

## ADVISORY COMMISSION ON AGING

### General Session Agenda

Monday, July 10, 2023

9:15am – 11:45am

#### In-Person

**Maxwell Park Conference Room**  
**6955 Foothill Blvd. Suite 137/143**  
**Oakland, California 94605**

**TELECONFERENCING GUIDELINES:** FOR TELECONFERENCED COMMISSION MEETINGS, MEMBERS OF THE PUBLIC MAY OBSERVE AND PARTICIPATE IN MEETINGS BY FOLLOWING THIS LINK: [ZOOM LINK](#) DIALING IN: +1 669 900 6833 US (San Jose). Meeting ID: 899 2454 4024 | Passcode: 839169

Public participation at Commission meetings is encouraged. We request that individuals limit their comments on any single item on the agenda to two minutes. The chosen spokesperson for a group may speak for four minutes.

Agenda Item	Material Provided	Presenter	Time
Call to Order/Roll Call	<a href="#">Brown Act Changes Eff. 01/01/23 p. 106</a>	Chair Watters	9:15—9:20
Approval of May 2023 ACA Meeting Minutes		Chair/Commission	9:20 – 9:25
Comments from the Public for Items not on the agenda		General Public	9:25 – 9:35
Comments from the ACA Chair	<a href="#">p. 6-23</a>	Watters	9:35 – 10:05
ACA Library		Watters	10:05 – 10:15
Area Agency on Aging Director Report		Jennifer Stephens-Pierre, SSA	10:15 – 10:30
2023-2024 Area Plan Update (APU) Review & Approval Countywide Area Plan (CWAP) 2024-28 Progress Report	<a href="#">p.29-105</a> <a href="#">p. 24-28</a>	McMichael-Cady, CWAP/MPA Committee Chair	10:30 – 11:15
Commission Committee Reports <ul style="list-style-type: none"> <li>Executive</li> <li>Service Delivery</li> <li>Public Relations</li> <li>No Wrong Door (NWD)</li> <li>Budget and Funding</li> </ul>	(5 min per report)	Committee Members	11:15—11:35
Oral Communications/Announcements		Commissioners/Staff/	11:35—11:45

		Public	
Adjourn		Commission	11:45

**Next ACA General Session Committee is scheduled for Monday, August 14, 2023 9:15am—11:45pm**

Check website [Advisory Commission on Aging \(alamedacountysocialservices.org\)](https://www.alamedacountysocialservices.org) for update.

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### Notes

**ADVISORY COMMISSION ON AGING (ACA)**  
**Commission Meeting Minutes**  
**Monday, June 12<sup>th</sup>, 2023 | 9:15am to 11:45am**  
**Maxwell Park Room, Eastmont Mall, Ste 143**

<p><b><u>ACA Commissioners Present</u></b>  Laura McMichael-Cady (Chair)  Kester Watters (Vice-Chair)  Dr. Linda Boykins  Sukvinder Waraich  Howard Kirsch  Florence Raskin  Barbara Price  Bobby Grant  Gursewak Singh Dhaliwal  <i>*in person unless otherwise noted</i></p> <p><b><u>Commissioners Absent</u></b>  Donna Griggs-Murphy/Excused</p>	<p><b><u>County of Alameda Staff Present</u></b>  Sonya Frost (Division Director)  Jennifer Stephens-Pierre (AAA Director)  Esperanza Contreras  Janine Carlson  Charles Jones  Diarra Piggue  Mariana Austin  Marlisa Davis  Kim Fogel  Deborah Cooper</p>
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Item	Discussion / Recommendations
A. CALL TO ORDER Welcome & Introductions Adopt agenda	Meeting Chaired by Laura McMichael-Cady called to order at 9:21am. Roll Call of Commissioners Quorum achieved.
B. REVIEW AGENDA.	Agenda reviews and approved as read.
C. APPROVE MINUTES	Motion to accept meeting minutes from 05/15/2023: (M) Watters (S) Raskins Approved.

Andrea Ford, Agency Director

D. COMMENTS FROM THE PUBLIC	None
E. ELECTION OF 2023-2024 ACA CHAIR AND ACA VICE CHAIR	<ul style="list-style-type: none"> <li>The Nomination Committee has received the following names for election: <ul style="list-style-type: none"> <li>ACA Chair: Commissioner Watters Unanimously elected.</li> <li>ACA Vice-Chair: Commissioner McMichael-Cady Unanimously elected.</li> </ul> </li> </ul>
F. RETREAT REPORT	Please refer to the meeting agenda for the document.
G. CWAP UPDATE	Please refer to the end of this document for the CWAP Update presentation
H. AAA DIRECTOR'S REPORT (J. Stephens-Pierre)	<ul style="list-style-type: none"> <li>AAA met with LIFE Eldercare regarding their transition to the Institute on Aging.</li> <li>Budget: Please see attached budget at the end of this document.</li> <li>ADRC updates: <ul style="list-style-type: none"> <li>There was a core training for Polco on May 23<sup>rd</sup> and it included staff from other agencies besides AC Social Services.</li> <li>The new phone number is active and has been added to the website.</li> <li>The anticipated website launch date is mid-July.</li> <li>CNA training: Please see attached information at the end of document.</li> </ul> </li> <li>APU: Please see attached presentation at the end of the document.</li> </ul>
I. COMMITTEE REPORTS	<ul style="list-style-type: none"> <li><b>Executive Committee</b> (L. McMichael-Cady) – No report.</li> <li><b>Service Delivery</b> (G. Dhaliwal) – No report.</li> <li><b>Public Relations &amp; Senior Update</b> (L. McMichael-Cady) – No report</li> <li><b>No Wrong Door</b> (K. Watters) <ul style="list-style-type: none"> <li>The Committee met on 05/18, with the next meeting on 06/22. Questions were submitted to AAA regarding the quality assurances for discussion on June meeting.</li> </ul> </li> <li><b>MPA/ CWAP</b> (H. Kirsch)</li> </ul> <p><b>ACTION ITEM:</b> AAA to share the Masterplan summary with the Committee.</p>



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Andrea Ford, Agency Director

	<ul style="list-style-type: none"> <li><b>Budget &amp; Funding</b>– No report.</li> </ul>
J. ORAL COMMUNICATIONS AND ANNOUNCEMENTS	<ul style="list-style-type: none"> <li>None</li> </ul>
K. OTHER ITEMS	<ul style="list-style-type: none"> <li><b>Next Meetings:</b> Executive Committee: Monday, May 22, 2023, at 9:00AM Public Relations Committee: Monday, June 12, 2023 at 8:45AM ACA Commission Meeting: Monday, June 12, 2023 at 9:15AM</li> </ul>
L. ADJOURNMENT	Meeting adjourned at 12:00 PM



# Better Relationship



July 2023



# Better Relationship



Everyone here works hard. County staff is energetic and helpful. Commissioners give of their time voluntarily.

