 2020:
1.	Increase number of Quality of Life and Health related trips by 40% by 2024.	4 year Goal was exceeded in first reporting period (goal target for plan was 42 trips (40%) by end of SFY2024 Coastal AAA provided approximately 50 QOL trips during SFY2020. The increase of the # of trips (20) over the baseline (30) = 66.7%
	Measure	Due 3/1/2022 – Update for SFY 2021:
1.	Increase number of Quality of Life and Health related trips by 40% by 2024.	<ul> <li>4 year Goal was exceeded in in SFY2020 (42 trips or 40% over baseline.</li> <li>Coastal AAA provided 119 QOL trips during SFY2021.</li> <li>The increase of trips (89) over baseline (30) = 297%</li> </ul>
	Measure	Due 3/1/2023- Update for SFY 2022:
1.	Increase number of Quality of Life and Health related trips by 40% by 2024.	
	Measure	Due 3/1/2024 – Update for SFY 2023:
1.	Increase number of Quality of Life and Health related trips by 40% by 2024.	
	Measure	Due 3/1/2025 – Update for SFY 2024:
1.	Increase number of Quality of Life and Health related trips by 40% by 2024.	
		#7

#### Item #11 – Goal #2 Objectives and Measures Charts

## <u>Goal #2:</u> Ensure older Georgians, persons with disabilities, caregivers and families have access to information about resources and services that is accurate and reliable.

	AAA #2.1 Objective: Aging & Disability Resource Connection (ADRC) Increase the number of first-time contacts to ADRC.		
	AAA Strategies		
1.	Conduct outreach events throughout the region promoting the		
2.	Increase ADRC Advisory Council membership and AAA partne		
3.	Utilize social media outlets to market ADRC/AAA services and		
	Measure	Baseline: SFY 2018 Due 3/1/2020 – Update for SFY 2019:	
1.	Increase the number of first-time contacts to ADRC by 5% annually.	SFY 2018 Baseline: Not available in HAR During SFY2019 Coastal AAA received 818 First Time Callers, unduplicated.	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	Increase the number of first-time contacts to ADRC by 5% annually.	Coastal AAA received 696 First Time Callers, unduplicated.	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	Increase the number of first-time contacts to ADRC by 5% annually.	Coastal AAA ADRC had 1,061 First Time Callers unduplicated. Increase over baseline = 30%. Increase over FY20=52%. Goal Met!	
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	Increase the number of first-time contacts to ADRC by 5% annually.		
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	Increase the number of first-time contacts to ADRC by 5% annually.		
	Measure	Due 3/1/2025 – Update for SFY 2024:	
	Increase the number of first-time contacts to ADRC by 5% annually.		

#### AAA #2.1 Objective: Aging & Disability Resource Connection (ADRC) Increase the number of first-time contacts to ADRC. AAA #2.2 Objective: GeorgiaCares (GAC) Increase the number of GeorgiaCares client contacts. **AAA Strategies** The AAA does not contract with the DHS DAS to provide this service. 1. 2. 3. Baseline: SFY 2018 Due 3/1/2020 – Update for SFY 2019: Measure Increase the number of GeorgiaCares client contacts by 3% SFY 2018 Baseline: 1. annually. Measure Due 3/1/2021 – Update for SFY 2020: Increase the number of GeorgiaCares client contacts by 3% 1. annually. Due 3/1/2022 – Update for SFY 2021: Measure Increase the number of GeorgiaCares client contacts by 3% 1. annually. Due 3/1/2023- Update for SFY 2022: Measure Increase the number of GeorgiaCares client contacts by 3% 1. annually. Measure Due 3/1/2024 – Update for SFY 2023: Increase the number of GeorgiaCares client contacts by 3% 1. annually. Due 3/1/2025 – Update for SFY 2024: Measure Increase the number of GeorgiaCares client contacts by 3% 1. annually. #9

AAA #2.3 Objective: <u>GeorgiaCares (GAC)</u> Increase the number of GeorgiaCares outreach and education events.

1	AAA Strategies The AAA does not contract with the DHS DAS to provide this service.	
1.	The AAA does not contract wi	th the DHS DAS to provide this service.
<u>2</u> . 3.		
0.	Measure	Baseline: SFY 2019 Due 3/1/2020 – Update for SFY 2019:
1.	Increase the number of GeorgiaCares client contacts by 3% statewide annually.	SFY 2019 Baseline:
	Measure	Due 3/1/2021 – Update for SFY 2020:
1.	Increase the number of GeorgiaCares client contacts by 3% statewide annually.	
	Measure	Due 3/1/2022 – Update for SFY 2021:
1.	Increase the number of GeorgiaCares client contacts by 3% statewide annually.	
	Measure	Due 3/1/2023- Update for SFY 2022:
1.	Increase the number of GeorgiaCares client contacts by 3% statewide annually.	
	Measure	Due 3/1/2024 – Update for SFY 2023:
1.	Increase the number of GeorgiaCares client contacts by 3% statewide annually.	
	Measure	Due 3/1/2025 – Update for SFY 2024:
1.	Increase the number of GeorgiaCares client contacts by 3% statewide annually.	
		#10

		e: <u>Administration (ADMIN)</u> es to targeted populations via local news outlets.		
	AAA Strategies			
1.	Coastal AAA will explore marketing and outreach opportun			
2.	Coastal AAA will continue to post ads in local newspapers/	publications		
3.	Coastal AAA will use social media outlets to promote service			
	Measure	Baseline: SFY 2019 Due 3/1/2020 – Update for SFY 2019:		
1.	Increase the number of new local TV stations that air DAS advertising by adding at least 1 new station annually.	SFY 2019 Baseline: No baseline data was collected on the use of other local news outlets. During SFY2019 Coastal AAA did not use any TV stations to air Coastal advertising.		
	Measure	Due 3/1/2021 – Update for SFY 2020:		
1.	Increase the number of new local TV stations that air DAS advertising by adding at least 1 new station annually.	Coastal AAA did not use any TV stations to air Coastal advertising SFY2020 or to date SFY2021.		
	Measure	Some social media were used (i.e. Webpage and Facebook) Due 3/1/2022 – Update for SFY 2021:		
1.	Increase the number of new local TV stations that air DAS advertising by adding at least 1 new station annually.	Coastal AAA did not use any TV stations to air Coastal advertising SFY2020 or to date SFY2021. Some social media were used (i.e. Webpage and Facebook) Social Media was used because it is more cost-effective than traditional media. We are currently receiving service inquiries and referrals via our webpage.		
	Measure	Due 3/1/2023- Update for SFY 2022:		
1.	Increase the number of new local TV stations that air DAS advertising by adding at least 1 new station annually.			
	Measure	Due 3/1/2024 – Update for SFY 2023:		
1.	Increase the number of new local TV stations that air DAS advertising by adding at least 1 new station annually.			
	Measure	Due 3/1/2025 – Update for SFY 2024:		

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# AAA #2.4 Objective: Administration (ADMIN) Increase outreach and marketing activities to targeted populations via local news outlets. 1. Increase the number of new local TV stations that air DAS advertising by adding at least 1 new station annually. #11

AAA #2.5 Objective: <u>Aging & Disability Resource Connection (ADRC)</u> Increase awareness and education between ADRC and Community Service Boards one meeting per PSA per SFY.

	AAA Strategies		
1.	Invite local CSB's to join ADRC Advisory Council and encourage participation on other AAA lead coalitions		
2.	Coastal AAA staff will attend local Mental Health Collaborative meeting organized by the CSB's		
3.			
		Baseline: SFY 2019	
	Measure	Due 3/1/2020 – Update for SFY 2019:	
1.	Increase the number of events attended by ADRC staff by 1%	SFY 2019 Baseline:	
	annually.	During SFY2019 Coastal AAA helped to host and participate in a Mental Health Forum.	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	Increase the number of events attended by ADRC staff by 1%	Coastal AAA ADRC has not attended any mental health forums	
	annually.	during the pandemic.	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	Increase the number of events attended by ADRC staff by 1%	Coastal AAA ADRC Staff have been attending virtual CSB	
	annually.	Collaborative meetings.	
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	Increase the number of events attended by ADRC staff by 1%		
	annually.		
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	Increase the number of events attended by ADRC staff by 1%		
	annually.		
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	Increase the number of events attended by ADRC staff by 1%		
	annually.		
		#12	

	AAA #2.6 Objective: <u>Home and Community Based Services (HCBS)</u> Increase cross referrals by ADRC staff to Evidence Based Programs.		
	AAA Strategies		
1.	Coastal ADRC will place clients requesting EBPs on the referral		
2.	Coastal AAA will continue to promote EBPs during outreach ev	ents and in marketing materials	
3.			
		Baseline: SFY 2019	
	Measure	Due 3/1/2020 – Update for SFY 2019:	
1.	By 2024, increase ADRC referrals to Evidence-Based programs by		
	25%.	Coastal ADRC referred 4 clients to EBPs during SFY2019.	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	By 2024, increase ADRC referrals to Evidence-Based programs by 25%.	Coastal ADRC referred 0 clients to EBP's during SFY2020.	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	By 2024, increase ADRC referrals to Evidence-Based programs by 25%.	Coastal ADRC referred 6 clients to EBPs during SFY2021 (July 1, 2020 – June 30, 2021. Goal Met.	
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	By 2024, increase ADRC referrals to Evidence-Based programs by 25%.		
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	By 2024, increase ADRC referrals to Evidence-Based programs by 25%.		
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	By 2024, increase ADRC referrals to Evidence-Based programs by 25%.		
		#13	

Inci	AAA #2.7 Objective: <u>Administration (ADMIN)</u> Increase marketing to the Hispanic and Korean populations		
IIIC	AAA Strategies		
1.	Coastal AAA will conduct outreach and marketing towards targeted populations.		
2.	Coastal AAA will explore partnerships with service providers s		
3.	Coastal AAA will continue to provide printed materials in Span		
	Measure	Baseline: SFY 2019 Due 3/1/2020 – Update for SFY 2019:	
1.	Provide at least one marketing campaign to each population per year of the plan.	SFY 2019 Baseline: During SFY2019 Coastal AAA provided HCBS to approximately 36 Hispanic, Latino or Spanish individuals and 5 Asians.	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	Provide at least one marketing campaign to each population per year of the plan.	During SFY2020 Coastal AAA provided HCBS to approximately 32 Hispanic, Latino or Spanish individuals and 13 Asians. Our greatest impact is through our partnerships with other community organizations that target Hispanic and Korean populations. We invite these organizations to be a part of our collaboratives, advisory councils, public hearings, etc.	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	Provide at least one marketing campaign to each population per year of the plan.	During SFY2021 Coastal AAA provided HCBS to approximately 103 Hispanic, Latino or Spanish individuals and 17 Asians. Our greatest impact is through our partnerships with other community organizations that target Hispanic and Korean populations. We invite these organizations to be a part of our collaboratives, advisory councils, public hearings, etc.	
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	Provide at least one marketing campaign to each population per year of the plan.		
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	Provide at least one marketing campaign to each population per year of the plan.		

