

Appendix XIII – PSA # 4 Year-End Report

Check each applicable planning cycle:

FY 2006-07 FY 2007-08 FY 2008-09 FY 2009-10

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This Appendix serves as the Year-End Report for Area Agencies on Aging (AAAs) to provide yearly information on the progress AAAs are making on achieving goals and objectives detailed in the Area Plan. **The due date for the Year-End Report and the original Transmittal Letter is no later than November 1 of each Fiscal Year (FY).**

Directions for submitting Year-End Report and Transmittal Letter:

1. Complete the required sections in Appendix XIII and send it electronically to John Marklund at jmarklund@aging.ca.gov.

2. A Transmittal Letter signed by the AAA Director, Chair of the Advisory Council, and Chair of the Governing Board is required with each Year-End Report. Send the original Transmittal Letter by postal mail to:
John Marklund
California Department of Aging
1300 National Drive, Suite 200
Sacramento, CA 95834

3. Refer to Part Three, Section B, Year-End Reporting, for information about the Year-End Report.

If you have any questions please contact John Marklund at jmarklund@aging.ca.gov or (916) 928-3330; or Denny Wight at dwright@aging.ca.gov or (916) 928-3329.

Section I.

Explain **the purpose of the report**, including a Narrative Description of Significant Accomplishments.

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 goals and objectives for the fiscal year. These are activities carried out by staff, Advisory Council or Governing Board members 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. During the 2008-09 fiscal year, Area 4 made progress in several different areas, four of which we are highlighting here.

First, we conducted our most extensive Needs Assessment to date. In the summer of 2008, we received input from a total of 294 community members at 11 town hall meetings held throughout the service area. Next, we coordinated with local commissions on aging to recruit volunteers who helped us distribute and promote our Senior Survey which was customized for each county and available both in print and, for the first time, available online. In all, over 4,000 responses were collected. We also set a new benchmark for key informant interviews (completing 56) by expanding our scope to include elected officials, faith-based leaders and the media.

Second, A4AA began to address the needs of lesbian, gay, bisexual and transgendered (LGBT) seniors on an agency-wide level by partnering with community leaders to organize a training day for all Area 4 staff in January of 2009. The goal was to increase understanding, awareness and sensitivity among staff in order to ensure the agency is friendly to LGBT individuals and as a precursor to similar training that we will conduct with our contracted service providers in the near future.

A third highlight for 2008-09 is Area 4's expanded involvement with end-of-life issues. In July of 2008, A4AA joined the Compassionate Care Alliance of the Greater Sacramento Region and assisted with establishing a speakers bureau and reviewing the new POLST document. We co-sponsored three events in order to make service providers and family caregivers more aware of the need and value of having an advance health care directive as well as communicating wishes to family members.

Finally, in February of 2009, Area 4 released *The Dual Challenge: Preserving Services for the Oldest Old Today; Planning for the Elderly Baby Boomers of Tomorrow*, our two-year study of the rapid aging of our local population and the consequences it may bring for the wider community. We were pleased to have CDA director Lynn Daucher write the foreword for the report and to deliver the opening address at our rollout event. Our hope is that this report will spark serious discourse, planning and advocacy around this critical issue.

Section II.

Provide a summary of ideas generated as a result of discussions focused on service system changes based on the **demographic changes in the aging population in the Planning and Service Area (PSA)**. (*Area Plan Reference Guide Part One, Needs Assessment, Preparing for the Increased Senior Population in 2006 and Beyond.*)

As mentioned above, we have released a comprehensive report on the aging of the population in our region from 2000 to 2040. In *The Dual Challenge* we state our conclusion clearly and directly. The local aging services network should be investing resources and preparing to triple our capacity to serve the oldest old while also re-tooling to address the needs of the upcoming Baby Boomers. Instead, we are moving backwards. In fact, the very survival of local aging networks is in jeopardy, particularly in Sacramento County where budget reductions have been the most severe.

We believe that securing the support of the community at large is the only way to ensure that vital services are available to the frail and preventative services are accessible to those who would become frail. Our report ends with specific recommendations for individuals, educators, local governments, health care providers, community-based organizations, faith-based groups and the private sector. In short, each of these stakeholder groups must begin to think about building day care and other programs and systems for frail elders on a scale that matches what they offer for children. In another decade, the number of seniors living in our service area will exceed the number of children living here. Many more community resources will be needed to prevent frail elders from falling into dependence on long term care and overwhelming the health care system as a whole.