We all have the same mission: help the seniors of Alameda County. But we can do better.

July 2023



# Better Relationship



At the June meeting the ACA was asked to suggest some ways in which we can be more of a team.

We here propose some rules and protocols.

We suggest that if we can agree, remember, and abide by rules and protocols our interactions will go smoother.

July 2023



# Better Relationship



There are five areas that we address:

- Programs and Projects
- Meetings
- Committees
- Getting Information
- Efficiency

July 2023



# Better Relationship Programs and Projects



Maintain a log of all programs  
and projects under way.  
Update this log as often as  
necessary.

July 2023



# Better Relationship Detail for Each Program and Project



## Well Defined

Purpose, goals and objectives.

## Staffing

Primary responsibility. Size of team.

## Measurable

Progress should be quantifiable. The impact on seniors should be demonstrated.

July 2023



# Better Relationship Detail for Each Program and Project



## Budget

When possible: funds allocated, their source, targeted expenditure. Should be a living document updated as necessary.

## Plans

Enough detail to track progress and determine ACA involvement. Identify dates and specific output or result at milestones. Should be a living document updated as necessary.

July 2023





# Better Relationship Meetings



- Stay focused on specific agenda item or question.
- The ACA chair is responsible for maintaining order and keeping the meeting on the agenda.
- A speaker must be recognized by the chair before speaking.
- A dialog between two participants will be honored without further need for recognition.
- No one may interrupt a speaker except the chair to stay on the agenda.
- Any speaker who is interrupted by the chair must respect the request.

July 2023



# Better Relationship Committees



- Committees should reduce the time commitment for all concerned.
- There is no redundancy of information.
- Committees get detail, ACA gets summary.
- Anyone interested in detail may attend the committee meetings.

July 2023



# Better Relationship Committees



- ACA Committees are independent of, and have different goals than, AAA working committees.
- Keeping committees involved at whatever level of detail they deem appropriate will provide the opportunity to take advantage of advice and suggestions.
- The ACA General Meeting should only get summary information unless a commissioner has questions.
- The majority of the General Meeting should be taken up by committee reports.
- The ACA Executive Committee only deals with meeting agenda and administration.

July 2023



## Better Relationship Getting Information



We need to change from  
"Here's what we have done" to  
"Here's what we are doing".

July 2023



## Better Relationship Getting Information



- The commission must have information.
- The commission requests information as text whenever possible. Verbal elaboration is difficult to absorb and evaluate
- Listen carefully to get the intent behind a question.
- Items for Director's and Chair's reports should be part of meeting materials.
- Having access to such material will eliminate many question during meetings

July 2023



# Better Relationship Getting Information



- Understanding comes through dialog.
- Dialog involves questions, discussion, more questions, and more discussion until the information needed is understood.
- Only the person seeking information can decide if they get what they seek.
- Providing information is the duty of the staff.
- Offering advice is the duty of commissioners. It does not imply disrespect for the work.

July 2023



# Better Relationship Efficiency



SSA/AAA staff have more work and not enough time. They need to find ways to increase their productivity. We owe it to them to make the most of the time they are available.

Commissioners are volunteers. Their time is limited. We owe them the respect of keeping meetings effective, making the most of the time we have.

July 2023





# Efficient Use of Time a Goal for Commissioners



- Commission Meeting 2 hours  
Required for all
- Executive Committee Meeting 1 hour  
Required for all Committee Chairs **Commissioners: 4 hours  
Committee Chairs 5 hours**
- Committee Meeting 1 hour  
Required for all Committee Members
- Independent Research and Review 1 hour  
Required for all Committee Members
- Field Work, Webinars, Documentation...be Generous  
Volunteer

July 2023





# Better Relationship Efficiency



## Focus

Stay focused on the question or subject.

## Clarity

Clearly state information.

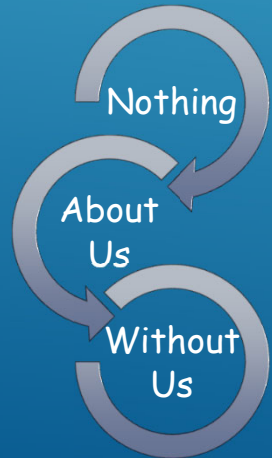
## Set Standards

Routine and standards eliminate trying to organize from scratch

## Organize Information

Information should not be buried in emails or chat but organized in a searchable library.

July 2023



# Better Relationship Efficiency



## Active Commissioners

Research, attend webinars, write opinions, do field work, ask questions.

## Continuity

Each meeting builds on the previous one. Commitments are followed up.

## Transparency

The more information is shared the fewer questions are required for understanding.

July 2023



# Thank You



Comments,  
suggestions,  
concerns will be  
gratefully  
considered

July 2023



# UPDATE

**ALAMEDA COUNTY:  
WHERE AGING IS ALL  
ABOUT LIVING**

**AREA AGENCY ON AGING  
COUNTYWIDE AREA PLAN  
(CWAP), 2024-2028**

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**PRESENTERS:**

**JENNIFER STEPHENS-PIERRE  
DIRECTOR, AREA AGENCY ON AGING  
KIM FOGEL  
MANAGEMENT ANALYST, AREA AGENCY ON AGING**

**July 10, 2023**





# CWAP 2024-2028: LAUNCHING

## ➤ Survey Planning and Launch

\***AAA Steering Committee** - Bringing staff and stakeholders together to steer an inclusive, effective planning process. July meetings: 7/7/23 and 7/21/23.

\***ACA CWAP Committee** – the Advisory Commission on Adult and Aging is required to approve the Area Plan. All commissioners have received copies of the survey, and the committee is organizing a focus group to test it.

\***AAA “Soft Launch”** – survey hard copies and QR codes distributed at County Fair and United Seniors Convention on 6/30/23. Fifteen responses received as of 7/3/23.

## ➤ Updated Timeline

## ➤ The Surveys: County and State

## ➤ Next Steps







# CWAP 2024-2028: PROGRESS REPORT

- Electronic survey will be tested by a focus group selected by the Advisory Commission on Aging.
- Survey was introduced 6/30/23: United Seniors of Oakland and Alameda County Convention and Alameda County Fair.
- Steering Committee will plan marketing, public forums, focus groups, outreach at events, and outreach to difficult-to-reach seniors and caregivers.
- Languages: Agency has contract with written translation service; verbal interpretation if requested will be provided by staff and/or contracted services.





# UPDATED TIMELINE

**6/30/23**

County Needs Assessment Survey “soft launched” at two public events.

**July 2023 – October 2023**

Marketing/County Survey/Focus Group/Community Forums.

State needs assessment survey will also be released, starting with a random sample from each zip code and later opening up to full community participation.