	AAA #2.7 Objective: Administration (ADMIN)		
Inc	Increase marketing to the Hispanic and Korean populations		
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	Provide at least one marketing campaign to each population per year of the plan.		
			#14

#### Item #12 – Goal #3 Objectives and Measures Charts

# <u>Goal #3:</u> Strengthen the aging network to enable partners to become viable and sustainable; and develop a robust network of aging service partners.

service. lunteers. Baseline: SFY 2018 Due 3/1/2020 – Update for SFY 2019:
Baseline: SFY 2018
SFY 2018 Baseline: Coastal AAA does not operate a GeorgiaCares Program.
Due 3/1/2021 – Update for SFY 2020:
Coastal AAA does not operate a GeorgiaCares Program.
Due 3/1/2022 – Update for SFY 2021:
Coastal AAA does not operate a GeorgiaCares Program.
Due 3/1/2023- Update for SFY 2022:
Due 3/1/2024 – Update for SFY 2023:
Due 3/1/2025 – Update for SFY 2024:

	AAA #3.1 Objective: <u>GeorgiaCares (GAC)</u> Increase the number of active GeorgiaCares volunteers.			
AAA #3.2 Objective: <u>Home and Community Based Services (HCBS)</u> Strengthen the aging network by establishing healthcare partnerships. (Primary Care Providers, Medicare Advantage Plans, Hospitals, Memory Assessment Clinics, etc.)				
	AAA Strategies			
1.	Coastal AAA will continue to partner with local hospital system(s) to provide Care Transition Services     Coastal AAA staff will attend local hospital collaborative meetings			
Ζ.	Coastal AAA stall will attend local hospital collaborative meetings     Baseline: SFY 2019			
	Measure	Due 3/1/2020 – Update for SFY 2019:		
1.	By 2024, at least 5 additional healthcare entities, that pay for services, will establish a referral mechanism to community-based programs including evidence-based programs.	SFY 2019 Baseline: During SFY2019 Coastal AAA partnered with one hospital system in the Coastal region to provide fee for services Care Transition Services. Coastal AAA also worked with one managed care organization during SFY2019.		
	Measure	Due 3/1/2021 – Update for SFY 2020:		
1.	By 2024, at least 5 additional healthcare entities, that pay for services, will establish a referral mechanism to community-based programs including evidence-based programs.	During SFY2020 Coastal AAA partnered with one hospital system in the Coastal region to provide fee for services Care Transition Services. Coastal AAA also worked with one managed care organization during SFY2020.		
	Measure	Due 3/1/2022 – Update for SFY 2021:		
1.	By 2024, at least 5 additional healthcare entities, that pay for services, will establish a referral mechanism to community-based programs including evidence-based programs.	During SFY2021 Coastal AAA partnered with one hospital system in the Coastal region to provide fee for services Care Transition Services. Coastal AAA also worked with one managed care organization during SFY2021. For a total of 2 healthcare entities.		
	Measure	Due 3/1/2023- Update for SFY 2022:		
1.	By 2024, at least 5 additional healthcare entities, that pay for services, will establish a referral mechanism to community-based programs including evidence-based programs.			
	Measure	Due 3/1/2024 – Update for SFY 2023:		
1.	By 2024, at least 5 additional healthcare entities, that pay for services, will establish a referral mechanism to community-based programs including evidence-based programs.			

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AAA #3.1 Objective: <u>GeorgiaCares (GAC)</u> Increase the number of active GeorgiaCares volunteers.			
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	By 2024, at least 5 additional healthcare entities, that pay for		
	services, will establish a referral mechanism to community-based		
	programs including evidence-based programs.		
			#16

		Community Based Services (HCBS) venue streams of the AAAs.	
	AAA Strategies		
1.	Coastal AAA will meet with at least 2 health care organization		
2.	Evaluate our infrastructure for Evidence Based Programs to o	offer as a third party payer opportunities by June 30, 2021.	
3.	Developing a fee structure for private pay and 3rd party payers		
	Measure	Baseline: SFY 2018 Due 3/1/2020 – Update for SFY 2019:	
1.	By 2024, shift the percent of revenue distribution towards third party payers by 2% (includes private pay).	SFY 2019 Baseline: During SFY2019, Coastal AAA collected \$855,078 from third party payers, which amounted to 15% of our total revenue. This includes our contract with DCH for ADRC services.	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	By 2024, shift the percent of revenue distribution towards third party payers by 2% (includes private pay).	During SFY2020, Coastal AAA collected \$833,806 from third party payers, which amounted to 15% of our total revenue. This includes our contract with DCH for ADRC services.	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	By 2024, shift the percent of revenue distribution towards third party payers by 2% (includes private pay).	During SY2021, Coastal AAA collected \$779,272 from third party payers, which amounted to 16% of our total revenue. This includes our contract with DCH for ADRC services	
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	By 2024, shift the percent of revenue distribution towards third party payers by 2% (includes private pay).		
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	By 2024, shift the percent of revenue distribution towards third party payers by 2% (includes private pay).	·	
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	By 2024, shift the percent of revenue distribution towards third party payers by 2% (includes private pay).		
		#17	

#### AAA #3.4 Objective: <u>Home and Community Based Services (HCBS)</u> Increase private pay, cost share and voluntary contributions.

**AAA Strategies** Coastal AAA will evaluate our current cost share and involuntary contributions by provider and program by June 30, 2020 1. 2. 3. Baseline: SFY 2019 Measure Due 3/1/2020 – Update for SFY 2019: Increase private pay, cost share and voluntary contributions by SFY 2019 Baseline: 1. Coastal AAA collected \$1,635 in cost share and \$58,576 in voluntary 20% by 2024. contributions for a total of \$60,211 during SFY2019. Due 3/1/2021 – Update for SFY 2020: Measure During SFY2020 Coastal AAA collected \$2,090 in cost share and Increase private pay, cost share and voluntary contributions by 1. 20% by 2024. \$76,650 in voluntary contributions for a total of \$78,740, an increase of \$18.529 or 30% over SFY2019. Measure Due 3/1/2022 – Update for SFY 2021: During SFY2021 Coastal AAA collected \$1,290 in cost share and 1. Increase private pay, cost share and voluntary contributions by 20% by 2024. \$65,356 in voluntary contributions for a total of \$66,646, an increase of \$6,435 (or 11%) over Baseline. Goal Met. Due 3/1/2023- Update for SFY 2022: Measure Increase private pay, cost share and voluntary contributions by 1. 20% by 2024. Due 3/1/2024 – Update for SFY 2023: Measure Increase private pay, cost share and voluntary contributions by 1. 20% by 2024. Measure Due 3/1/2025 – Update for SFY 2024: Increase private pay, cost share and voluntary contributions by 1. 20% by 2024. #18

#### AAA #3.5 Objective: <u>Alzheimer's Disease & Related Dementias (ADRD)</u> Expand dementia friendly efforts in Georgia.

**AAA Strategies** Coastal AAA will host information sessions and distribute information to service providers about the Dementia Friends Program. 1 2. 3. Baseline: SFY 2019 Measure Due 3/1/2020 – Update for SFY 2019: All 12 AAAs will become Dementia Friendly Champions by 2024. SFY 2019 Baseline: 1. During FY2019 Coastal AAA hosted one Dementia Friends information session for service providers in the Coastal region. Coastal AAA has 1 Dementia Friends Champion on staff. Due 3/1/2021 – Update for SFY 2020: Measure All 12 AAAs will become Dementia Friendly Champions by 2024. During SFY2020 Coastal AAA hosted 0 Dementia Friends information 1. session. Coastal AAA currently has 0 Dementia Friends Champions on staff with plans to train 2 staff fourth quarter SFY2021. Measure Due 3/1/2022 – Update for SFY 2021: All 12 AAAs will become Dementia Friendly Champions by 2024. During SFY 2021 Coastal AAA has one Dementia Friends Champion 1. on staff (and additionally a consultant). And plans to host 2 Dementia friends sessions in FY2022 Due 3/1/2023- Update for SFY 2022: Measure All 12 AAAs will become Dementia Friendly Champions by 2024. 1. Due 3/1/2024 – Update for SFY 2023: Measure All 12 AAAs will become Dementia Friendly Champions by 2024. 1. Due 3/1/2025 – Update for SFY 2024: Measure All 12 AAAs will become Dementia Friendly Champions by 2024. 1. #19

#### AAA #3.6 Objective: <u>Alzheimer's Disease & Related Dementias (ADRD)</u> Increase referrals from Memory Assessment Clinics to the ADRC.

#### AAA Strategies Coastal AAA distributes printed materials about the Memory Assessment Clinics at outreach and community education events.

1.

1.		issessment chines at outreach and community education events.
2.		
3.		
		Baseline: SFY 2018
	Measure	Due 3/1/2020 – Update for SFY 2019:
1.	Increase referrals from Memory Assessment Clinics to the ADRC	SFY 2018 Baseline:
	by 10% per year.	During SFY2018 & SFY2019 Coastal AAA did not receive any
		referrals from the MACs.
	Measure	Due 3/1/2021 – Update for SFY 2020:
1.	Increase referrals from Memory Assessment Clinics to the ADRC	During SFY2020 Coastal AAA received 0 referrals from MAC's.
	by 10% per year.	
	Measure	Due 3/1/2022 – Update for SFY 2021:
1.	Increase referrals from Memory Assessment Clinics to the ADRC	During SFY2021 Coastal Received 1 referral from MACs. Increase of
	by 10% per year.	100% over last year. Goal Met.
	Measure	Due 3/1/2023- Update for SFY 2022:
1.	Increase referrals from Memory Assessment Clinics to the ADRC	
	by 10% per year.	
-	Measure	Due 3/1/2024 – Update for SFY 2023:
1.	Increase referrals from Memory Assessment Clinics to the ADRC	
	by 10% per year.	
	Масалия	
4	Measure	Due 3/1/2025 – Update for SFY 2024:
1.	Increase referrals from Memory Assessment Clinics to the ADRC	
	by 10% per year.	
		#20

	AAA #3.8 Objective: <u>Administration (ADMIN)</u> Implement a new training curriculum for the aging network.		
		AAA Strategies	
1.	Coastal AAA will continue to participate in DAS hoste	ed training events.	
2.			
3.			
		Baseline: SFY 2019	
	Measure	Due 3/1/2020 – Update for SFY 2019:	
1.	Provide one new training per year.	SFY 2019 Baseline:	
		During SFY2019 Coastal AAA staff participated in DAS hosted	
		leadership training (DISC) conducted by Columbus State University Leadership Institute.	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	Provide one new training per year.	Coastal AAA has no new data to report regarding this goal.	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	Provide one new training per year.	Coastal AAA staff attended the DAS 101 Orientation in April 2021	
	Measure	Due 2/4/2022 Undete for SEV 2022	
1	Provide one new training per year.	Due 3/1/2023- Update for SFY 2022:	
1.			
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	Provide one new training per year.		
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	Provide one new training per year.	#04	
		#21	

	AAA #3.9 Objective: <u>I</u> Maintain a resilient, disas		
	AAA Strategies		
1.	Coastal AAA will participate in the Emergency Preparedness Se		
2.	Coastal AAA will offer technical assistance to our service provi	iders on the development of Emergency Preparedness Plans.	
3.			
	Measure	Baseline: SFY 2019 Due 3/1/2020 – Update for SFY 2019:	
1.	Implement an Emergency Preparedness Summit with the AAAs by 2023.	SFY 2019 Baseline: Coastal AAA provided training on the Special Needs Registry to our provider network during SFY2019.	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	Implement an Emergency Preparedness Summit with the AAAs by 2023.	Coastal AAA has no new data to report regarding this goal.	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	Implement an Emergency Preparedness Summit with the AAAs by 2023.	DAS held an EP Summit June 8 and 9, 2021. Goal Met.	
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	Implement an Emergency Preparedness Summit with the AAAs by 2023.		
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	Implement an Emergency Preparedness Summit with the AAAs by 2023.		
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	Implement an Emergency Preparedness Summit with the AAAs by 2023.		
		#22	

## Item #13 – Goal #4 Objectives and Measures Charts

<u>Goal #4:</u> Prevent abuse, neglect and exploitation while protecting the rights of older Georgians and persons with disabilities.