Section III.

Discuss the objectives set for the preceding year that were completed, deleted, and/or changed or remain incomplete and the circumstances that affected progress toward achieving specific goals, resulting in revised objectives. Status of objectives can be written in a narrative or objective-by-objective format.

A4AA's five major administrative goals, as outlined in Section A of the Amendments to the 2007-08 Area Plan Update, are as follows: 1) Develop New Relationships and Enhance Existing Partnerships with Community Agencies, 2) Enhance Existing A4AA Programs and Services, 3) Develop New Programming to Address Unmet Needs, 4) Improve the Effectiveness of Advocacy, and 5) Be a Visible and Strong Proponent of Dignity and Independence. Goals six through eleven (included in Section B of our Plan) identify direct and contracted services by funding title.

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. Generally, objectives are written as one year objectives, beginning on July 1st and ending on June 30th.

The terms used to describe the Year End Status of each objective are defined below.

- **Completed** means the activity was finished as written by June 30th.
- **Incomplete** means the activity was not finished as written by June 30th. Nevertheless, the activity may continue in some form in the 2009-10 fiscal year; if so, it would appear in the new three-year Area Plan.
- **Discontinued** means that at some point during the last half of 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 2008-09 appears in Table A below. Among the 82 active objectives listed, 78 were Completed and just 4 were not, yielding a completion rate of 95%.

TABLE A: OBJECTIVES SUMMARY, 2008-09 YEAR END STATUS

Amended 2008-2009 Objectives	Type*	Year End Status
1.1 Transportation Issues		
Transportation Advocacy 1.1(a)	C	Completed
Medical Appointment Coordination Project 1.1(b)	C	Completed
1.2 Housing Issues		
Housing Advocacy 1.2(a)	C	Completed
Promotion of Universal Design 1.2(b)	C	Completed
1.3 Health and Wellness Issues		
Proposition 63 Mental Health Funding 1.3(a)	C	Completed
Mental Health Conference 1.3(b)	C	Completed
Health Promotion Activities 1.3(c)	A	Completed
Advance Care Planning Project 1.3(d)	C	Completed
Nutrition Activities 1.3(e)	C	Completed
1.4 Financial Security Issues		
Medicare Issues 1.4(a)	A	Completed
Social Security Issues 1.4(c)	A	Completed
1.5 Elder Abuse Issues		
Elder Abuse Prevention Training 1.5(a)	C	Completed
1.6 Educational Opportunities		
Lifelong Learning 1.6(a)	C	Completed
1.7 Social Service Centers for Seniors		
Focal Point Re-designation 1.7(a)1	C	Completed
Marysville Senior Center Expansion 1.7(c)	C	INCOMPLETE
1.8 Coordination of Senior Services		
2-1-1 Central Information System 1.8(a)	C	Completed
Long-Term Care Integration 1.8(b)	C	Completed
Adult Day Services 1.8(c)	C	Completed
Commissions on Aging 1.8(d)	C	Completed
Disaster Preparedness Coordination 1.8(f)	C	Completed
Planning for Aging Boomers 1.8(g)	C	Completed
1.9 Aging Research		
Aging Boomer Study 1.9(d)	C	Completed
1.10 Cultural Issues		
Cultural Competency Enhancement 1.10(a)	C	Completed

