

# **YEAR END REPORT**

## **2009-2010**

November 19, 2010

**AREA 4 AGENCY ON AGING**  
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## Introduction

The purpose of the Year End Report is to provide an account of the progress that was made toward Area 4 Agency on Aging's (A4AA's) administrative, program development, coordination and service objectives for the fiscal year. These are activities carried out by staff that are above and beyond the day-to-day functions of the Agency. This report is not intended to document the specific achievements of the many service providers with whom the Agency contracts.

## Highlights

During the 2009-10 fiscal year, Area 4 made progress in several different areas, four of which are highlighted here.

Though there is no objective for the Request for Proposal (RFP) process, the completion of another RFP cycle represents the most noteworthy achievement of the year. Governing Board, Advisory Council, staff and community members reviewed proposals from 34 organizations. Ultimately, nearly \$5 million was awarded to 25 of those organizations to provide a wide array of home and community-based services during each year of the three year 2010-13 contract cycle.

Secondly, the 2008-09 Needs Assessment, which was done in preparation for the RFP, culminated with at least one public meeting in each of the seven counties. Based upon two years of data collection and analysis, the top needs of people 60 and older in PSA 4 were found to be: 1) Getting transportation for errands or medical appointments, 2) Getting minor home repairs and/or modifications, 3) Having economic/financial concerns, 4) Getting someone to do major home repairs, and 5) Paying for medical care or medicines.

A third highlight is the administration of the Medicare Low Income Subsidy (LIS) program. In conjunction with the Health Insurance Counseling and Advocacy Program (HICAP), Area 4 staff designed and implemented the *Every Dollar Counts* campaign which led to the enrollment of 330 local seniors in the prescription drug savings program.

Finally, Area 4 helped to restore some service stability to the Yuba-Sutter area by contracting with FREED Center for Independent Living to begin a transportation voucher program. A4AA also assisted with the re-location of the Yuba County Senior Center from Marysville to Olivehurst.

## Status of Goals and Objectives

A4AA's five major goals as outlined in the 2009-12 Area Plan are:

- 1) Provide community leadership in understanding and preparing for a dramatic change in the size and composition of the older adult population within PSA 4 over the next several decades.
- 2) Directly promote health and wellness among older adults in PSA 4.
- 3) Directly promote financial security among older adults in PSA 4.
- 4) Fund and support local organizations that provide home and community-based services to older adults and/or their caregivers throughout PSA 4.
- 5) Work to improve the aging network and prepare for the aging boom.

There are multiple objectives associated with each of these goals. For a variety of reasons, it is rarely possible to fulfill each and every objective within the anticipated timeframe. And, the completion of objectives is always contingent upon the availability of adequate funding and staff time.

The terms used to describe the Year End Status of each objective as of June 30<sup>th</sup> 2010 are defined below.

- **Completed** means the activity was finished as written.
- **Continuing** means progress has been made on the activity as it was written, and work will be continuing into the next fiscal year.
- **Pending** means the timeline for this activity begins at some future date.
- **Discontinued** means that at some point during the fiscal year a decision was made not to continue the activity (the term "deleted" is used when the decision to drop an activity is made during the Area Plan Amendment or Update process).

The status for each of the active objectives for 2009-10 appears in Table A below. Among the 85 active objectives listed, 78 are either Continuing or Completed and just 7 were not, yielding a progress rate of 92%.