AAA #4.4 Objective: Elderly Legal Assistance Program (ELAP)

Target the substantive core legal priority areas that Older Georgians will have access to for an adequate supply of quality publicly funded legal services to address their eligibility for and receipt of benefits, housing, health insurance, health care, advance planning and protection from consumer fraud and abuse.

	AAA Strategies		
1.	Coastal AAA will continue to partner with Georgia Legal Services to operate an Elder Legal Assistance Program.		
2.	Coastal ADRC will continue to refer older adults to GLS for lega	al services for noncriminal cases.	
3.	Coastal AAA will continue to conduct outreach for ELAP.		
		Baseline: SFY 2018	
	Measure	Due 3/1/2020 – Update for SFY 2019:	
1.	The number of cases successfully handled as listed in the	SFY 2018 Baseline:	
	Objective will increase by 3% over the 2018 baseline during each	SFY 2018 baseline: 363	
	successive fiscal year.	SFY 2019 baseline: 493 - 35.8% Goal exceeded!	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	The number of cases successfully handled as listed in the	SFY 2018 baseline: 363	
	Objective will increase by 3% over the 2018 baseline during each	SFY 2020 baseline: 496 - 36.6% Goal exceeded!	
	successive fiscal year.		
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	The number of cases successfully handled as listed in the	SFY 2018 baseline: 363	
	Objective will increase by 3% over the 2018 baseline during each	SFY 2021 results 495 - 36.3% Goal Exceeded.	
	successive fiscal year.		
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	The number of cases successfully handled as listed in the		
	Objective will increase by 3% over the 2018 baseline during each		
	successive fiscal year.		
	Measure	Due 3/1/2024 – Update for SFY 2023:	

## AAA #4.4 Objective: Elderly Legal Assistance Program (ELAP)

Target the substantive core legal priority areas that Older Georgians will have access to for an adequate supply of quality publicly funded legal services to address their eligibility for and receipt of benefits, housing, health insurance, health care, advance planning and protection from consumer fraud and abuse.

1.	The number of cases successfully handled as listed in the Objective will increase by 3% over the 2018 baseline during each successive fiscal year.	
1.	MeasureThe number of cases successfully handled as listed in the Objective will increase by 3% over the 2018 baseline during each successive fiscal year.	Due 3/1/2025 – Update for SFY 2024:
		#23

## Item #14 – Goal #5 Objectives and Measures Charts

# <u>Goal #5:</u> Utilize continuous quality improvement principles to ensure the State Unit on Aging operates efficiently and effectively.

	AAA #5.1 Objective: Aging & Disability Resource Connection (ADRC) Monitor the integrity of the data captured by ADRC Staff.		
		Strategies	
1.	Coastal AAA ADRC Program Manager runs the missing data el	ements report monthly for review and clean up.	
2. 3.			
3.	Measure	Baseline: SFY 2018 Due 3/1/2020 – Update for SFY 2019:	
1.	Achieve and maintain a 90% accuracy rate on data collection for key demographic data elements annually.	<ul> <li>SFY 2018 Baseline: YTD Coastal ADRC is at 73% compliance, with 98 of our 362 records missing at least one data element.</li> <li>Until the DAS has developed appropriate reporting mechanisms and trained the AAA network on how to use these reports to establish a baseline and track progress towards monitoring the integrity of the data captured by ADRC staff, please postpone responding to <u>AAA</u> <u>Objective #5.1.</u> until further notice. (Date: 7-8-2020)</li> </ul>	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	Achieve and maintain a 90% accuracy rate on data collection for key demographic data elements annually.	Until the DAS has developed appropriate reporting mechanisms and trained the AAA network on how to use these reports to establish a baseline and track progress towards monitoring the integrity of the data captured by ADRC staff, please postpone responding to <u>AAA</u> <u>Objective #5.1.</u> until further notice. (Date: 7-8-2020 & Updated Date: 2/26/2021)	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	Achieve and maintain a 90% accuracy rate on data collection for key demographic data elements annually.	Until DAS has developed appropriate reporting mechanisms and trained the AAA network on how to use these reports to establish	

	AAA #5.1 Objective: Aging & Disability Resource Connection (ADRC) Monitor the integrity of the data captured by ADRC Staff.		
		a baseline and track progress towards monitoring the integrity of the data captured by ADRC staff, please postpone responding to <u>AAA Objective #5.1.</u> until further notice. (Date: 7-8-2020 & Updated Date: 2/21/2022) HAR ADRC Missing Data Elements report run on 9/12/2022 shows 1 of 503 records contains missing data. 99.8% compliance.	
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	Achieve and maintain a 90% accuracy rate on data collection for key demographic data elements annually.		
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	Achieve and maintain a 90% accuracy rate on data collection for key demographic data elements annually.		
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	Achieve and maintain a 90% accuracy rate on data collection for key demographic data elements annually.		
	· · · · ·	#24	

	AAA #5.3 Objective: <u>Administration (ADMIN)</u> Provide Baldridge training to all DAS staff.		
	AAA Strategies		
1.	Coastal AAA will attend any DAS hosted trainings.		
2.	Coastal AAA sets goals consistent with those in the DAS states		
3.	Coastal AAA gathers customer feedback through satisfaction s		
	Measure	Baseline: SFY 2019 Due 3/1/2020 – Update for SFY 2019:	
1.	Ensure 80% of staff receives quality/process improvement training by 2024.	SFY 2019 Baseline: Coastal AAA participated in one leadership training hosted by DAS during SFY2019 (DISC).	
	Measure	Due 3/1/2021 – Update for SFY 2020:	
1.	Ensure 80% of staff receives quality/process improvement training by 2024.	Coastal AAA has no new data to report regarding this goal.	
	Measure	Due 3/1/2022 – Update for SFY 2021:	
1.	Ensure 80% of staff receives quality/process improvement training by 2024.	This goal appears to apply exclusively to DAS Staff. Coastal AAA staff have participated in the DAS 101 Orientation and will continue to participate in any DAS mandated or recommended training.	
	Measure	Due 3/1/2023- Update for SFY 2022:	
1.	Ensure 80% of staff receives quality/process improvement training by 2024.		
	Measure	Due 3/1/2024 – Update for SFY 2023:	
1.	Ensure 80% of staff receives quality/process improvement training by 2024.	•	
	Measure	Due 3/1/2025 – Update for SFY 2024:	
1.	Ensure 80% of staff receives quality/process improvement training by 2024.		
		#25	

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# AAA #5.4 Objective: <u>Administration (ADMIN)</u> Eliminate Nulls from the NAPIS Reports.

**AAA Strategies** Coastal AAA reviews NAPIS data on a regular basis and as reports are provided by DAS. Coastal AAA is conducting quarterly desk reviews for data validation and clean up. 1. 2. 3

3.		·
		Baseline: SFY 2019
	Measure	Due 3/1/2020 – Update for SFY 2019:
1.	Decrease number of missing data elements to less than 5%	SFY 2019 Baseline:
	annually.	During SFY2019, approximately 899 of our 2,423 client records for
		registered clients are missing at least one data element, 37%.
	Measure	Due 3/1/2021 – Update for SFY 2020:
1.	Decrease number of missing data elements to less than 5%	During SFY2020, approximately 1416 of our 2,770 client records for
	annually.	registered clients are missing at least one data element, 51%.
	Measure	Due 3/1/2022 – Update for SFY 2021:
1.	Decrease number of missing data elements to less than 5%	During SFY2021, approximately 623 of our 2,325 client records for
	annually.	registered clients are missing at least one data element, 27%.
	Measure	Due 3/1/2023- Update for SFY 2022:
1.	Decrease number of missing data elements to less than 5%	
	annually.	
	Measure	Due 3/1/2024 – Update for SFY 2023:
1.	Decrease number of missing data elements to less than 5%	
	annually.	
	Measure	Due 3/1/2025 – Update for SFY 2024:
1.	Decrease number of missing data elements to less than 5%	
	annually.	
		#26

## AREA PLAN COMPLIANCE DOCUMENTS ATTACHMENTS

## **ATTACHMENT A: Agency Indirect Cost Allocation Plan**

## **ATTACHMENTS B:**

- B-1a GA DHS DAS Request for Advance Payments Against Contracts Letter\*
- B-1b GA DHS DAS Request for Advance Letter
- B-1c Request for Advance Worksheet
- B-2 Letter of Fidelity/Assurance Bond Coverage
- B-3 Board Resolution\*
- B-4 Standard Assurances\*
- B-5 Letter(s) Requesting a Waiver of Standard Assurances\*

## ATTACHMENT C - TITLE III FEDERAL ALLOCATION AND MATCH ANALYSIS (Excel)

## ATTACHMENT D - AREA PLAN PROVIDER SITE LIST

## Attachment A - SFY 2023 Agency Indirect Cost Allocation Plan

(<u>Note</u>: If the SFY 2023 Agency Indirect Cost Allocation Plan is unavailable at Area Plan submission, document below when the SFY 2023 Agency Indirect Cost Allocation Plan is anticipated to be approved and available for submission to the DAS.)

## The SFY 2023 Agency Indirect Cost Allocation Plan was approved and is attached below



## United States Department of the Interior

OFFICE OF THE SECRETARY Washington, DC 20240

October 20, 2022

Lena Geiger, Finance Director Coastal Regional Commission 1181 Coastal Drive SW Darien, GA 31305

Re: Indirect Cost Rate Certificate

Lena Geiger:

With this letter, the Interior Business Center (IBC), on behalf of the Economic Development Administration (EDA), a component of the Department of Commerce and your cognizant agency, acknowledges receipt of your Certificate of Indirect Costs for FY 2023 dated October 20, 2022. As a unit of state or local government that receives less than \$35 million in annual cumulative direct Federal funding, you are not required to submit an indirect cost rate proposal to EDA and, consequently, EDA will not review your submission at this time. For more information on this requirement, see 2 C.F.R. part 200, App. VII §D.1.b.

Your organization is required to develop an indirect cost rate proposal or cost allocation plan in accordance with 2 C.F.R. part 200 and retain it with related supporting documentation for audit. For more information on this requirement, see 2 C.F.R. part 200, App. VII §D.1.b. and 2 C.F.R. §200.333. EDA reserves the right to review this or future indirect cost rate proposals at a later time to ensure conformity with the requirements of 2 C.F.R. part 200. Typically, EDA will exercise this right if there is a relevant audit finding, a concern is raised by another government agency concerning a particular indirect cost rate, and/or if EDA finds an anomaly in an indirect cost rate proposal. In such circumstances EDA may review such an indirect cost rate proposal itself or through another Federal agency.

IBC is a shared service provider operating under the Department of the Interior. EDA has entered into an agreement with IBC to review and process Certificates of Indirect Costs on their behalf. EDA remains your cognizant agency and this letter, although issued from IBC, is EDA's acknowledgment of receipt.

Please contact IBC if you have any questions or concerns.

Sincerely,

craig s. wills

Craig A. Wills Indirect Cost & Contract Audit Division Chief

Enclosure: Certificate of Indirect Costs

Phone: (916) 930-3803 Fax: (916) 930-3804 Email: EDA\_Indirect@ibc.doi.gov Website: https://ibc.doi.gov/ICS/icma

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### U.S. Department of Commerce, Economic Development Administration

1401 Constitution Avenue, NW Washington, DC 20230

## CERTIFICATE OF INDIRECT COSTS

This is to certify that I have reviewed the indirect cost rate proposal prepared and maintained herewith and to the best of my knowledge and belief:

(1) All costs included in this proposal dated <u>10/20/2022</u> [identify date indirect cost rate proposal was finalized] to establish indirect costs rate(s) for <u>July 1, 2022 - June 30, 2023</u> [identify start/end dates for the fiscal year covered by the indirect cost rate] are allowable in accordance with the requirements of the Federal award(s) to which they apply and OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (codified at 2 C.F.R. Part 200) Unallowable costs have been adjusted for in allocating costs as indicated in the cost allocation plan.