**November 2023 – December 2023**

Compiling and evaluating survey results



**January 2024**

Write the Plan

Present Plan to Advisory Commission on Aging (ACA)

**February 2024**

Public Hearing for Plan during ACA

**March 2024**

Present Plan to ACA for Approval to submit to BOS

**April 2024**

Present Plan to BOS for Approval to submit to CDA

**May 2024**

***Area Plan due to CDA May 1, 2024***







**QUESTIONS? [CWAP@ACGOV.ORG](mailto:CWAP@ACGOV.ORG). THANK YOU!**



**TRANSMITTAL LETTER**  
**2020-2024 Four Year Area Plan/ Annual Update**  
**Check :** ☐ **FY 20-24** ☐ **FY 21-22** ☐ **FY 22-23** ☒ **FY 23-24**

**AAA Name:** County of Alameda

**PSA \_\_0\_9**

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

1. Nate Miley

\_\_\_\_\_  
Signature: Governing Board Chair

\_\_\_\_\_  
Date

2. Kester Watters

\_\_\_\_\_  
Signature: Advisory Council Chair

\_\_\_\_\_  
Date

3. Jennifer Stephens-Pierre

\_\_\_\_\_  
Signature: Area Agency Director

\_\_\_\_\_  
Date

Approved as to Form

DONNA R. ZIEGLER, County Counsel

By Victoria M

Print Name VICTORIA M

**SECTION 7. PUBLIC HEARINGS****PSA 09**

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

<b>Fiscal Year</b>	<b>Date</b>	<b>Location</b>	<b># of Attendees</b>	<b>Presented in languages other than English? Yes or No</b>	<b>Was hearing held at a Long-Term Care Facility? Yes or No</b>
<b>2020-2021</b>	3/9/2020	6955 Foothill Blvd Oakland, CA 94605	30	No	No
<b>2021-2022</b>	3/8/2021	Virtual Format via Zoom	30	No	No
<b>2022-2023</b>	2/14/2022	Virtual Format via Zoom	17	No	No
<b>2023-2024</b>	5/25/2023	Virtual Format via Zoom	12	No	No

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

1. Summarize the outreach efforts used in seeking input into the Area Plan from institutionalized, homebound, and/or disabled older individuals.  
The planning process for the Countywide Area Plan, which included the needs assessment, was a public process involving a large contribution of community input and was published via the Alameda County website. Members of the public were invited to contribute at meetings throughout the year as well as the meetings where the plan was discussed and adopted. Focus groups were held in a skilled nursing facility and senior housing.

A virtual public hearing was held for this APU on May 25, 2023. The hearing was publicized as follows:

- Flyer revised per Commission feedback and provided to Commissioners for distribution to their networks
- Flyer posted on website in Agency core languages and on Social Services Agency's social media
- Flyer distributed through AAA's senior information contact list (over 500 providers and consumers) and through AAA listserv of commissioners and providers.
- Flyer distributed and event announced at a town hall for seniors in Alameda County's unincorporated area, hosted by the president of the County Board of Supervisors and attended by approximately 75 residents and service providers.

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

☒ Yes. Go to question #3

☐ Not applicable, PD and/or C funds are not used. Go to question #4

2. Summarize the comments received concerning proposed expenditures for PD and/or C  
The AAA presented the budget to an audience of approximately 12, including 8 non-County employees (4 members of the Advisory Commission on Aging and 4 members of the public.) No comments were received on this topic.
3. Were attendees provided the opportunity to testify regarding setting minimum percentages of Title III B program funds to meet the adequate proportion of funding for Priority Services? Yes

☒ Yes. Go to question #5

☐ No, Explain:

4. Summarize the comments received concerning minimum percentages of Title IIIB funds to meet the adequate proportion of funding for priority services. Attendees emphasized housing and legal services.
5. List any other issues discussed or raised at the public hearing. Needs of LGBTQIA+ seniors and community environmental issues that directly affect senior residents' health.
6. Note any changes to the Area Plan which were a result of input by attendees. Comments will be incorporated into the upcoming Area Plan for 2024-2028.

**SECTION 9 - AREA PLAN NARRATIVE GOALS AND OBJECTIVES**    **PSA 09**

**Goal 1:** Promote and enhance healthy aging throughout the lifespan by planning, developing, and sustaining an Age-Friendly County of Alameda in the County's unincorporated areas, supporting healthy aging across the operations of all County government departments, and working in collaboration with Age-Friendly cities in all regions of the county.

**Rationale:** *An Age Friendly Community includes the voice of older adults and leverages the alignment of CBO's, Cities, County departments and State initiatives to better support the growing number of older adults to age well.*

<b>Objective Number(s) and Objective(s)</b>	<b>Project Start and End Dates</b>	<b>Title IIIB Funded PD or C</b>	<b>Update Status</b>
1.1 - AAA Director and staff will collaborate with the County of Alameda Council for Age-Friendly Communities (Age-Friendly Council), which includes cities, citizens, community stakeholders, and non-OAA funded agencies to coordinate efforts to effect policy and system changes that enhance the overall well-being of older adults who live in Alameda County.	7/1/20- 6/30/24	C	The Council is a forum for expanding resources, services, and access to services and increasing collaboration among various community stakeholders. AAA Director sits on Age Friendly Council and is also a member of several committees. Recent accomplishments: 1) submission of Age Friendly County application to AARP and; 2) roll out of the six-part training series for staff and providers entitled the "Alameda Geriatric Workforce Enhancement Program" (GWEP). For details about GWEP, please see Section 2.8. (Hyperlinks will be added)

1.2 - Allocate a Project Management or Staff resource to assist in World Health Organization (WHO)/AARP activities, which include the following: 1) work with the Age-Friendly Council and AAA to engage older adults and collaborative partners, 2) advance Alameda County's support of city efforts to become Age-Friendly Communities, 3) align with state age-friendly efforts and 4) fulfill WHO/AARP required activities.	7/1/20-6/30/24	Admin	The AAA Director is filling this role in order to utilize their experience with the AAA, Social Services Agency, and County to fulfill these goals. Exhaustive efforts with the 2020 survey and public forums and focus groups yielded the data that was used for the Age Friendly Community application. AARP approval would open up potential for funding to target efforts that align with the National Age Friendly initiative and the state Master Plan on Aging.
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**Goal 2:** Establish a coordinated method of assessing, designing, delivering and measuring the effectiveness of programs for older adults.

***Rationale:*** All systems must be aligned and coordinated in order to effectively respond to the needs of the growing number of older residents, their increasing economic insecurity, and systemic inequities and their resulting disparities. The County has a leadership role in developing policy, infrastructure, and measurements that track the effectiveness of all programs that touch the lives of older adults.