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

Amended 2008-2009 Objectives (continued)	Type*	Year End Status
2.1 Information and Assistance Services		
Provider Meetings 2.1(a)	A	Completed
Assistive Technology 2.1(c)	A	Completed
HICAP Coordination 2.1(d)	A	Completed
2.2 In-Home Services		
Home-Delivered Meal services 2.2(a)1	A	Completed
Medication Management services 2.2(b)	A	Completed
Senior Companion services 2.2(d)	A	Completed
Home Modification services 2.2(e)1	A	Completed
2.3 Community Services		
Congregate Meal services 2.3(a)1	A	Completed
Congregate Meal services 2.3(a)2	A	Completed
Transportation services 2.3(b)	A	Completed
Legal services 2.3(c)	A	Completed
Mental Health services 2.3(d)	A	Completed
HICAP services 2.3(f)	A	Completed
Ombudsman services 2.3(g)	A	Completed
2.4 Caregiver Services		
Caregiver Provider Meetings 2.4(a)	A	Completed
A4AA Grandparent Services 2.4(b)1	DS	Completed
A4AA Grandparent Services 2.4(b)2	DS	Completed
A4AA Grandparent Services 2.4(b)4	DS	INCOMPLETE
A4AA Grandparent Services 2.4(b)5	DS	Completed
2.5 Provider Training and Support		
On-line Data Reporting Training 2.5(b)	A	Completed
3.0 Program Development Objectives		
Driving Wellness 3.1(c)	PD	Completed
Falls Prevention Coalition & Needs Assessment 3.2(b)1	PD	Completed
Falls Prevention Coalition & Needs Assessment 3.2(b)2	PD	Completed
Falls Prevention Program Expansion 3.2(c)	PD	Completed
Veggie Van Project Expansion 3.3(b)	PD	Completed
Men's Cooking Classes 3.4	PD	INCOMPLETE
Drop-In Respite Program Module 3.5	PD	Completed
Disaster Preparedness Program Kit 3.6(b)	PD	INCOMPLETE
Disaster Planning 3.6(c)1	PD	Completed
Disaster Planning 3.6(c)2	PD	Completed
Continuous Quality Improvement Module for Senior Nutrition 3.7	PD	Completed

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

Amended 2008-2009 Objectives (continued)	Type*	Year End Status
<i>4.0 Advocacy Objectives</i>		
Coordinated Approach 4.1(a)	A	Completed
Coordinated Approach 4.1(b)	A	Completed
Coordinated Approach 4.1(c)	A	Completed
Advocacy Orientation 4.2(a)	A	Completed
Advocacy Orientation 4.2(b)	A	Completed
<i>5.2 Greater Understanding</i>		
Media Stories 5.2(a)	A	Completed
Community Education Presentations 5.2(b)	C	Completed
A4AA Website 5.2(c)	A	Completed
<i>6.0 Supportive Services (Title III-B)</i>		
All Contracted III-B Services 6.1(a) thru (i)	CS	Completed
Information & Assistance 6.2(a) and Sr. Employment 6.2(e)	DS	Completed
<i>7.0 Nutrition Services (Title III-C)</i>		
All Contracted III-C Services 7.1(a) thru (c)	CS	Completed
Nutrition Education 7.2(a)	DS	Completed
<i>8.0 Disease Prevention/Health Promotion Services (Title III-D)</i>		
Contracted III-D Services 8.1(a)(b)(d)(e)	CS	Completed
Driving Wellness Program 8.2(a)	DS	Completed
Falls Prevention Program 8.2(b)	DS	Completed
<i>9.0 Ombudsman & Elder Abuse Prevention Services (Title VII)</i>		
All Contracted VII Services 9.1(a)(b)	CS	Completed
<i>10.0 Family Caregiver Services (Title III-E)</i>		
Contracted III-E Services 10.1(a) thru (d) & (f)(h)(l)(m)(n)(o)	CS	Completed
Direct III-E Services 10.2(b)(e)(f)(g)	DS	Completed
<i>11.0 Community Based Services and Programs (CBSP)</i>		
Contracted CBSP Services 11.1(a)(b)(d)(e)	CS	Completed

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

Section IV.

Provide a brief written statement summarizing the **Title III D and Medication Management** activities provided in the PSA.

8.1 Contracted Title III-D Services

Contract with appropriate agencies to provide the following services in one or more counties:

- a) Community Education d) Therapy
- b) Comprehensive Assessment e) Medication Management

Year End Status: COMPLETED

A4AA contracted with Placer County Health and Human Services to provide community education and comprehensive assessment to seniors in Placer County. A4AA contracted with Easter Seals to provide therapy to seniors in Sacramento via the warm water pool program. A4AA contracted with Home Health Care Management to provide medication management services to rural homebound seniors in Placer, Sutter, Yolo and Yuba Counties.