TABLE A: OBJECTIVES SUMMARY, 2009-10 YEAR END STATUS

<b>Amended 2009-2010 Objectives</b>	<b>Type*</b>	<b>Year End Status</b>
<b>1.1 Aging Research</b>		
2008-09 Needs Assessment 1.1(a)	A	Completed
LGBT Focus Group Study 1.1(b)	C	Completed
<i>Care Facility Study 1.1(c)</i>	C	<i>Pending</i>
<b>1.2 Awareness of Aging Issues</b>		
Media Stories 1.2(a)	A	Continuing
Community Education Presentations 1.2(b)	C	Continuing
A4AA Website 1.2(c)	A	Continuing
Community Education on Caregiving 1.2(d)	DS	Completed
Public Information on Caregiving 1.2(e)	DS	Continuing
California Highway Safety Plan 1.2(f)	C	Continuing
<b>2.1 Physical Health and Wellness</b>		
Men's Cooking Classes 2.1(a)	PD	Completed
Nutrition Education 2.1(b)	DS	Continuing
<i>Chronic Disease Management 2.1(c)</i>	C	<i>Pending</i>
Health Promotion Activities 2.1(d)	C	Continuing
<b>2.2 Mental Health and Wellness</b>		
Lifelong Learning 2.2(a)	C	Continuing
Mental Health Conference 2.2(b)	C	Continuing
Telephone Reassurance 2.2(c)	PD	Continuing
<b>2.3 Injury Prevention</b>		
Driving Wellness Program 2.3(a)	DS	Continuing
Falls Prevention Program 2.3(b)	DS	Continuing
Northern California Fall Prevention Coalition 2.3(c)	C	Continuing
Nevada County Fall Prevention Coalition 2.3(d)	C	Continuing
<b>2.4 Health and Wellness for Family Caregivers</b>		
Caregiver Training (Caregiver Support Day) 2.4(a)	DS	Continuing
Kinship Care Services 2.4(b)1	DS	Continuing
Kinship Care Services 2.4(b)2	DS	Continuing
Kinship Care Services 2.4(b)3	DS	Continuing
<b>2.5 Personal Planning for Health and Wellness</b>		
Medicare Issues 2.5(a)	A	Continuing
Advance Care Planning Project 2.5(b)	DS	Continuing
Disaster Preparedness Coordination 2.5(c)	C	Continuing

\*Type of Objective: A = Administrative, C = Coordination, CS = Contracted Service, DS = Direct Service, PD = Program Development

<b>Amended 2009-2010 Objectives (continued)</b>	<b>Type*</b>	<b>Year End Status</b>
<b>3.1 A4AA "Poverty Initiative" Programs</b>		
Senior Employment 3.1(a)	DS	Continuing
Mobile Produce Market 3.1(b)	PD	Continuing
Nutrition Activities 1.3(c)	C	Continuing
Medicare Low Income Subsidy (LIS) Outreach 3.1(d)	DS	Continuing
<b>3.2 Financial Security for Seniors &amp; Family Caregivers</b>		
Social Security Issues 3.2(a)	A	Continuing
Elder Economic Security Standard 3.2(b)	C	Continuing
Retirement Readiness Project 3.2(c)	C	Continuing
Financial Survival Faire 3.2(d)	PD	Continuing
<b>4.1 Information and Assistance Services</b>		
Direct I&A Services 4.1(a)	DS	Continuing
Contracted I&A Services 4.1(b)	CS	Continuing
Assistive Technology 2.1(c)	A	Continuing
HICAP Coordination 2.1(d)	A	Continuing
<b>4.2 In-Home Services (Contracted)</b>		
Home-Delivered Meal (C-2) services 4.2(a)1	CS	Continuing
Home-Delivered Meal (C-2) services 4.2(a)2	A	Completed
Home-Delivered Meal (C-2) services 4.2(a)3	A	Continuing
Home-Delivered Meal (C-2) services 4.2(a)4	A	Completed
Home-Delivered Meal (C-2) services 4.2(a)5	A	Continuing
Personal Care/Homemaker services 4.2(b)	CS	Continuing
Medication Management services 4.2(c)	CS	Continuing
Senior Companion services 4.2(d)1	CS	Continuing
Senior Companion services 4.2(d)2	A	Continuing
Minor Home Modification services 4.2(e)1	CS	Continuing
Minor Home Modification services 4.2(e)2	A	Continuing
Care Management services (Linkages) 4.2(f)	CS	Discontinued
<b>4.3 Community Services (Contracted)</b>		
Congregate Meal services 4.3(a)1	CS	Continuing
Congregate Meal services 4.3(a)2	A	Continuing
Congregate Meal services 4.3(a)3	PD	Continuing
Brown Bag Program 4.3(b)	CS	Discontinued
Transportation services 4.3(c)1	CS	Continuing
Transportation services 4.3(c)2	CS	Continuing
Transportation services 4.3(c)3	A	Discontinued