Objective Number(s) and Objective(s)	Project Start and End Dates	Title IIIB Funded PD or C	Update Status
2.1 The AAA is moving closer to meeting this goal by applying Results-Based Accountability to all of the 90 Contracts it manages with approximately 50 different Community-Based Organizations (CBO's), totaling over \$20M. CBO's are required to submit data to AAA and directly to the State detailing service deliverables. Data can include: counts of services delivered, client counts, sign-in sheets, program narrative reports and/or progress toward program performance goals. Prior to	7/1/20-6/30/24	Admin	The Social Services Agency is negotiating a contract with a new vendor to streamline CBO data reporting to AAA and the State. Based on experience of other AAAs that have done the same, the new software is expected to eliminate staff time spent on resolving errors and facilitate analysis of the data submitted by CBOs to identify program trends, make policy and funding decisions, and for ongoing program development.

<p>payment of invoices, documentation is reviewed and validated, as well as analyzed to identify program trends, make policy and funding decisions, and for ongoing program development.</p> <p>The Social Services Agency, which houses the AAA, introduced a database used by vendors to directly enter RBA data and enables Agency departments including AAA to more easily monitor vendor performance. In addition, AAA conducts regular site visits in the first and third years of contracts to review: 1. Supporting documents for invoices; 2) Performance metrics; 3) Physical condition of the facility and inventory; 4) number of staff; and 5) Articles of Incorporation.</p> <p>For background: Service areas covered by these contracts include:</p> <ol style="list-style-type: none"> <li>1. Adult Day Care,</li> <li>2. Case Management,</li> <li>3. Community Services,</li> <li>4. Disease Prevention,</li> <li>5. Elder Abuse Prevention,</li> <li>6. Family Caregiver Support,</li> <li>7. Health Promotion,</li> <li>8. Health Insurance Counseling and Advocacy Services (HICAP),</li> <li>9. Information &amp; Assistance,</li> <li>10. Legal Services,</li> <li>11. Nutrition Programs,</li> <li>12. Ombudsman Program,</li> <li>13. Senior Employment,</li> <li>14. Senior Injury, Prevention, and Visiting</li> </ol>			
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<p>2.2 –To achieve a coordinated method of assessing, designing, delivering and measuring the effectiveness of programs for older adults, the AAA aims for 100 percent inclusion of all County Agencies in partnership. The AAA, which is housed within the Adult &amp; Aging Services department of the Alameda County Social Services Agency, will work in partnership with the Age-Friendly Council and Health Care Services Agency to coordinate efforts with other County Agencies to focus attention on expanding the number of Departments throughout the County that are working to develop and embrace common age-friendly programs, goals and approaches.</p>	<p>7/1/20-6/30/24</p>	<p>C</p>	<p>The AAA is leading the County to a coordinated method of assessing, designing, delivering and measuring effectiveness of programs for older adults by engaging in meetings and workgroups with Age-Friendly Council, including non-OAA funded agencies, and Health Care Services Agency to develop strategies and plan approaches to achieve full cooperation and engagement of all County departments involved in delivery of services to older adults. One example: the work of the County's Community Development Agency (ACCDA) with housing and street improvement advances safety and accessibility in neighborhoods. See Sections 4.15-4.17 for more about AAA's partnership with the ACCDA towards the goals of the Age-Friendly Community.</p>
<p>2.3 – The AAA will work in partnership with the Age-Friendly Council, Healthcare Services Agency, Community Development Agency and other public and nonprofit organizations to facilitate a Leadership Team to monitor progress and results of the County-Wide Area Plan for Older Adults. (CWAP)</p>	<p>7/1/20-6/30/24</p>	<p>Admin</p>	<p>The workplan for the County's Age Friendly Council is based on CWAP goals and reviewed and updated annually.</p> <p>The AAA collaborates with the Council to:</p> <ul style="list-style-type: none"> <li>• Identify and advance housing solutions for seniors</li> <li>• Develop and promote "Embracing Aging" training curriculum</li> <li>• Support inclusion of the voice of older adults in significant initiatives, starting with AC Care Connect</li> <li>• Promote data collection and reporting on older adults, starting with AC Care Connect</li> </ul>

			<ul style="list-style-type: none"> <li>• Pursue WHO designation as an Age Friendly County</li> <li>• Promote Age Friendly to cities</li> <li>• Join forces on legislative advocacy</li> <li>• Create backgrounders on key age-friendly topics, incorporating available data</li> <li>• Work with All In, Alameda County's poverty-fighting program, to reduce food insecurity for seniors</li> <li>• Build awareness around key issues</li> </ul>
2.4 – The AAA will work in partnership with the Age- Friendly Council, Healthcare Services Agency, Community Development Agency and other public and nonprofit organizations to facilitate a Leadership Team to monitor progress and results of the County- Wide Plan for older adults.	7/1/20-6/30/24	Admin	The workplan for the County's Age Friendly Council is based on CWAP goals and reviewed and updated annually. See section 2.3 above.
2.5 - The AAA Director and staff meet regularly with other Alameda County Departments, including non-OAA funded agencies, to develop, plan, and participate in Countywide projects in order to integrate, coordinate and enhance services for older adults.	7/1/20-6/30/24	C	<p>Examples of ongoing progress towards this goal:</p> <p>Aging and Disability Resource Connection (ADRC) – coordinate one-stop information and assistance with County departments and outside providers. In the last quarter, for example, the AAA received provided approximately 170 calls for ADRC services from senior and disabled residents. They were provided with Information and Assistance, short-term service coordination, and resource guides.</p>



			<p>Emergency Medical Services and Public Health quarterly meetings to coordinate senior injury prevention programs.</p> <p>Coordinate Older Adult Service Providers in partnership with County Behavioral Health Care Services</p> <p>Participate in Master Plan on Aging forums- cities and statewide</p>
<p>2.6 – The AAA will strengthen its collaboration with groups serving veterans and will focus attention on assisting veterans that are older adults with accessing benefits. The AAA will engage in countywide outreach through the CVSO, VAC, ACA, Age-Friendly Council, including non-OAA funded agencies, and Health Care Services Agency to identify and engage groups providing services to older adult veterans.</p>	<p>7/1/20-6/30/24</p>	<p>C</p>	<p>The AAA partners with the veterans' organization Swords to Plowshares, advocating and establishing coordinated services for older adults who are veterans.</p> <p>The anticipated outcome is the development of a broader coalition of community partners targeting attention, assistance, and access to older adult veterans in need of benefits.</p> <p>The AAA has also contracted with Swords to Plowshares to provide transportation services for senior and disabled veterans. See section 3.11</p>
<p>2.7 The AAA will identify and work in partnership with local and regional governmental and non-profit agencies, including non-OAA funded agencies, that are actively involved in disaster planning and response. The AAA has a disaster coordinator working with CDA and our local partners on disaster planning and response efforts. The needs of the older adult and physically impaired populations are considered, included, and integrated in the disaster planning process and response efforts.</p>	<p>7/1/20-6/30/24</p>	<p>C</p>	<p>The COVID-19 emergency that began at approximately the same time as the launch of this Area Plan has brought increased awareness of the need for AAAs and all local and regional public organizations to apply lessons learned for disaster preparedness. The Alameda County health officer noted at a recent community forum that the County has a long way to go to be prepared for its next emergency.</p> <p>The AAA's response includes:</p>