8.2 Direct Title III-D Services

- a) Driving Wellness Program

A4AA will conduct at least two Driving Wellness and two Car Fit workshops for the purpose of providing older adults with health promotion information specific to safe driving practices. Workshops vary in length and are typically offered at a variety of locations throughout the service area. *Program Specialist & FT Program Manager, Senior Program Manager.*

Year End Status: COMPLETED

During the 2008-09 fiscal year, A4AA sponsored two Driving Wellness classes in Sacramento County, one in Citrus Heights and one at Stanford Settlement. Area 4 also held three Car Fit events, one each in Davis, Citrus Heights and Walnut Grove.

- b) Falls Prevention Program

A4AA will conduct multiple Falls Prevention Workshops at senior centers, nutrition sites and community events for the purpose of providing older adults with health promotion information specific to reducing the risk of falls and fall-related injuries in the home or elsewhere. *HT Program Manager & Assistant Director, Nutritionist, Planner, Program Specialist, PT Program Manager.*

Year End Status: COMPLETED

During 2008-09, A4AA conducted four fall prevention workshops at the Asian Community Center's (ACC's) Greenhaven Terrace in Sacramento. A total of 41 people participated in nutrition, medication management, exercise, and environmental safety workshops. Behavior changes were encouraged in the older adults by providing coupons for limited, free attendance of ACC's strength, balance, and fitness classes.

Section V.

AAAs that expended Title III B funds for **Program Development (PD) or Coordination (C)** activities during the period covered by the Year-End Report must include an explanation of the status of each of the PD or C objectives. The explanation must clearly indicate what objectives were achieved and, as appropriate, explain why any PD or C objectives were deleted or extended into the next fiscal year. (See Part Two Section B, in the Guidance for further reporting requirements relating to PD or C objectives.)

Table A above lists 32 active Program Development and Coordination objectives. Of these, 29 were Completed and 3 were not, yielding a 91% completion rate. Details for the objectives that were not completed are as follows:

INCOMPLETE COORDINATION (C) OBJECTIVES:

Marysville Senior Center Expansion 1.7(c)

During the spring of 2009, the County of Yuba gave notice to the 14th Street Senior Center in Marysville that it intended to close the building in June due to the poor condition of the structure. As of June 30, 2009, a new site for the senior center had not been found; the County agreed to extend the Senior Center's lease until an alternate site was secured. Prior to and following June 30, the Area 4 staff liaison has worked with the Yuba County Seniors, the Yuba County Commission on Aging, County staff and the A4AA-funded nutrition provider operating at the site to ensure there is no break in congregate nutrition services when the program is re-located.

INCOMPLETE PROGRAM DEVELOPMENT (PD) OBJECTIVES:

Men's Cooking Classes 3.4

Area 4 was not able to recruit a sufficient number of men to warrant holding a class in the allotted timeframe, given limitations on availability of staff. A class is planned for the fall of 2009.

Disaster Preparedness Program Kit 3.6(b)

Area 4 staff coordinated with a volunteer from Volunteer Organizations Active in Disasters (VOAD) to assist with completion of A4AA's Disaster Preparedness Kit. Though some progress was made, it was determined midway that the printed Kit be abandoned for a web page that will more effectively inform seniors, caregivers, and providers on how to prepare and respond to disasters. This is scheduled to be accomplished during the 2009-2010 fiscal year.

Section VI.

Provide a **summary of activities for the year**, including discussion of how the AAA will use the prior year findings to improve the service delivery system.

It has been another difficult fiscal year for the local aging services network. Although we have seen modest increases in federal dollars, the municipalities and nonprofit organizations with whom we contract continue to be adversely affected by dwindling funding streams resulting from the weak economy. During 2008-09, five contracts were ended, four because of service providers' inability to continue operating at a loss. In addition, our Ombudsman provider lost nearly half of their funding, and the new 2009-10 fiscal year has begun with even deeper reductions.

On July 3, 2008 our nutrition provider for Yuba and Sutter Counties announced their decision to close their doors, ending congregate and home-delivered meal services in that area a few weeks later. A4AA issued an RFP to which there were no local applicants. With a great deal of effort on the part of Area 4 staff and local senior advocates, contracts were established to provide congregate meals through PSA 3's nutrition provider and to provide home delivered meals via UPS drivers through a company based in Iowa.