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<b>Amended 2009-2010 Objectives (continued)</b>	<b>Type*</b>	<b>Year End Status</b>
<b>4.3 Community Services (Contracted) <i>continued</i></b>		
Legal services 4.3(d)	CS	Continuing
Mental Health services 4.3(e)1	CS	Continuing
Mental Health services 4.3(e)2	A	Continuing
Health services 4.3(f)	CS	Continuing
Disease Prevention/Health Promotion 4.3(g)	CS	Continuing
HICAP services 4.3(h)1	CS	Continuing
HICAP services 4.3(h)1	A	Continuing
<b>4.4 Caregiver Services</b>		
Caregiver Services 4.4(a)1-10	CS	Continuing
Caregiver Provider Meetings 4.4(b)	A	Continuing
Alzheimer's Day Care 4.4(c)	CS	Discontinued
<b>4.5 Title VII Services (Contracted)</b>		
Ombudsman services 4.5(a)1	CS	Continuing
Ombudsman services 4.5(a)2	A	Continuing
<b>4.6 Service Provider Training and Support</b>		
On-line Data Reporting and Training 4.6(a)	A	Continuing
Elder Abuse Prevention Training 4.6(b)	C	Discontinued
<b>5.1 Advocacy on Aging Issues</b>		
Transportation Advocacy 5.1(a)	C	Continuing
Housing Advocacy 5.1(b)	C	Continuing
Legislative Advocacy 5.1(c)	A	Continuing
Mental Health Advocacy 5.1(d)	C	Continuing
Centenarian Event 5.1(e)	C	Discontinued
<b>5.2 Coordination of Senior Services</b>		
2-1-1 Central Information System 5.2(a)	C	Continuing
Long-Term Care Integration 5.2(b)	C	Continuing
Adult Day Services 5.2(c)	C	Discontinued
Commissions on Aging 5.2(d)	C	Continuing
IHSS Task Force 5.2(e)	C	Completed
<b>5.3 Social Service Centers for Seniors</b>		
Focal Point Enhancement 5.3(a)1	C	Continuing
Marysville Senior Center Expansion 5.3(b)	C	Continuing
<b>5.4 Preparing for the Aging Boom</b>		
Planning for Aging Boomers 5.4(a)	C	Continuing
Community Competency Enhancement 1.10(a)	PD	Completed
Promotion of Universal Design 5.4(c)	C	Continuing

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## Summary of the Fiscal Year

2009-10 was a devastating year for the aging network, due largely to the budget “solution” to the deficit that confronted the State in August. The Governor’s actions to balance the budget included the complete elimination of the Community Based Services Programs (CBSPs) effective October 1<sup>st</sup> 2009. In our service area, that meant the discontinuation of long-standing contracts to provide the following services:

- Linkages care management services for frail individuals at risk of nursing home placement (Sacramento, Placer and Yolo Counties),
- Brown Bag food commodities for low-income seniors (Yuba and Placer Counties), and
- Alzheimer’s Day Care Resource Centers (ADCRCs) which offered specialized day-long programming for persons with dementia (Sacramento and Yolo Counties).

County and local governments also faced harsh budget situations once again. As a direct result, key losses in the Sacramento area included discontinuation of the city’s Caring Neighborhoods Program, the closure of the UC Davis Center for Healthy Aging, and, upon the loss of county support, the termination of the Geriatric Network. Most significantly to Area 4, the County of Sacramento concluded that it could no longer sustain the Senior Nutrition Services program. The County of Sacramento had been contributing roughly two-thirds of the \$3 million operating budget. At the close of the 2009-10 fiscal year, a transition of the massive nutrition program to the Asian Community Center was underway.

Area 4 did receive federal American Recovery and Reinvestment Act (ARRA) funds to help sustain the nutrition programs. In all, \$569,212 was used to produce 21,650 additional meals, to keep existing staff employed (13,690 job hours) and to temporarily hire new staff (6,436 job hours).

Looking ahead to 2010-11, critical reductions to IHSS, Medi-Cal and Adult Day Health Care programs are being considered to close another daunting state budget deficit. It is deeply concerning that all levels of government seem to disproportionately cut services for those who are frail and elderly.

Also, our contracted providers of senior nutrition services continue to struggle to balance their budgets as the costs of labor, transportation and meal packaging inch upward while revenues from private sources and from participant donations have fallen due to the persisting economic downturn.