			<ol style="list-style-type: none"> <li>1. Holding weekly providers' meetings in response to COVID and continue to hold meetings bi-weekly after the state of emergency has been lifted to continue assessing service delivery and organizational needs.</li> <li>2. Serving on County Office of Emergency Services (OES) food service group. 211 created a food button on their website with the help of AAA. Continue to meet biweekly to continue discussing service delivery during covid for purpose of assessing service delivery and organizational needs in response to COVID.</li> <li>3. Awarding nutrition programs \$4.5M to build out their infrastructure with critical items such as vehicles, freezer buildout, and shelf stable foods to serve as many as possible and meet growing demand.</li> <li>4. Hosting several presentations by public health officers for providers at our Information and Assistance Roundtables, as well as directly to providers.</li> <li>5. Working with providers, the Advisory Commission on Aging, local and regional governmental and non-profit agencies, including non-OAA funded agencies, and the public to ensure the 2024-2028 Area Plan assesses and responds to disaster preparedness needs of Alameda County's seniors. The survey for the 2024-2028 Countywide Area Plan will also gather data</li> </ol>
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			<p>to further assess seniors' needs for information and assistance with emergency preparedness.</p> <p>For more details on the County's disaster preparedness for seniors, please see Section 4.6 and Section 12.</p>
<p>2.8 – The AAA, in partnership with the Age-Friendly Council, non-profit agencies, municipalities, training departments and community stakeholders, will work through the Embracing Aging initiative to provide training to County and CBO providers to increase their knowledge and skills to address the unique needs of older adults, including behavioral health, dementia and other issues that affect older populations.</p> <p>The Embracing Aging initiative is a workforce development effort by the Alameda County Council for Age-Friendly Communities. It is a partnership with UCSF's Department of Geriatrics' Optimizing Aging Collaborative, which will provide much of the curriculum and training for the first few years.</p> <p>Its goal is to ensure baseline knowledge about aging so that staff who serve older adults are competent to provide sensitive, equitable, and high-quality services.</p> <p>This program is a local example of the California Department of Aging's 2021-24 Strategic Plan Goal 2C: Support continuous quality improvement and innovation initiatives, including training and technical assistance.</p>	<p>7/1/20 6/30/24</p>	<p>Admin</p>	<p>The AAA Director serves on the Embracing Aging Committee of Age Friendly Council. In 2023, the six-part series entitled the "Alameda Geriatric Workforce Enhancement Program" (GWEP) has brought training curriculums on issues impacting older adults and workforce such as mental and substance abuse disorders, fall prevention, compassion fatigue, and serving adults with disabilities to Behavioral Health Care staff and all Adult and Aging Services staff including In-Home Supportive Services staff and providers, Adult Protective Services, Public Guardian/Conservators office, Veterans Services, and AAA.</p> <p>The six-part series was developed and delivered virtually to staff with the assistance of the Social Services Agency's Training and Consulting Team (TACT).</p> <p>Next step is to make it available to County and CBO Providers. Non-OAA funded entities comprise the overwhelming majority of the collaborating partners. OAA-funded providers are primarily cities, who provide vital input to help ensure the development of a relevant training curriculum for those serving older adult populations.</p>

			A report by the CDC and Alzheimer’s Association notes that GWEP programs “specialize in integrating geriatrics with primary care and are charged with developing a healthcare workforce that maximizes patient and family engagement and improves health outcomes for older adults.”
<p><b>Goal 3:</b> Enhance the health, safety and well-being of older adults and caregivers by providing an array of coordinated services and developing the County of Alameda Aging and Disability Resource Connection as a platform for seamless access to those services.</p>			
<p><b><i>Rationale:</i></b> As the number of older adults increases, services and supports for older adults are provided across a growing myriad of CBO, City and County Departments. In order to address the complexity of older adult needs, a holistic, systematic approach is required. While Social Services may take a leadership role, it must work within a constellation of evolving systems to incorporate the needs of older adults and their support systems.</p>			
Objective Number(s) and Objective(s)	Project Start and End Dates	Title IIIB Funded PD or C	Update Status
3.1 – Alameda County will invest in and leverage an infrastructure of community-based providers that will meet the needs of the aging and disabled population.	7/1/20- <b>6/30/24</b>	Admin	All 90 contracts procured by AAA are in service to this goal.
3.2 - Through the Area Agency on Aging, fund, deliver and monitor a wide array community and home-based services for older adults.	7/1/20- 6/30/24	Admin	Please see section 2.1; a monitoring schedule is available upon request.
3.3 - The AAA will provide capacity building support for older adult service providers.	7/1/20- 6/30/24	Admin	The AAA has awarded nutrition programs \$4.5M to build out their infrastructure with critical items such as vehicles, freezer buildout, and shelf stable foods to serve as many as possible and meet growing demand. See updates in Section 2.7

3.4 - AAA Director and Staff will work in core partnership with Center for Independent Living (CIL) and Community Resources for Independent Living (CRIL) to support the Alameda County Aging and Disability Resource Connection (ADRC). This work is intended to provide a collaborative platform by which community partners can work toward access to a seamless system of LTSS for older adults and people with disabilities. According to the 2022-23 Budget request for the state's Master Plan for Aging, "California's older adults, people with disabilities and caregivers struggle to locate and navigate services." Alameda County's ADRC is helping to close that gap.	7/1/20-6/30/24	Admin	In December 2022, the Alameda County ADRC was awarded designation status by the California Department on Aging, making it eligible for funding. A one-stop website portal for senior and disabled services has been launched and is expected to be completely updated by 6/30/24.
3.5 - The AAA will coordinate Information & Assistance Roundtables by bringing together subject matter experts to present information regarding older adult programs, trends and data. Roundtables will be open to older adult service providers, consumers and other parties interested in expanding their knowledge.	7/1/20-6/30/24	Direct	Roundtables are held every other month and bring together representatives from approximately 50 local programs to exchange information and ideas on topics such as Medicare, Medi-Cal enrollment, elder justice, CalAIM, the Countywide Area Plan, and Older Americans Act.
3.6 – The AAA will disseminate relevant information about county-wide and local resources on a variety of topics to assist older adults and caregivers in accessing services.	7/1/20-6/30/24	Direct	AAA publications include the Senior Information and Assistance Resource guide, television and radio PSA's, Senior Update newsletter in partnership with the Advisory Commission on Aging, and mall and bus advertisements. AAA also regularly uses the <a href="#">Social</a>