(2) All costs included in this proposal are properly allocable to Federal awards on the basis of a beneficial or causal relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. Similar types of costs have been accounted for consistently and the Federal Government will be notified of any accounting changes that would affect the predetermined rate.

(3) The indirect cost rate calculated within the proposal is 28.29 % [identify rate(s)], which was calculated using a direct cost base type of salaries & fringe [identify type of direct cost base – Salary & Fringe, MTDC, etc.]. The calculations were based on actual costs from fiscal year 2022 to obtain a federal indirect cost billing rate for fiscal year 2023

(4) All documentation supporting the indirect cost rate identified above must be retained by the Recipient. This rate should be reviewed and validated as part of the Recipient's annual financial audit.

Subject to the provisions of the Program Fraud Civil Remedies Act of 1986, (31 USC 3801 et seq.), the False Claims Act (18 USC 287 and 31 USC 3729); and the False Statement Act (18 USC 1001), I declare to the best of my knowledge that the foregoing is true and correct.

Organization Name: Coastal Regional Commission
Signature: Kinch Chan
Name of Authorized Official: Lena Geiger
Title: Finance Director
Email Address and Phone: lgeiger@crc.ga.gov 912.514.1604
Date of Execution: 10/20/22

## DELETED EFFECTIVE SFY 2022

In accordance with the memorandum dated August 20, 2020, from Abby G. Cox, Director, Division of Aging Services, Advance Funding is Discontinued.

## ATTACHMENT B-1a – GA DHS DAS REQUEST FOR ADVANCE PAYMENTS AGAINST CONTRACTS LETTER

## ATTACHMENT B-1b – GA DHS DAS REQUEST FOR ADVANCE LETTER

#### ATTACHMENT B-1c - REQUEST FOR ADVANCE WORKSHEET

## ATTACHMENT B-2 – LETTER OF FIDELITY/ASSURANCE BOND COVERAGE

(Reference Area Plan Instructions Document and Contract for bond and coverage requirements. Bonding Agency signature is required.)

[Insert coverage document after this page.]

#### ATTACHMENTS



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/1/2022

1		-1		ICATE OF LIA	DILI	111100		<b>-</b>	9/	1/2022	
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.											
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on											
this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).  PRODUCER  CONTACT Reth Luborterei											
	bucer hur J. Gallagher Risk Management 3	Serv	ices	Inc.	NAME: Beth Lubertozzi						
285	50 Golf Road				PHONE FAX (A/C, No. Ext): 630-694-5058 (A/C, No): 630-285-3922						
Rol	lling Meadows IL 60008			E-MAIL ADDREss: beth_lubertozzi@ajg.com							
					INSURER(8) AFFORDING COVERAGE					NAIC #	
				HAHHOLD-01	INSURER A : Greenwich Insurance Company					22322	
INSU HA	RED H Holdings, LLC		NAROLUNI	INSURER B : XL Insurance America, Inc.					24554		
	S State Street, 5th Floor				INSURER C : Ironshore Specialty Insurance Co					25445	
Chicago, IL 60603						INSURER D : National Fire & Marine Insurance Co				20079	
					INSURER E : American Empire Surplus Lines Insurance Co				npany	35351	
					INSURER F :						
_				NUMBER: 2077067876			REVISION NUMBER:				
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.											
NSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	18		
С	X COMMERCIAL GENERAL LIABILITY	Y	N	HC7AACIPQU001		4/30/2022	4/30/2023	EACH OCCURRENCE	\$ 1,000	,000,	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000	,000	
								MED EXP (Any one person)	\$ 20,000		
								PERSONAL & ADV INJURY	\$ 1,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 3,000	,000	
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 3,000	,000	
	OTHER:							Retention	\$ 250,000		
٨	AUTOMOBILE LIABILITY	Ν	Ν	RAD943793104		9/1/2022	9/1/2023	COMBINED SINGLE LIMIT (Ea accident)	\$2,000	,000	
	ANY AUTO							BODILY INJURY (Per person)	\$		
	X OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
	X HIRED NON-OWNED AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
									\$		
CD	X UMBRELLA LIAB X OCCUR	N	N	HC7AAB850C002 EN032637		4/30/2022 4/30/2022	4/30/2023 4/30/2023	EACH OCCURRENCE	\$ 10,000,000		
E	X EXCESS LIAB CLAIMS-MADE			XS E841294		4/30/2022	4/30/2023	AGGREGATE	\$ 10,000,000		
	DED RETENTION \$							SEE BELOW FOR	\$ EXCESS LAYERS		
в	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		N	RWD300092507		9/1/2022	9/1/2023	X PER OTH- STATUTE ER			
	ANYPROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	ş 1,000,000		
	(Mandatory In NH)							E.L. DISEASE - EA EMPLOYEE	\$1,000	,000,	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$1,000		
ĉ	Non-Owned Auto Professional Liability			RAE943774707 HC7AACIPQU001		9/1/2022 4/30/2022	9/1/2023 4/30/2023	\$1,750,000 Limit \$1,000,000 each Occ		000 Retention 0,000 Aggr	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Soledule, may be attached if more space is required) Additional Named Insureds: HAH Holdings LLC, HAH Intermediate LLC, HAH Group Holding Company LLC, Help at Home, LLC, Help at Home of Delaware, LLC, Statewide Healthcare Services, LLC, Adaptive Hospice, LLC, Adaptive Companion Care Services, LLC, Adaptive Nursing and Healthcare Services, LLC, Excel Companion Care, LLC, Altrus LLC, Coastal Home Care LLC, Community Care Systems, LLC, HAH of Ohio LLC, Help at Home of Michigan, LLC, RC Family Healthcare II, LLC, OS HHC Inc., Prime Home Care, LLC, Prime HHA, LLC, E3 Care Givers, LLC, E3 Case Managers, LLC, Consulting Unlimited, Inc., Case Management IT Solutions, LLC, Care Givers at Home, Inc., Prime Homecare Midway Inc., RiteChoice Healthcare Services, LLC, NAE Edison LLC, DBA Edison Home Health Care, Assistcare Home Health Services, LLC, DBA Preferred Home Care of New York, Answer Care LLC, Universal Medical Staffing, LLC d/b/a Alliance Home Health Care Services, Preferred Nurse Registry Holdings, LLC, Preferred Nurse Registry of Florida, LLC , A+ Quality Home Health Care Inc., Preferred Home Care of Florida, LLC, Home HealthCare Authority, Inc. See Attached											
	RTIFICATE HOLDER				CANC	ELLATION					
CER					CANC	LEATION					
	Coastal Regional Commiss 2141 WEST WHITE OAKS 1181 Coastal Drive, SW			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
	Darien GA 31305 USA			@ 1988-2015 ACORD CORPORATION. All rights reserved.							
						© 19	88-2015 AC	OKD CORPORATION.	All righ	its reserved.	

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LOC #:	

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ACORD <sup>®</sup> ADDITIONAL	. REMA	RKS SCHEDULE Page 1 of 1				
AGENCY Arthur J. Gallagher Risk Management Services, Inc. POLICY NUMBER	NAMED INSURED HAH Holdings, LLC 33 S State Street, 5th Floor Chicago, IL 60803					
CARRIER	NAIC CODE					
ADDITIONAL REMARKS		EFFECTIVE DATE:				
		ISURANCE				
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,						

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## ATTACHMENT B-3 – BOARD RESOLUTION

[Insert Resolution after this Page.]

## Resolution

**Whereas**, Federal law and the Georgia Department of Human Services/Division of Aging Services rules require each Area Agency on Aging to prepare an Area Plan for Aging Services for FY 2021-2024; and

**Whereas**, the document known as the Area Plan for Aging Services of Coastal Georgia FY 2021-2024 was submitted to the Coastal Area Agency on Aging Advisory Council for review and comment on January 25, 2022; and

**Whereas**, the Georgia Department of Human Services/Division of Aging Services requires that the document be presented to the CRC Council for final adoption;

**Dow therefore, be it resolved,** that the Coastal Regional Commission Council agrees to enter a written contract with the Georgia Department of Human Services, for the provision of services for the period beginning July 1, 2022 and ending June 30, 2023.

**And the** CRC Council Chairman and Executive Director are duly authorized to execute said contract on behalf of this entity.

Adopted this 9th day of February, 2022.



By:

Rosa Romeo, CRC Vice Chairman

Attest:

Chrishonda Grant, Notary Public



#### STANDARD ASSURANCES - OLDER AMERICANS ACT (OAA) Public Law 89-73, 42 U.S.C.A. § 3001, et seq., as amended

#### I) ORGANIZATIONAL ASSURANCES

#### 1. SEPARATE ORGANIZATIONAL UNIT

If the Area Agency on Aging has responsibilities which go beyond programs for the elderly, a separate organizational unit within the agency has been created which functions only for the purposes of serving as the Area Agency on Aging.

#### 2. FULL TIME DIRECTOR

The Area Agency or the separate organizational unit which functions only for the purposes of serving as the Area Agency on Aging is headed by an individual qualified by education or experience, working full-time solely on Area Agency on Aging functions and Area Plan management.

#### II) AREA AGENCY MANAGEMENT COMPLIANCE ASSURANCES

#### 3. EQUAL EMPLOYMENT OPPORTUNITY (5CFR Part 900, Subpart F)

The Area Agency assures fair treatment of applicants and employees in all aspects of personnel administration without regard to political affiliation, race, color, national origin, sex, religious creed, age or handicap and with proper regard for their privacy and constitutional rights as citizens. This "fair treatment" principle includes compliance with the Federal equal employment opportunity and nondiscrimination laws. These include Title VII of the Civil Rights Act of 1964, the Equal Pay Act of 1963, the Age Discrimination in Employment Act of 1967, the Rehabilitation Act of 1973, the Americans with Disabilities Act, and other relevant laws.

#### 4. <u>EMERGENCY MANAGEMENT PLAN</u>

The Area Agency has assigned primary responsibility for Emergency Management planning to a staff member; the Area Emergency Management Plan which was developed in accordance with the Georgia Department of Human Resources Division of Aging Services (now the Georgia Department of Human Services, and hereafter Division of Aging Services) memorandum of February 9, 1979 shall be reviewed at least annually and is revised as necessary. The Area Agency also assures cooperation subject to client need in the use of any facility, equipment, or resources owned or operated by the Department of Human Services which may be required in the event of a declared emergency or disaster.

As in Sec. 306(a)(16) or (17), the Area Agency shall include information detailing how the Area Agency on aging will coordinate activities, and develop long-range emergency response plans with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for relief service delivery.

#### 5. DIRECT PROVISION OF SOCIAL SERVICES

No Title III supportive services, nutrition services, or in-home services are being directly provided by the Area Agency except where provision of such services by the Area Agency has been determined by the Division of Aging Services to be necessary in assuring an adequate supply of such services; or where services are directly related to the AAA administrative functions; or where services of comparable quality can be provided more economically by the Area Agency.

#### 6. REVIEW BY ADVISORY COUNCIL

The Area Agency has provided the Area Agency Advisory Council the opportunity to review and comment on the Area Plan and operations conducted under the plan.