The same Yuba-Sutter organization announced that they would discontinue their medical transportation contract mid-year for financial reasons. Although they subsequently agreed to keep the service going until the high mileage transportation van broke down at which time, with no funds for repairs, they would end the program. Therefore, A4AA issued an RFP and was able to locate a new provider that is initiating a transportation voucher program. Also mid-year, one of our drop-in respite providers in Sacramento County was forced to discontinue their contract when their parent organization disbanded. Again, A4AA issued an RFP and funding was awarded to an existing Drop In Respite provider to add an additional day to their program. Participants of the previous program were encouraged to transition to the new program. Finally, Area 4's Governing Board decided not to renew a Sacramento County transportation contract with a provider having legal and administrative difficulties. Unexpended funds were reallocated to an existing transportation provider in the area, and affected clients were encouraged to transition along with that program.

Ombudsman funding was greatly reduced in January 2009. Seven staff positions were eliminated; all remaining salaries were reduced, some staff hours were cut. There was also reduced mileage reimbursement for volunteers, and most critically for seniors, the number of facility visits were reduced thus exposing residents to more pain and suffering without timely intervention.

Looking ahead, 2009-10 has already been the most devastating year yet for the aging network, due primarily to the state budget "solution" that was passed in August of 2009. The state's actions to balance the budget included the complete elimination of the Community Based Services Programs (CBSP) effective October 1st 2009. In our service

area, that means discontinuing long-standing contracts to provide Linkages, Brown Bag and two Alzheimer's Day Care Resource Center (ADCRC) programs.

At this time, we are aware of two focal points that are relying upon fundraising to keep their doors open and at least two other service providers that are operating on a month-to-month basis. In sum, we are more concerned about *preserving* the service delivery system than improving it at the present time.

Section VII: Final Year-End Report of the Four-Year Period

The final Year-End Report for the four-year period must include a discussion of the impact of activities undertaken during the entire planning cycle and how the AAA will use these findings in the planning process to enhance or improve the local service system.

In reflecting back over the entire 2005-09 planning cycle, the common theme that carries through is one of Area 4's commitments coming to fruition. This is apparent in three areas: long-term projects, fiscal responsibility and organizational leadership.

A4AA has tackled three major projects during the past cycle, and each has led to enhanced working relationships with outside agencies. Beginning in 2005, we used Program Development (PD) dollars to initiate a Driving Wellness program, adapted from ASA's *Road to Driving Wellness* curriculum. Over time, the "Car Fit" component was integrated and the program was refined. The success of the program captured the attention of the California Highway Patrol and eventually led to us working with them on the production of a video about traffic safety for older drivers.

Concurrently, A4AA developed and launched a Fall Prevention Program (Live Strong and Safe), also using PD dollars at the start. Later, that program received an award from the National Association of Area Agencies on Aging (N4A). This effort led to our involvement in the Archstone Foundation grants for fall prevention. Today, we are actively involved with the statewide Fall Prevention Center of Excellence which is operated by the California Department of Health Services and the Andrus Gerontology Center at USC.

A third long-term project is the aforementioned *Dual Challenge* report. One of the sponsors for the rollout event was AT&T. That relationship progressed a few months later when they offered to fund production of a video version of the report. They plan to share that video with all of their California-based workers, roughly 300,000 people.

Area 4 continues to perform well as a fiscally responsible agency. This has contributed to a positive, ongoing relationship with US Bank. For four consecutive years the bank has awarded us small grants for computer upgrades and enhancements to A4AA's conferencing capabilities. This past fiscal year they doubled that grant from \$5,000 to \$10,000. In 2008-09 A4AA was also fortunate to be selected to receive a Cargill grant. It provides funding to the agency for expanding the hours of the previous part-time Senior Employment Specialist and allowing the program to serve persons 55 – 59 who cannot be served with OAA funding.

Finally, strong organizational leadership has brought added attention to Area 4. During the 2005-09 planning cycle, two of our Advisory Council chairs were also selected to chair the Triple-A Council of California (TACC). And, past and present Governing Board chairs have also been visible in the community in support of A4AA goals and activities. We look to continue building on our successes in the years ahead.