			Services Agency's website and social media, as well as distributes material and speaks with the public at community events and Board of Supervisors meetings. (See section 3.6 and
3.7 – In order to address the needs of the LGBTQIA+ community, the AAA will work in partnership with community providers to fund, support, and share LGBTQIA+ friendly programs.	7/1/20-6/30/24	Admin	<p>From 9/15/22 to 11/15/22, the AAA participated in a Plan Do Study Act (PDSA) to sensitively screen and document our older adults who contacted the ADRC and our Senior Information and Assistance Program. There was a slight increase of older adults reporting their LGBTQIA+ status over that period. The study was also a training opportunity for staff to raise their own awareness of the needs of this population.</p> <p>The AAA-funded Ombudsman program incorporates state mandated LGBTQIA+ cultural education in its training curriculum.</p>
3.8 – The AAA will be an active participant in regional collaboratives, including All In, the California Collaborative for LTSS, and the Senior Services Coalition. AAA will participate in stakeholder workgroups and strategy development sessions with non-OAA funded entities as a contributing member of this collaborative effort.	7/1/20-6/30/24	Admin	These collaborations help build an effective, statewide social movement toward transforming the State's Master Plan for Aging. For example, the AAA Director sat on a panel for a Senior Services Coalition forum, addressing approximately 200 community members about equity in health, housing, and aging.
3.10 – AAA staff will collaborate with commissioners, community volunteers, interested public agencies and community organizations to write, collect, edit, and publish a quarterly newsletter.	7/1/20-6/30/24	Direct	The Senior Update newsletter has been reformatted for visual appeal and clarity. Issue #47 was launched in the second quarter of 2023, and was distributed electronically and via 2,400 print copies to older adults, service providers, and community partners. The issue provided information on topics including health, financial security, elder justice, and community resources.

<p>3.11 – To improve transportation services for Alameda County older adults, the AAA will work with public agencies, transportation commissions, transportation professionals, community-based organizations, including non-OAA funded agencies, and older adults to (1) identify older adult transportation issues and resources, and (2) explore and develop partnerships, collaborations, and/or other methodologies to improve services and explore the feasibility of integrating existing services, and (3) support efforts that identify transportation issues, advocate for improvements, and involve older adults and systems in designing age-friendly transportation services.</p>	<p>7/1/20-6/30/24</p>	<p>C</p>	<p>In the 2022-2026 RFP, the AAA contracted with Swords to Plowshares to provide transportation services for senior and disabled veterans. In the past 12 months, medical transportation has been provided to approximately 500 adults in need.</p>
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**Goal 4:** Advocate for resources, programs, and collaborative solutions to address critical issues of aging including financial and food insecurity, housing, mental health challenges, safety and elder justice, growing social isolation, complex care needs, dementia and the need for a formal and informal system of caregiving.

**Rationale:** *The number and percentage of older adults who are high utilizers of services and require support across multiple systems of care is increasing. The combination of functional support, chronic illness management, and the consequences of social isolation and economic insecurity make this population vulnerable and requires advocacy for resources and resource coordination.*

Objective Number(s) and Objective(s)	Project Start and End Dates	Title IIIB Funded PD or C	Update Status
4.1 - Through Measure A and other funding mechanisms, the Board of Supervisors will allocate additional resources in order to expand senior injury prevention programs, respond to elder nutrition insecurity and address other issues relating to the health and stability of older county residents.	7/1/20-6/30/24	Admin	The Senior Injury Prevention Program (SIPP) is directly funded by Measure A. The Board of Supervisors also approved an increased allocation from federal and state emergency funds to respond to nutrition insecurity.
4.2 – The AAA will partner with community-based organizations to provide Evidence-Informed and Evidence-Based Health Promotion Programs via delivery of services in community and clinic settings, including senior centers, community centers, and senior housing communities. OAA III-D funded Evidence-Based Programs include Enhance Fitness, Tai Chi: Moving for Better Balance, A Matter of Balance, Tai Chi for Arthritis, and Bingocize. OAA III-D funded programs and County Measure A funded Senior Injury Prevention programs, with the exception of Home Modifications, have been approved by the	7/1/20-6/30/24	Admin	<p>Eight Senior Injury Prevention Providers receive Measure A funding. Some of these providers also receive SSA funding.</p> <p>Two Health Promotion providers receive OAA funding. These providers receive Measure A funding as well, but the contracts are separate.</p> <p>In the past 12 months, approximately 13,000 seniors were served by the two programs.</p>



<p>U. S. Department of Health and Human Services (DHHS) as Disease Prevention and Health Promotion programs and activities which have been demonstrated through rigorous evaluation to be evidence-based.</p> <p>In March 2021, the Alameda County Health Care Services Agency reported to the Board of Supervisors that falls are the leading cause of both fatal and nonfatal injuries amongst older adults and account for half of unintentional injury visits to the emergency room. It is estimated that one-third of adults over the age of 65 and one half of adults over the age of 75 fall each year, with medical costs in Alameda County estimated at \$37,000 for each fall related hospitalization. The Alameda County Senior Injury Prevention Program (SIPP) is a program of Alameda County Emergency Medical Services that is designed to reduce preventable injuries among the older population in Alameda County and raise awareness of the need for injury prevention programs for older adults. The County's SIPP and Health Promotion programs provide valuable information for seniors, health care providers, case managers, service providers, emergency responders, and policymakers.</p>			
<p>4.3 - The Alameda County Public Health Department will expand the role of Public Health Nursing in care of APS and Public Guardian clients.</p>	<p>7/1/20-6/30/24</p>	<p>Admin</p>	<p>Public Health Nurses accompany APS and Public Guardian workers on visits to vulnerable elder adults in their homes in the community. The role of PHN nurses has grown to participating in weekly meetings with APS workers to allow for formal information sharing about clients, discuss intervention and service options, and make recommendations based on shared nursing and social work knowledge and expertise.</p>