#### 7. ATTENDANCE AT STATE TRAINING

The Area Agency assures that it will send appropriate staff to those training sessions required by the Division of Aging Services.

#### 8. PROPOSAL FOR PROGRAM DEVELOPMENT AND COORDINATION

The Area Agency has submitted the details of its proposals to pay for program development and coordination as a cost of supportive services to the general public (including government officials, and the aging services network) for review and comment. The Area Agency has budgeted its total allotment for Area Plan Administration before budgeting Title III-B funds for Program Development in accordance with <u>45 CFR 1321.17(14)</u>.

#### 9. <u>COMPETITIVE PROCESS FOR NUTRITION PROVIDERS, SUPPORTIVE SERVICES</u> <u>PROVIDERS, AND FOOD VENDORS</u>

a) Nutrition providers and supportive service providers will be selected through competitive negotiations or a Request for Proposal process. Documentation will be maintained in the Area Agency files.

b) Nutrition service providers who have a central kitchen or who prepare food on- site must obtain all food and supplies through appropriate procurement procedures, as specified by the Division of Aging Services.

c) Food vendors will be selected through a competitive sealed bid process.

d) Nutrition service providers who have a central kitchen or who prepare meals on-site must develop a food service proposal.

e) Copies of all Requests for Proposals and bid specifications will be maintained at the Area Agency for review.

#### 10. <u>REPORTING</u>

The Area Agency assures that it will maintain required data on the services included in the Area Plan and report such data to the Division of Aging Services in the form and format requested.

#### 11. NO CONFLICT OF INTEREST

No officer, employee, or other representative of the Area Agency on Aging is subject to a conflict of interest prohibited under this Act; and mechanisms are in place at the Area Agency on Aging to indentify and remove conflicts of interest prohibited under this Act.

#### **III) SERVICE PROVISION ASSURANCES**

## 12. MEANS TEST

No Title III service provider uses a means test to deny or limit receipt of Title III services under the Area Plan.

## 13. EQUAL EMPLOYMENT OPPORTUNITY BY SERVICE PROVIDERS

The Area Agency assures that service providers provide fair treatment of applicants and employees in all aspects of personnel administration without regard to political affiliation, race, color, national origin, sex, religious creed, age or handicap and with proper regard for their privacy and constitutional rights as citizens. This "fair treatment" principle includes compliance with the Federal equal employment opportunity and nondiscrimination laws. These include Title VII of the Civil Rights Act of 1964, the Equal Pay Act of 1963, the Age Discrimination in Employment Act of 1967, the Rehabilitation Act of 1973, the Americans with Disabilities Act, and other relevant laws.

## 14. <u>STANDARDS/GUIDELINES/POLICIES AND PROCEDURES</u>

The Area Agency and all service providers will comply with all applicable Georgia Department of Human Services Division of Aging Services standards, guidelines, policies, and procedures.

NOTE: No additional waiver of the Multi-Purpose Senior Center (MPSC) Standards is necessary IF the Area Agency has previously obtained such a waiver AND there have been no changes since the submission of the waiver request.

## 15. SPECIAL MEALS

Each nutrition program funded under the Area Plan is providing special meals, where feasible and appropriate, to meet the particular dietary needs, arising from the health requirements, religious requirements, or ethnic backgrounds of eligible individuals.

## 16. <u>CONTRIBUTIONS</u>

Older persons are provided an opportunity to voluntarily contribute to part or all of the cost of Title III services received under the Area Plan, in accordance with procedures established by the Division of Aging Services. Title III services are not denied based on failure to contribute.

The area agency on aging shall ensure that each service provider will-

(A) provide each recipient with an opportunity to voluntarily contribute to the cost of the service;

(B) clearly inform each recipient that there is no obligation to contribute and that the contribution is purely voluntary;

(C) protect the privacy and confidentiality of each recipient with respect to the recipient's contribution or lack of contribution;

(D) establish appropriate procedures to safeguard and account for all contributions; and

(E) use all collected contributions to expand the service for which the contributions were given and to supplement (not supplant) funds received under this Act.

Voluntary contributions shall be allowed and may be solicited for all services for which funds are received under this Act if the method of solicitation is not coercive. Such contributions shall be encouraged for individuals whose self-declared income is at or above 185 percent of the poverty line, at contribution levels based on the actual cost of services.

## 17. PERSONNEL POLICIES

Written personnel policies affecting Area Agency and service provider staff have been developed to include, but are not limited to, written job descriptions for each position; evaluation of job performance; annual leave; sick leave; holiday schedules; normal working hours; and compensatory time.

## 18. <u>COORDINATION WITH TITLE V NATIONAL SPONSORS</u>

The Area Agency will meet at least annually with the representatives of Title V Older American Community Service Employment Program (formerly SCSEP) sponsors operating within their Planning and Service Areas (PSAs) to discuss equitable distribution of enrollee positions within the PSA and coordinate activities as appropriate.

## 19. PREFERENCE IN PROVIDING SERVICES

The Area Agency on Aging provides assurance that preference will be given to services to older individuals with the greatest economic need and older individuals with the greatest social need, (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the Area Plan. [Section 305 (a) (2) (E)]

## IV) TITLE III, PART A ASSURANCES

The Area Agency on Aging assures that it shall --

**20.** Sec. 306(a)(2) - provide assurances 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-

(A) services associated with access to services (transportation, health services (including mental health services), 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 publicly supported programs for which the consumer may be eligible) and case management services);

(B) 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

(C) legal assistance; and assurances that the Area Agency on Aging 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.

#### 21. Sec. 306(a)(4)(A)(i)(I) - provide assurances that the Area Agency on Aging will—

(aa) 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;

(bb) 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; and (II) include proposed methods to achieve the objectives described in items (aa) and (bb) of sub clause (I);

**22.** Sec. 306(a)(4)(A)(ii) provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—

(I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;

(II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and

(III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and

**23.** Sec. 306(a)(4)(A)(iii) - With respect to the fiscal year preceding the fiscal year for which such plan is prepared, the Area Agency on Aging shall—

(I) identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

**24.** Sec. 306(a)(4)(B)(i) - provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on—

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

(VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and

(VII) older individuals at risk for institutional placement; and

(ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance;

**25.** Sec. 306(a)(4)(C) - provide assurance that the Area Agency on Aging will ensure 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.

**26.** Sec. 306(a)(5) provide assurances that the Area Agency on Aging 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.

**27.** Sec. 306(a)(6)(A) - take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan;

**28.** Sec. 306(a)(6)(B) -serve as the advocate and focal point for older individuals within the community by (in cooperation with agencies, organizations, and individuals participating in activities under the plan) monitoring, evaluating, and commenting upon all policies, programs, hearings, levies, and community actions which will affect older individuals;

**29.** Sec. 306(a)(6)(C)(i) – enter, where possible, into arrangements with organizations providing day care services for children, assistance to older individuals caring for relatives who are children and respite for families, so as to provide opportunities for older individuals to aid or assist on a voluntary basis in the delivery of such services to children, adults, and families;

(ii) if possible, regarding the provision of services under this title, enter into arrangements and coordinate with organizations that have a proven record of providing services to older individuals, that-

(I) were officially designated as community action agencies or community action programs under section 210 of the Economic Opportunity Act of 1964 (42 U.S.C. 2790) for fiscal year 1981, and did not lose the designation as a result of failure to comply with such Act; or

(II) came into existence during fiscal year 1982 as direct successors in interest to such community action agencies or community action programs; and that meet the requirements under section 675(c)(3) of the Community Services Block Grant Act (42 U.S.C. 9904(c)(3)); and

#### ATTACHMENTS

**30**. Sec. 306(a)(6)(C)(iii) - make use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing such services and, if 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;

**31.** Sec. 306(a)(6)(D) – establish and maintain an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of the business community, local elected officials, providers of veterans' health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan;

**32.** Sec. 306(a)(6)(F) – The Area Agency on Aging will in coordination with the State Agency on Aging (Georgia Department of Human Services Division of Aging Services) and the State agency responsible for mental health services (Georgia Department of Behavioral Health and Developmental Disabilities), 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 with the mental health services provided by community health centers and by other public agencies and nonprofit private organizations;

**33.** Sec. 306(a)(7) - provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by –

(A) 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;

(B) conducting analyses and making recommendations with respect to strategies for modifying the local system of long-term care to better –

(i) respond to the needs and preferences of older individuals and family caregivers;

(ii) facilitate the provision, by service providers, of long-term care in home and community-based settings; and

(iii) target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings;

(C) implementing, through the agency or service providers, evidenced-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

(D) providing for the availability and distribution (through public education campaigns, Aging and Disability Resource Centers, the area agency on aging itself, and other appropriate means) of information related to –

(i) the need to 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.

**34.** Sec. 306(a)(8) that case management services provided under this title through the area agency on aging will -

(A) not duplicate case management services provided through other Federal and State programs;

(B) be coordinated with services described in subparagraph (A); and

(C) be provided by a public agency or a nonprofit private agency that -

(i) gives each older individual seeking service under this subchapter a list of agencies that provide similar services within the jurisdiction of the area agency on aging;

(ii) gives each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipt by such individual of such statement;

(iii) has case managers acting as agents for the individuals receiving services and not as promoters for the agency providing such services; or

(iv) is located in a rural area and obtains a waiver of the requirement described in clauses (i) through (iii); and

(v) is not located, does not provide, and does not have a direct or indirect ownership or controlling interest in, or a direct or indirect affiliation or relationship with, an entity that provides, services other than case management services under this title.

**35.** Sec. 306(a)(10) establish a grievance procedure for older individuals who are dissatisfied with or denied services under this subchapter;

**36.** Sec. 306(a)(11) – provide information and assurances by the Area Agency on Aging concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including-

(A) 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 will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title; (B) an assurance that the Area Agency on Aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) an assurance that the Area Agency on Aging 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.

**37.** Sec. 306(a)(13)(A) - provide assurances that the Area Agency on Aging will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

**38.** Sec. 306(a)(13)(B) - provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State Agency—

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship.

**39.** Sec. 306(a)(13)(C) - provide assurances that the Area Agency 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.

**40.** Sec. 306(a)(13)(D) - provide assurances that the Area Agency 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.

**41.** Sec. 306(a)(13)(E) - shall provide assurances that the Area Agency will, on the 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.