4.4 – The Age-Friendly Council will identify naturally occurring retirement communities and “hotspot” areas of County where high utilizers of services reside in order to develop targeted interventions.	7/1/20-6/30/24	Admin	The Age Friendly Council’s workplan includes promoting an Age Friendly Planning process for Alameda County with a focus on the Urban Unincorporated Areas of the County. The AFC has conducted outreach to local grassroots organizations to begin discussions on the needs of the urban unincorporated areas here in the County, and is working with the AAA Director to link the community’s organizations and residents with the ADRC.
4.5 - Expand the availability and awareness of Behavioral Health Services through the Alameda County Behavioral Health Care Services Department.	7/1/20-6/30/24	Admin	Latest update: Through partnership with AAA, ACBHCS, and three local CBO’s, the State of California has awarded grants to establish PEARLS (Program to Encourage Active, Rewarding Lives), a treatment program designed to reduce symptoms of depression and improve quality of life among older adults. A University of Washington study determined that PEARLS participants had a 50% or higher reduction in symptoms of depression, and 36% showed complete remission. The participants’ quality of life, both physical and emotional, also improved, resulting in fewer hospitalizations.
4.6 - The AAA will partner with the Age-Friendly Council and Health Care Services Agency to increase awareness of behavioral health and dementia issues with older adults and advance the Healthy Brain Initiative in Alameda County.	7/1/20-6/30/24	Admin	Alameda County took initiative to add dementia services as one of our age friendly initiatives, and has just received a two-year grant in the amount of \$708,000 to better coordinate, align, and equity-focus the system of care for those at risk or living with Alzheimer’s Disease and Related Dementias (ADRD). Planning began in 2018-2019 with a group of community and public agency leaders and has been shared at the Alameda County Age-Friendly Council. The ad hoc work group considered and selected from among the recommended Action Steps (Components) in <i>The Healthy Brain Initiative Road Map</i> developed by the Alzheimer’s Association and the Centers for Disease Control and Prevention. Based on this comprehensive community planning process, we chose these action steps for the two-year grant workplan:

			<ol style="list-style-type: none"> <li>1. <b>Community Needs Assessment, Surveillance, Evaluation:</b> Conduct a Community Needs Assessment, develop a Strategic Plan for ADRD, and conduct surveillance and evaluation of services: Consultant hired through an RFQ and supported as feasible by CAPE. Community Needs Assessment due December 29, 2023; Strategic Plan due January 29, 2024.</li> <li>2. <b>Community Advisory Coalition:</b> Re-launch the ad hoc work group of the Age-Friendly Council to coordinate this work. This will include original planning partners as well as Community Resilience Coalition partners and the Office of Homeless Care &amp; Coordination's community partners.</li> <li>3. <b>ADRD Trainings for Providers:</b> Expand the Alameda County Embracing Aging Training Initiative to include up to 20 trainings for health care professionals, community-based organization (CBO) service providers, other stakeholders, and County staff focused on the "4Ms" of geriatrics (mobility, mentation, what matters, and medication), with particular attention to Alzheimer's Disease and Related Dementias (ADRD). Leverage and align with existing resources through University of California San Francisco (UCSF) Geriatrics Workforce Enhancement Program (GWEP), Alameda County Behavioral Health Care Services (ACBH) Older Adult Division's Older Adult Certification program, and the Age-Friendly Council's Embracing Aging Workforce Development Workgroup.</li> <li>4. <b>Emergency Planning and Preparedness:</b> Strengthen cross-sector partnerships among subject matter experts and professionals in emergency preparedness, older adult public health, and Alzheimer's Disease and related dementias (ADRD)</li> </ol>
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			<p>across the 14 cities and 6 unincorporated areas in Alameda County in order to ensure that emergency plans at all levels address the specific needs of people with dementia and their caregivers. (See section 12 for more information on emergency preparedness.</p> <p>Ensure that ACPHD Emergency Operations Plan is up-to-date and support at least 2-5 agencies or jurisdictions to adopt and integrate recommendations that assure inclusion of ADRD individuals into their emergency protocols, guidelines, and/or formal emergency plans.</p>
<p>4.7 -The AAA will collaborate with the Age-Friendly Council, County agencies and community stakeholders to advance strategies to address Alzheimer’s Disease and Related Dementias, including those delineated in the national, state, and Countywide Healthy Brain Initiative.</p> <ul style="list-style-type: none"> <li>• In 2021, ADRD was the third leading cause of death among older adults (65+) in Alameda County, accounting for 1,013 deaths a year, fully 12.1% of deaths in this age group.</li> <li>• In 2019, an estimated 28,045 Alameda County residents ages 65+ were living with ADRD. By 2040, this is projected to grow to 69,264, a staggering 147% increase.</li> <li>• Significant racial/ethnic disparities in ADRD rates and acuity are projected to continue, with the greatest impacts in the county among Black residents. The mortality rate among Black residents remains significantly higher than other groups, and the gap is widening.</li> </ul>	7/1/20-6/30/24	Admin	<p>Alameda County took initiative to add dementia services to our age friendly domains of livability, and has just received a two-year grant in the amount of \$708,000 to better coordinate, align, and equity-focus the system of care for those at risk or living with Alzheimer’s Disease and Related Dementias (ADRD). (See section 5.6 above)</p>

Similarly, rates of in-patient and emergency department visits for Black residents—especially Black men—are between two and three times those of other groups.			
<p>4.8 – The AAA Director will participate as a member of the state’s Mental Health Services Act (MHSA) stakeholder group in order to facilitate inclusion of older adults in developing and implementing mental health programs.</p> <p><b>(Continued)</b></p>	7/1/20-6/30/24	Admin	The AAA Director has a designated seat on this group. Director will work with Behavioral Health to resume work that was interrupted due to COVID.