**42.** Sec. 306(a)(14) -. provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

**43.** Sec. 307(a)(15)(A) - 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 (4)(A)(i); and

**44.** Sec. 307(a)(15)(B) – provide assurances that funds received under this title will be used in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212 (42 U.S.C.A. § 3020c);

#### ATTACHMENTS

**45.** Sec. 306(a)(16) provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care;

**46.** Conduct annual evaluations of, and *public hearings* on, activities carried out under the area plan and an annual evaluation of the effectiveness of outreach conducted under paragraph (5) (B);

**47**. Furnish appropriate technical assistance and timely information in a timely manner, to providers of supportive services, nutrition services, or multipurpose senior centers in the planning and service area covered by the area plan;

**48**. Sec. 306(a)(6)(C)(A) take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan;

**49.** Develop and publish methods by which priority of services is determined, particularly with respect to the delivery of services under paragraph (2);

50. Establish effective and efficient procedures for coordination of -

(I) entities conducting programs that receive assistance under this Act within the planning and service area served by the agency; and

(ii) entities conducting other Federal programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b), within the area;

**51**. Identify the public and private nonprofit entities involved in the prevention, identification, and treatment of the abuse, neglect, and exploitation of older individuals, and based on such identification, determine the extent to which the need for appropriate services for such individuals is unmet;

**52**. Compile available information on institutions of higher education in the planning and service area regarding-

(I) the courses of study offered to older individuals by such institutions; and

(II) the policies of such institutions with respect to the enrollment of older individuals with little or no payment tuition, on a space available basis, or on another special basis;

(III) include in such compilation such related supplementary information as may be necessary; and

(IV) based on the results of such compilation, make a summary of such information available to older individuals at multipurpose senior centers, congregate nutrition sites, and other appropriate places;

#### ATTACHMENTS

**53.** Sec. 306(a)(6)(Q) enter into voluntary arrangements with nonprofit entities (including public and private housing authorities and organizations) that provide housing (such as housing under section 202 of the Housing Act of 1959 (12 U.S.C. 1701Q) to older individuals, to provide-

(I) leadership and coordination in the development, provision, and expansion of adequate housing, supportive services, referrals, and living arrangements for older individuals; and

(ii) advance notification and non-financial assistance to older individuals who are subject to eviction from such housing;

**54.** List the telephone number of the agency in such telephone directory that is published, by the provider of local telephone service, for residents in any geographical area that lies in whole or in part in the service and planning area served by the agency -

(I) under the name "Area Agency on Aging";

(ii) in the unclassified section of the directory; and

(iii) to the extent possible, in the classified section of the directory, under a subject heading designated by the Commissioner by regulation; and

**55.** Identify the needs of older individuals and describe methods the area agency on aging will use to coordinate planning and delivery of transportation services (including the purchase of vehicles) to assist older individuals, including those with special needs, in the area;

**56.** Provide assurances that any amount received under part E will be expended in accordance with such part;

**57.** Provide assurances that any amount received under part F will be expended in accordance with such part;

**58**. Provide assurances that any amount received under part G will be expended in accordance with such part;

**59.** In the discretion of the area agency on aging, provide for an area volunteer services coordinator, who shall -

(A) encourage, and enlist the services of, local volunteer groups to provide assistance and services appropriate to the unique needs of older individuals within the planning and services area; and

(B) encourage, organize, and promote the use of older individuals as volunteers to local communities within the area; and

(C) promote the recognition of the contribution made by volunteers to programs administered under the area plan;

(D) assure that the activities conform with -

(i) the responsibilities of the area agency on aging, as set forth in this subsection; and

(ii) the laws, regulations, and policies of the State served by the area agency on aging;

**60.** Projects in the planning and service area will reasonably accommodate participants as described in the Act'

**61**. Before an Area Agency on Aging requests a waiver under paragraph (1) of this subsection, the Area Agency shall conduct a timely public hearing in accordance with the provisions of this paragraph. The Area Agency on Aging requesting a waiver shall notify all interested parties in the area of public hearing and furnish the interested parties with an opportunity to testify.

**62.** The Area Agency on Aging shall prepare a record of the public hearing conducted pursuant to Section 306(b)(2)(A) and shall furnish the record of public hearing with the request for a waiver made to the State under paragraph (1).

**63.** Provide that the Area Agency on Aging will facilitate the coordination of community-based, long-term care services, pursuant to section 306(a)(7), for older individuals who -- --

- (A) Reside at home and are at risk of institutionalization because of limitations on their ability to function independently;
- (B) Are patients in hospitals and are at risk of prolonged institutionalization; or
- (C) Are patients of long-term care facilities, but who can return to their homes in communitybased options are provided to them.

**64.** Provide that the Area Agency on Aging will facilitate coordination of community-based, long-term care services designed to enable older individuals to remain in their homes, by means including –

(A) development of case management services as a component of the long-term care services, consistent with the requirements of paragraph (64);

(B) involvement of long-term care providers in the coordination of such services; and

(C) increasing community awareness of and involvement in addressing the needs of residents of long-term care facilities;

**65.** Provide that case management services provided under this title through the area agency on aging will--

(A) not duplicate case management services provided through other Federal and State programs;

- (B) be coordinated with services described in subparagraph (A); and
- (C) be provided by a public agency or a nonprofit private agency that--
  - (i) gives each older individual seeking services under this title a list of agencies that provide similar services within the jurisdiction of the area agency on aging;
  - gives each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipt by such individual of such statement;
  - (iii) has case managers acting as agents for the individuals receiving the services and

not as promoters for the agency providing such services; or

(iv) is located in a rural area and obtains a waiver of the requirements described in clauses (i) through (iii);

**66.** Provide that the Area Agency on Aging will establish procedures for coordination of services with entities conducting other Federal or federally assisted programs for older individuals at the local level, with particular emphasis on entities conducting programs described in Section 203(b) within the planning and service area.

**67.** Provide that the Area Agency on Aging, with respect to the needs of older individuals with severe disabilities, will coordinate planning, identification, assessment of needs, and service for older individuals with disabilities with particular attention to individuals with severe disabilities with the Sate agencies with primary responsibility for individuals with disabilities, including severe disabilities, to enhance services and develop collaborative programs, where appropriate, to meet the needs of older individuals and disabilities.

#### VI) TITLE VII/LEGAL ASSISTANCE ASSURANCES

**68.** Sec. 307(11)(A) provide assurances that the Area Agency on Aging will –

(i) enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance;

(ii) include in any such contract provisions to assure that any recipient of funds under division (A) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and

(iii) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals in pro bono and reduced fee basis

**69.** Sec. 307(11)(D) provide assurances that, to the extent practicable, that legal assistance furnished under the Area Plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals.

**70.** Sec. 307(11)(E) provide assurances that Area Agencies on Aging 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.

#### **ATTACHMENTS**

My signature below indicates that the Coastal Regional Commission Area Agency on Aging is in compliance and will maintain compliance with all aforementioned Standard Assurances.

Signature 0 Pamela Rogers Area Agency on Aging, Director

Signature: 000 Jason Coley

Date:

Date: \_ 22

Jason Coley (/ Chairperson of Governing Board Coastal Regional Commission Council

#### ATTACHMENTS ATTACHMENT B-5 – LETTER(S) REQUESTING A WAIVER OF STANDARD ASSURANCES

[Insert Waiver Request Letter(s) After This Page] Or indicate "No Waiver(s) Requested" on this page.

**No Waivers Requested** 

#### ATTACHMENTS <u>ATTACHMENT C – TITLE III OAA FEDERAL ALLOCATION AND MATCH ANALYSIS</u> <u>(EXCEL)</u>

Older Am	ericans Act (OAA)	Federal Allocation	Match Analysis Work	sheet	
	Г	Enter Name of AAA:	Coastal Regional	Commission	
		State Fiscal Year:	SFY 2023		
	L				
Indicate the Applicable Budget Submission:	_X SFY 2023 PI	anning Allocation A	rea Plan Update - Versi	on #1	
	SFY 2023	Allocation Issuar	ce (AI) - Version #		
	SFY 2023	AI AAA Initiated E	Budget Revision - Versio	on #	
				% Budgeted	
	Original DAS Allocation by Part	Requested Shift by Part	Revised Allocation by Part	Federal Dollars Allocated	Total Budget to be Matched
Title III A Admin from Title III B, C & E	\$210,180	\$0	\$210,180	75%	\$280,240
Title III B Supportive Services	\$541,861	\$0	\$541,861	85%	\$637,484
Title III C-1 Congregate Meals	\$879,836	-\$132,679	\$747,157	85%	\$879,008
Title III C-2 Home Delivered Meals	\$449,008	\$132,679	\$581,687	85%	\$684,338
Title III D Health Promotion*	\$42,904	\$0	\$42,904	100%	\$42,904
	\$0	\$0	\$0	100%	\$0
Title III E Family Caregiver Support	\$188,186	\$0	\$188,186	75%	\$250,915
	\$0	\$0	\$0	85%	\$0
Total	\$2,311,975	\$0	\$2,311,975		\$2,774,889
	Budenat da la a	Matak			
	Budget to be Matched	Match Requirement	Total Match Required	State Match	Local Match Required
Title III A Admin from Title III B, C & E	\$280,240	25%	\$70.060	N/A	\$70,060
Title III B Supportive Services	\$637,484	15%	\$95,623	\$31.874	\$63,748
Title III C-1 Congregate Meals	\$879,008	15%	\$131,851	\$43,950	\$87,901
Title III C-2 Home Delivered Meals	\$684,338	15%	\$102,651	\$34,217	\$68,434
Title III D Health Promotion*	\$42,904	0%	\$0	\$0	\$0
	\$0	0%	\$0	\$0	\$0
Title III E Family Caregiver Support	\$250,915	25%	\$62,729	\$37,637	\$25,092
	\$0	0%	\$0	\$0	\$0

\$2,774,889

Total

MAN 5600, Appendix D October 2021

\*Effective July 1, 2021/SFY 2022, State and Local Match are no longer required. \$147,678

\$462,914

\$315,235

# ATTACHMENT D – AREA PLAN PROVIDER SERVICES LIST (DAS Data System Report)





Agency: Coastal Georgia Region AAA

**Start** 07/01/2021 **Date:** 

End Date: 02/21/2022

## Parent All Ways Caring Coastal-- HCBS – Coastal GA AAA Provider:

1100100	1.			
<b>Contact</b>		Address	Programs	<u>Services</u>
Name: Phone: Fax: Email:	Tracy Castellaw (912)685-4221 (912)685-4223 tcastellaw@rescare.com	38 S E Broad Street Metter, GA 30439	HCBS - Caregiver Services	Respite Care In-Home
			HCBS - In-Home Services	
				Homemaker
				Personal Care

## Service All Ways Caring Coastal-- HCBS – Coastal GA AAA Provider:

<u>Contact</u>		Address	<u>Programs</u>	<u>Services</u>
Name: Phone: Fax: Email:	Tracy Castellaw (912)685-4221 (912)685-4223 tcastellaw@rescare.com	38 S E Broad Street Metter, GA 30439	HCBS - Caregiver Services	Respite Care In-Home
			HCBS - In-Home Services	
				Homemaker
				Personal Care

## Provider Services List

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# Parent Altamaha Home Care, Inc. Coastal GA [Parent] Provider:

<u>Contact</u> Name: Phone: Fax: Email:	Lisa Deen (912)367-1046 (912)366-0068 lisaahc@accessatc.net	<u>Address</u> 52 North Oak Street Baxley, GA 31513	Programs HCBS - Caregiver Services	<u>Services</u> Respite Care In-Home
			HCBS - In-Home Services	Homemaker Personal Care
Service Provider: Contact	Altamaha Home Care, In		Programs	Services
	Altamaha Home Care, In Lisa Deen (912)367-1046 (912)366-0068 lisaahc@accessatc.net	<b>Address</b> 52 North Oak Street Baxley, GA 31513	<u>Programs</u> HCBS - Caregiver Services	<u>Services</u> Respite Care In-Home
Provider: <u>Contact</u> Name: Phone: Fax:	Lisa Deen (912)367-1046 (912)366-0068	Address 52 North Oak Street		

## Parent Bryan County Board of Commissioners [Parent] Provider:

<u>Contact</u>		<u>Address</u>	<b>Programs</b>
Name: Phone: Fax: Email:	Ben Taylor (912)653-3899 (912)653-4691 btaylor@bryan-county.org	Post Office Box 430, Pembroke, GA 31321	HCBS - HCBS Services
			LICDC Carrier Contara

Services Senior Recreation

HCBS - Senior Centers

Congregate Meals

Exercise/Physical Fitness - Group

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Health Promotion/Disease Prevention

Nutrition Education

Outreach

Senior Recreation

#### **Pembroke Senior Citizens Center** Service **Provider:**

#### Contact

Name: Phone: Fax: Email:

**Bernadette Smokes** (912)653-4480 (912)653-5794

#### **Address**

24 West Bacon Street Pembroke, GA 31321

#### **Programs**

**HCBS - Senior Centers** 

#### Services

**Congregate Meals** Exercise/Physical Fitness - Group Health Promotion/Disease Prevention Nutrition Education Outreach Senior Recreation

#### Service **Richmond Hill Senior Citizens Center Provider:**

<u>Contact</u>		Address	<b>Programs</b>
Name:	TBN	9930 Ford Ave	HCBS - HCBS S
Phone:	(912)756-2783	Richmond Hill, Georgia 31324	
Fax:	(912)459-0201		
Email:	sshuman@bryan-county.org		

Services

**Services** 

Senior Recreation

**HCBS - Senior Centers** 

**Congregate Meals** 

Exercise/Physical Fitness - Group Health Promotion/Disease Prevention Nutrition Education

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Outreach

Senior Recreation

# Parent Bulloch County Senior Center Provider:

<u>Contact</u>		<u>Address</u>	Programs	<u>Services</u>
Name: Phone: Fax: Email:	Alex Smith (912)489-1604 (912)764-3210 alsmith@concertedservices.org	515 Denmark St Suite 400 Statesboro, GA 30458	HCBS - Nutrition Services	Home Delivered Meals
			HCBS - Senior Centers	Congregate Meals
				Exercise/Physical Fitness - Group
				Health Promotion/Disease Prevention
				Nutrition Education
				Senior Recreation
Service Provider:	Bulloch County Senior Cent	er		
<u>Contact</u>		Address	<u>Programs</u>	<u>Services</u>
Name: Phone: Fax: Email:	Alex Smith (912)489-1604 (912)764-3210 alsmith@concertedservices.org	515 Denmark St Suite 400 Statesboro, GA 30458	HCBS - Nutrition Services	Home Delivered Meals

HCBS - Senior Centers

Congregate Meals Exercise/Physical Fitness - Group Health Promotion/Disease Prevention Nutrition Education

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Senior Recreation

# Parent Camden County Senior Center Provider:

<u>Contact</u> Name: Phone: Fax: Email: Service	Darlene Bell (912)729-1945 (912)673-6957 seniorcenterpsa@tds.net Camden County Senior Co	<u>Address</u> 1501 Georgia Avenue Woodbine, GA 31569	Programs HCBS - Senior Centers	Services Congregate Meals Exercise/Physical Fitness - Group Health Promotion/Disease Prevention Nutrition Education Senior Recreation
Provider	•			
<u>Contact</u> Name:	Darlene Bell	<u>Address</u> 1501 Georgia Avenue	<u>Programs</u> HCBS - Senior Centers	<u>Services</u> Congregate Meals
Phone: Fax:	(912)729-1945 (912)673-6957	Woodbine, GA 31569		Exercise/Physical Fitness - Group
Email:	seniorcenterpsa@tds.net			Health Promotion/Disease Prevention
				Nutrition Education
				Senior Recreation

Parent City of Brunswick [Parent] Provider:

Contact

Address

Programs

Services

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Name: Phone: Fax: Email:	James Drumm (912)267-5530 (912)267-5542 jdrumm@cityofbrunswick-ga.gov	601 Gloucester Street Brunswick, GA 31520	HCBS - HCBS Services	Adult Day Care
			HCBS - Senior Centers	Congregate Meals
Service Provider:	Brunswick Multi-Purpose Ce	enter		
<u>Contact</u>		<u>Address</u>	Programs	<u>Services</u>
Name: Phone: Fax: Email:	Darlene Wymes (912)267-5520 (912)267-5591 drwymes@brunswick-ga.gov	2007 'l' Street Brunswick, GA 31520	HCBS - HCBS Services	Adult Day Care
			HCBS - Senior Centers	Congregate Meals
Service Provider:	City of Brunswick [Parent]			
<u>Contact</u>		<u>Address</u>	Programs	<u>Services</u>
Name: Phone: Fax: Email:	James Drumm (912)267-5530 (912)267-5542 jdrumm@cityofbrunswick-ga.gov	601 Gloucester Street Brunswick, GA 31520	HCBS - HCBS Services	Adult Day Care
			HCBS - Senior Centers	Congregate Meals

# Parent City of Savannah - Leisure Services [Parent] Provider:

<u>Contact</u>		<u>Address</u>	Programs	<u>Services</u>
Name: Phone:	Kelly Ledbetter (912)351-3841	1301 East Victory Drive Savannah, GA 31402	HCBS - Caregiver Services	Adult Day Care

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Fax: (912)351-3423 Email: kledbetter@savannahga.gov

## **Provider Services List**

HCBS - HCBS ServicesAdult Day CareHCBS - Senior CentersCongregate MealsEmergency Home Delivered MealsExercise/Physical Fitness - GroupExercise/Physical Fitness - IndividualHealth Promotion/Disease PreventionNutrition EducationSenior Recreation

### Service Carver Heights Golden Age Center Provider:

#### Contact

<u>Address</u> 905 Collatt Avenue Savannah, GA 31415

#### Programs HCBS - Senior Centers

<u>Services</u> Congregate Meals

### Service Cloverdale Senior Center Provider:

#### **Contact**

Name: Linda Johnson Phone: (912)236-1244 Fax: Email:

#### <u>Address</u>

1919 Cynthia Street Savannah, GA 31405

### Programs

HCBS - Senior Centers

#### <u>Services</u> Congregate Meals

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Service Provider:	Crusader Golden Age Center				
<u>Contact</u> Name: Phone: Fax: Email:	Rose Haynes (912)921-5743 (912)921-2103	<u>Address</u> 81 Coffee Villa Road Savannah, GA 31419	<u>Programs</u> HCBS - Senior Centers	<u>Services</u> Congregate Meals	
Service Provider:	Hudson Hill Golden A	Age Center			
<u>Contact</u> Name: Phone: Fax: Email:	Tina Hicks (912)650-7815	<u>Address</u> 2227 Hudson Hill Savannah, GA 31415	<u>Programs</u> HCBS - Senior Centers	<u>Services</u> Congregate Meals	
Service Provider:	Liberty City Golden A	Age Center			
<u>Contact</u> Name: Phone: Fax: Email:	Rosalyn Wright (912)650-7804 (912)652-3804	<u>Address</u> 1401 Mills B. Lane Boulevard Savannah, GA 31405	<u>Programs</u> HCBS - Senior Centers	<u>Services</u> Congregate Meals	
Service Provider:	Mary B. Flournoy Go	lden Age Center			
<u>Contact</u>		<u>Address</u>	Programs HCBS - Senior Centers	<u>Services</u> Congregate Meals	
				Daga 173	<b>af 13</b>



Name: Debora Anthony Phone: (912)651-2192 Fax: Email: danthony@Savannahga.gov 1001 W. 39th Street Savannah, GA 31415

### **Provider Services List**

Exercise/Physical Fitness - Group Exercise/Physical Fitness - Individual Health Promotion/Disease Prevention Nutrition Education Senior Recreation

Health Promotion/Disease Prevention

### Service Moses Jackson Golden Age Center Provider:

Contact		<u>Address</u>
Name: Phone: Fax:	Rebecca Middleton (912)651-6785	1410 Richards Street Savannah, GA 31415
Email:	rjohnson@savannahga.gov	

### Service PARC Golden Age Center Provider:

ContactName:Natasha ButlerPhone:(912)651-4211Fax:Email:nbutler@savannahga.gov

Address

425 Pennsylvania Avenue Savannah, GA 31404

#### **Programs**

Programs

**HCBS - Senior Centers** 

HCBS - Senior Centers

#### Services

**Services** 

**Congregate Meals** 

Nutrition Education Senior Recreation

Congregate Meals Exercise/Physical Fitness - Group Exercise/Physical Fitness - Individual Health Promotion/Disease Prevention Nutrition Education Senior Recreation

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## Service Savannah Adult Day Care Center Provider:

<u>Contact</u> Name: Phone: Fax: Email:	Robin Mervin (912)651-6774 (912)652-3830 Ledwell86@yahoo.com	<u>Address</u> 3025 Bull Street Savannah, GA 31405	<u>Programs</u> HCBS - Caregiver Services	<u>Services</u> Adult Day Care
Service Provider:	Stillwell Towers Golden Ag		HCBS - HCBS Services	Adult Day Care
<u>Contact</u>		Address	Programs	Services
Name: Phone: Fax: Email:	Alfredia Thomas (912)351-3855	5100 Waters Avenue Savannah, GA 31404	HCBS - Senior Centers	Congregate Meals
Service Provider:	Tatumville Golden Age Cer	nter		
<u>Contact</u>		Address	Programs	Services
Name: Phone: Fax: Email:	Shvokeia Watson (912)691-6289	333 Coleman Street Savannah, GA 31405	HCBS - Senior Centers	Congregate Meals

Service The Veranda Golden Age Center Provider:



Contact

Name: Juanita Scott Phone: (912)651-2000 Fax: Email: jscott@savannahga.gov <u>Address</u> 1414 East Anderson Street Savannah, GA 31404 Programs HCBS - Senior Centers Services Congregate Meals

### Service Windsor Forest Golden Age Center Provider:

Contact

Name: Phone: Fax: Email: <u>Address</u> 308 Briarcliff Circle Savannah, GA 31419

#### Programs HCBS - Senior Centers

<u>Services</u> Congregate Meals

Emergency Home Delivered Meals

### Service Woodville Golden Age Center Provider:

Laura Brown

(912)921-2104

ContactName:Barbara MoonPhone:(912)965-2373Fax:Email:

<u>Address</u> 129 Darling Street Savannah, GA 31405

#### Programs HCBS - Senior Centers

<u>Services</u> Congregate Meals

# Parent Coastal Georgia Region AAA Provider:

**Contact** 

Name:Pamela RogersPhone:(912)437-0800Fax:(912)437-0840Email:progers@crc.ga.gov

#### <u>Address</u>

1181 Coastal Drive SW Darien, GA 31305

#### Programs

ADRC-CARES Program

<u>Services</u>

Material Aid - Individual

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CJCC Grant Program	Case Management
	Material Aid - Individual
HCBS - Caregiver Services	Respite Care In-Home
HCBS - Case Management	Care Consultation
	Case Management
	Case Mgt. Brokering
HCBS - HCBS Services	Material Aid - Assistive Technology
	Material Aid - Individual
HCBS - In-Home Services	Homemaker
	Personal Care

### Service Coastal Georgia Region AAA Provider:

<u>Contact</u>		<u>Address</u>	Programs	<u>Services</u>
Name: Phone: Fax: Email:	Pamela Rogers (912)437-0800 (912)437-0840 progers@crc.ga.gov	1181 Coastal Drive SW Darien, GA 31305	ADRC-CARES Program	Material Aid - Individual
Lindiii	progene ee le sauger		CJCC Grant Program	Case Management
				Material Aid - Individual
			HCBS - Caregiver Services	Respite Care In-Home
			HCBS - Case Management	Care Consultation
				Case Management
				Case Mgt. Brokering
			HCBS - HCBS Services	Material Aid - Assistive Technology

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Material Aid - Individual



HCBS - In-Home Services

Homemaker

Personal Care

## Service Coastal Regional Commission Provider:

<u>Contact</u> Name: Phone: Fax: Email:	Dionne Lovett (912)437-0840 (912)437-0801 dlovett@crc.ga.gov	<u>Address</u> 1181 Coastal Drive SW Darien, GA 31305	<u>Programs</u> CJCC Grant Program	<u>Services</u> Case Management
			HCBS - Caregiver Services	Respite Care In-Home
			HCBS - Case Management	Case Management
			HCBS - HCBS Services	Material Aid - Individual
			HCBS - In-Home Services	Homemaker
				Personal Care
Service Provider:	HCBS - Nutrition Services			
<u>Contact</u> Name: Phone: Fax: Email:		<u>Address</u>	<u>Programs</u> ADRC-CARES Program	<u>Services</u> Material Aid - Individual

Parent	Effingham County Senior Citizens Center
<b>Provider:</b>	

Address

Programs

Services



Name:Margaret MoorePhone:(912)754-2138Fax:(912)754-2152Email:mmoore@effinghamcounty.org

601 North Laurel Street Springfield, GA 31329 HCBS - HCBS Services

HCBS - Nutrition Services

HCBS - Senior Centers

Home Delivered Meals

**Provider Services List** 

Senior Recreation

Congregate Meals Exercise/Physical Fitness - Group Health Promotion/Disease Prevention Nutrition Education Senior Recreation

Service Effingham County Senior Citizens Center Provider:

Contact		Address	<u>Programs</u>	<u>Services</u>
Name: Phone: Fax: Email:	Margaret Moore (912)754-2138 (912)754-2152 mmoore@effinghamcounty.org	601 North Laurel Street Springfield, GA 31329	HCBS - HCBS Services	Senior Recreation
			HCBS - Nutrition Services	Home Delivered Meals
			HCBS - Senior Centers	Congregate Meals
				Exercise/Physical Fitness - Group
				Health Promotion/Disease Prevention
				Nutrition Education
				Senior Recreation

Parent Help at Home dba Coastal Home Care (Coastal HCBS) Provider:



#### Contact Address Programs Services HCBS - Caregiver Services Tyler Dorn 6602 Abercorn St., Suite 200 Name: **Respite Care In-Home** (912)354-3680 Phone: Savannah, Georgia 31405 Fax: Email: tdorn@helpathome.com HCBS - In-Home Services Homemaker Personal Care Help at Home dba Coastal Home Care (Coastal HCBS) Service **Provider:** Contact Address Programs Services Name: Tyler Dorn 6602 Abercorn St., Suite 200 **HCBS - Caregiver Services** Respite Care In-Home Phone: (912)354-3680 Savannah, Georgia 31405 Fax: Email: tdorn@helpathome.com HCBS - In-Home Services Homemaker Personal Care

## Parent Long County Senior Citizens Center Provider:

Contact		<u>Address</u>	Programs	<u>Services</u>
Name: Phone: Fax: Email:	Kelli Mock (912)545-2435 (912)545-3435 kmock@concertedservices.org	15 Thorton Drive Ludowici, GA 31316	HCBS - Nutrition Services	Home Delivered Meals
			HCBS - Senior Centers	Congregate Meals
				Exercise/Physical Fitness - Group

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Health Promotion/Disease Prevention

Nutrition Education



Senior Recreation

## Service Long County Senior Citizens Center Provider:

<u>Contact</u> Name: Phone: Fax: Email:	Kelli Mock (912)545-2435 (912)545-3435 kmock@concertedservices.org	<u>Address</u> 15 Thorton Drive Ludowici, GA 31316	Programs HCBS - Nutrition Services	<u>Services</u> Home Delivered Meals
			HCBS - Senior Centers	Congregate Meals
				Exercise/Physical Fitness - Group
				Health Promotion/Disease Prevention
				Nutrition Education
				Senior Recreation

#### Parent McIntosh County Commissioners [Parent] Provider:

<u>c</u>	Contact		Address	Programs	<u>Services</u>
Name:		Patrick Zoucks (912)437-6671 (912)437-6416 patrick.zoucks@mcintoshcounty- ga.gov	310 North Way Darien, GA 31305	HCBS - Senior Centers	Congregate Meals
	· · ·				Exercise/Physical Fitness - Group
E	Email:				Nutrition Education
					Outreach
					Senior Recreation



Service	CAA McIntosh County Senior Center
Provider:	

<u>Contact</u>		<u>Address</u>	Programs	<u>Services</u>
Name: Phone: Fax: Email:	Linda Slade (912)832-2444	1009 Eulonia Park Road, NW Townsend, GA 31331	HCBS - Senior Centers	Congregate Meals
				Exercise/Physical Fitness - Group
	lslade@coastalgacaa.org			Nutrition Education
				Outreach
				Senior Recreation

#### Parent PurFoods, LLC [Parent] Provider:

Contact		Address	Programs	<u>Services</u>
Name: Phone:	Nathan Jensen (866)716-3257	3120 SE 72nd Street Ankeny, IA 50021	HCBS - Nutrition Services	Home Delivered Meals
Fax:	(515)266-6120			
Email:	Nathan.jensen@momsmeals.co	m		
Service Provider:				
<u>Contact</u>		<u>Address</u>	Programs	<u>Services</u>
Name:	Nathan Jensen	3120 SE 72nd Street	<u>Programs</u> HCBS - Nutrition Services	<u>Services</u> Home Delivered Meals
Name: Phone:	(866)716-3257			
Name:		3120 SE 72nd Street Ankeny, IA 50021		

# Parent Senior Citizens, Inc. (Chatham County) [Parent] Provider:

<u>Contact</u>		<u>Address</u>
Name:	Patricia Lyons	3025 Bull Street,
Phone:	(912)236-0363	Savannah, GA 31405
Fax:	(912)236-0363	
Email:	plyons@seniorcitizens-inc.org	

#### Programs

HCBS - Caregiver Services

#### <u>Services</u>

Adult Day Care



HCBS - HCBS Services
HCBS - Nutrition Services
HCBS - Senior Centers

Adult Day Care Home Delivered Meals Congregate Meals Exercise/Physical Fitness - Group Nutrition Education Senior Recreation

Service HCBS - HCBS Services Provider:

<u>Contact</u>	<u>Address</u>	Programs	<u>Services</u>
Name: Phone: Fax:		HCBS - Caregiver Services	Adult Day Care
Email:			

## Service Port Wentworth Senior Citizens Center Provider:

<u>Contact</u>		<u>Address</u>	Programs	<u>Services</u>
Phone:	Martha Weston (912)964-5411 (912)964-0509	100 Aberfeldy Street Port Wentworth, GA 31407	HCBS - Senior Centers	Congregate Meals
				Exercise/Physical Fitness - Group
Email:				Nutrition Education
				Senior Recreation
Service Provider:				
<u>Contact</u>		<u>Address</u>	Programs	Services



Name: Phone: Fax: Email:	Patricia Lyons (912)236-0363 (912)236-0363 plyons@seniorcitizens-inc.org	3025 Bull Street, Savannah, GA 31405	HCBS - HCBS Services	Adult Day Care
			HCBS - Nutrition Services	Home Delivered Meals
			HCBS - Senior Centers	Congregate Meals
Service Provider:	The Social Center/RBADC			
Contact		Address	Programs	<u>Services</u>
Name: Phone: Fax: Email:	Katie Horne (912)236-0363 (912)236-3030	64 Jasper Street Savannah, GA 31405	HCBS - HCBS Services	Adult Day Care
Service Provider:	Thunderbolt Senior Citizens	s Center		
<u>Contact</u>		Address	Programs	<u>Services</u>
Name:	Linda Swanson	3236 Russell Street	HCBS - Senior Centers	Congregate Meals
Phone: Fax:	(912)352-4846	Thunderbolt, GA 31404		Exercise/Physical Fitness - Group
Email:				Nutrition Education
				Senior Recreation
Parent Provider:	Senior Citizens, Inc. (Coa	stal Counties) [Parent]		

 Contact

 Name:
 Patti Lyons

 Phone:
 (912)236-0363

 Fax:
 (912)236-3030

 Email:
 BTW1939@bellsouth.net

#### <u>Address</u>

3025 Bull Street Savannah, GA 31405

#### Programs HCBS - Caregiver Services

<u>Services</u> Adult Day Care - Mobile

HCBS - HCBS Services

Adult Day Care - Mobile

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HCBS - Nutrition Services HCBS - Senior Centers

Home Delivered Meals **Congregate Meals** Exercise/Physical Fitness - Group Nutrition Education Senior Recreation

#### Service Bryan County - Senior Citizens, Inc. Provider:

Contact		<u>Address</u>	<u>Programs</u>
Name: Phone: Fax: Email:	Patti Lyons (912)236-0360 (912)236-3030 plyons@seniorcitizens-inc.org	PO Box 23858 Savannah, GA 31403	HCBS - Nutrition Services

#### Liberty County - Senior Citizens, Inc. Service Provider:

<u>Contact</u>		Address
Name: Phone: Fax: Email:	Patti Lyons (912)236-0363 (912)236-3030 plyons@seniorcitizens-inc.org	P.O. Box 23858 Savannah, GA 31403

## es

Services Home Delivered Meals

Programs HCBS - Caregiver Services

**Services** Adult Day Care - Mobile

HCBS - HCBS Services **HCBS - Nutrition Services HCBS - Senior Centers** 

Adult Day Care - Mobile Home Delivered Meals **Congregate Meals** Exercise/Physical Fitness - Group Nutrition Education Senior Recreation

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#### ATTACHMENT E - HOW HAS THE PANDEMIC, COVID-19, IMPACTED THE AAA?

Mid-March very much marked the start of COVID-19 mitigation efforts and protocols for Aging Services. Much of each day, since March 10, 2020 has been dedicated to ongoing communication with multiple direct service providers, GA Dept of Human Services, and local staff to ensure that we were and are addressing the needs of our senior and disability population as safely as possible. 100% of all senior and adult day centers closed due to COVID-19 precautions. The staff at each center have done and are still doing a remarkable job of making sure each client continues to receive meals or other services as necessary. Through the combined efforts of CRC staff nutrition providers, and in-home service providers; we were able to ensure clients continued receiving meals, and other services. Coastal AAA provided thousands of emergency home delivered meals to older adults during the pandemic. These services were not limited to the clients enrolled in nutrition services prior to the pandemic. Coastal AAA was contacted by many older adults that were sheltering in place due to COVID-19 and in need of nutrition services. In partnership with our nutrition and transportation service providers, we were able to deliver meals to seniors that had limited or no access to food.

Like most people throughout the nation, many AAA staff worked from home from March 31 – May 11, 2020 as they continued to answer calls, make referrals, and do telephone assessments and evaluations of clients. Staff participated in weekly update calls with GA Dept of Human Services; checked in weekly with Senior Center staff and participated in countless national update webinars and trainings designed to help address COVID-19.

Many of the seniors served by the Coastal AAA have already begun the COVID-19 vaccination process. The Coastal AAA and its service providers have been working with the Coastal Health District and local hospitals and health centers to make sure older adults and health care workers gain access to the vaccine in a timely manner.

The greatest challenge Coastal AAA faces during the continuing pandemic is avoiding service fatigue, as we are tasked with our regular daily operations in addition to the many new tasks that have emerged due to COVID-19. The additional FFCRA and CARES funding that Coastal AAA has received, means more clients served and additional units of service delivered. Coordinating the delivery of these services has been challenging, as providers are suffering from fatigue and staff shortages. Anxiety levels are at an all time high amongst provider staff and the clients we serve. Masking and gloving up has become a part of our daily routine, along with social distancing and frequent hand washing. Yet many have still contracted the COVID-19 virus and the fear that many more will be infected haunts our network. The changes to our operations are best summarized in the FAQ document that DAS has been updating on a regular basis to capture the many questions asked and answered during the pandemic.