<p><b>ELDER JUSTICE AND ELDER ABUSE PREVENTION</b></p> <p>4.9 – The AAA will work in partnership with Adult Protective Services and the Age-Friendly Council, as well as non-OAA funded agencies, to increase awareness of elder neglect and abuse through a coordinated campaign that includes public presentations, dissemination of collateral materials, proclamations, and social media communication. Addressing the issues of elder justice and elder abuse is embedded in the framework of the AAA and Alameda County’s Adult and Aging Services programs.</p>	<p>7/1/20-6/30/24</p>	<p>C</p>	<p>Studies show that education is paramount because elder abuse is underreported, often because elders and those who care about them do not know how to recognize abuse or get help. Below is a summary of the AAA and its community partners’ efforts and results:</p> <ul style="list-style-type: none"> <li>• AAA and community partners annually provide 12 community training sessions. Approximately 1,400 individuals each year learn how to prevent, recognize, and report elder abuse.</li> <li>• AAA has created several Public Service Announcements that air continuously on Comcast television and advertisements are displayed prominently on public transit and in shopping centers. Publications such as the APS brochure and the Senior Update newsletter disseminate information on elder abuse. AAA regularly employs the Social Services Agency’s website and social media, and AAS annually presents to the Board of Supervisors during June, which is Elder Abuse Awareness Month worldwide.</li> <li>• AAS also maintains a prominent presence at public events such as Alameda County Fair and Solano Stroll, where educational materials on elder abuse are distributed to residents of all ages and staff are on hand to answer questions from the public.</li> <li>• In May 2023, APS received 734 intake reports, a 20 percent increase over the same time the previous year. The increased reporting is attributed to factors including the lowering of the eligibility age to 60 and to the ongoing housing crisis; however, increased community awareness resulting from the AAA’s educational efforts may also be playing a role. Timely reporting enables earlier intervention by Adult Protective and Ombudsman Services.</li> </ul>
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<p>4.10 – The AAA will participate with the Age-Friendly Council in an effort to coordinate a Countywide response to elder abuse by expanding partnerships with legal partners. This effort furthers the State Master Plan for Aging 23-24 Initiative 66: Develop resources, in partnership with the California Elder &amp; Disability Justice Coordinating Council, to build capacity among California’s legal services providers that serve older adults and people with disabilities to prioritize equity and the rights of older adults and people with disabilities.</p>	<p>7/1/20-6/30/24</p>	<p>Admin</p>	<ul style="list-style-type: none"> <li>• The Social Services Agency is responding to the increased demand with Increased recruitment and retention strategies, increased management and direct-service staff, robust onboarding and on-the job-training programs, easily accessible interventions such as visa gift cards issued to workers for urgent purchases for clients, alternative emergency housing placement, and an intern program.</li> <li>• For more details on Alameda County’s progress in Elder Justice, Elder Abuse Prevention, and responding to Elder Abuse, see Sections 4.10-12, Section 10, Title VIIA: Elder Abuse Prevention Service Plan Objectives, and Section 18 Legal Assistance.</li> </ul> <p>The AAA collaborates with and funds the legal service provider, Legal Assistance for Seniors (LAS), to provide services to targeted populations. For details on LAS’s services to combat elder abuse and assist seniors with other prevalent concerns such as housing, see section 4.9 above, 4.11-12, and Section 10, Title VIIA: Elder Abuse Prevention Service Plan Objectives, and Section 18 Legal Assistance.</p>
<p>4.11 - Increase the capacity of the Ombudsman program to respond to abuse claims in long-term care facilities.</p>	<p>7/1/20-6/30/24</p>	<p>Admin</p>	<p>AAA will continue to work with the Ombudsman program on expanding recruitment efforts. Currently volunteer participation has decreased due to COVID. The program will recruit volunteers creating a force of 8 Certified LTC Ombudsman volunteers. Goal is to support the Agency in hiring a recruitment specialist that will serve Alameda County and to reimplement the local training program. AAA continuously seeks new sources of funding for this program when available and warranted. For more information on</p>

			goals and achievements of the Ombudsman program, see Section 10, Title IIIB and Title VIIA: Long-Term Care (LTC) Ombudsman Program Outcomes
4.12 –As mandated by Title VII of the Older Americans Act, the AAA will provide public community education related to the issue of elder abuse. As noted in Section 4.9 above, community education is considered vital to addressing the underreporting of elder abuse.	7/1/20-6/30/24	Admin	To address the issues of Elder Abuse and underreporting, the AAA funds Legal Assistance for Seniors (LAS) as Legal Services Provider (LSP) to provide 12 AAA-sponsored sessions of community education. In addition, AAA holds an annual elder justice roundtable. Representatives from APS, Ombudsman and IHSS presented at the June 2, 2023 event, which was attended by 27 programs. AAA contracts with LAS to provide elder justice services and elder justice seminars that older adults and our community partners can access to increase timely reporting and early intervention. For more information see sections 4.9-12 above and Section 10, Title VIIA.
<b>HOUSING</b> 4.13 – The AAA will support and coordinate efforts to explore alternative housing options including shared housing programs.	7/1/20-6/30/24	Admin	AAA roundtables include panel of presenters such as COVIA (shared housing program). Roundtables network community providers and provide alternatives and resources. AAA has afforded providers information on referring consumers to alternative housing services. Alternatives include shared housing, rooms, and housemates who provide companionship and income.
4.14 - Community Development Agency (ACCD A) will work with other County departments and cities to increase the number of housing units available and affordable for older adults through all feasible approaches, including deeply affordable units to serve the needs of older adults with SSI-level incomes and homeless older adults.	7/1/20-6/30/24	Admin	AAA and ACCDA also work together on the Age Friendly Council and attend BOS town halls to work in collaboration on preserving housing.



<p>4.15 - Community Development Agency (ACCDa) will work with other County departments and cities to improve the habitability and preservation of existing units to allow for safe and healthy aging in place.</p>	<p>7/1/20-6/30/24</p>	<p>Admin</p>	<p>Renew AC is administered by Alameda County with funding provided by Alameda County taxpayers who approved the Measure A1 Housing Bond in November 2016. The program is operated by Habitat for Humanity East Bay/Silicon Valley. Renew AC provides 1% interest loans from \$15,000 to \$150,000 to qualified homeowners. Simple interest is accrued annually, with total interest never to exceed 50% of amount borrowed, and payments are deferred until the home is sold.</p> <p>Since its launch in 2021, the program has rehabilitated 90 homes, most belonging to senior and disabled residents. Fixing health and safety concerns and building code violations is the priority. ACCDA is working with AAA, Age-Friendly Council, and other community partners to reach more eligible participants.</p>
<p>4.16 - Community Development Agency will work in partnership with the Age-Friendly Council and with other County departments and cities and community groups to support regulations that protect older occupants from displacement.</p> <p><b>(Continued)</b></p>	<p>7/1/20-6/30/24</p>	<p>Admin</p>	<p>ACCDa continues to hold a seat on the age friendly council. Every SSA program now has a housing component. See Section 4.14 for information on AAS and Home Safe.</p>

<p><b>DIGITAL DIVIDE</b></p> <p>4.17 – The AAA will provide iPads as a direct service to low-income seniors and disabled residents.</p>	<p>7/1/20-6/30/24</p>	<p>PD</p>	<p>In 2022, Alameda County’s Age Friendly Council released a study showing the “digital divide” was a barrier for low-income seniors to services such as telehealth, socializing during the pandemic, and educational opportunities for critical issues such as fall prevention. Alameda County participated in the state’s Connections, Health, Aging and Technology (CHAT) program and distributed approximately 163 iPads. In Alameda County, the AAA received and distributed 242 iPads to low-income seniors and adults with disabilities.</p> <p>The purpose of CHAT was to mitigate loneliness and isolation for older adults and provide older adults with greater access to resources and information. CDA also partnered with the University of Southern California’s (USC) Graduate School of Gerontology to evaluate the effectiveness of digital devices in reducing social isolation for device recipients.</p> <p>Alameda County is now set to acquire and distribute through the state’s new Digital Connection (DC) program 163 additional devices and funding to help connect seniors with low cost internet service, pending approval by the Board of Supervisors. USC will release results of its study to determine if these programs are mitigating loneliness and social isolation for older adults as anticipated.</p> <p>Priority will be given on a first-come, first-served basis to older adults who are low-income, disabled, or otherwise fall within the category of greatest economic and social need as defined by the Older Americans Act, the Older Californians Act, and linked regulations.</p>
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**SECTION 10 - SERVICE UNIT PLAN (SUP) OBJECTIVES****PSA 09****TITLE III/VIIA SERVICE UNIT PLAN OBJECTIVES  
CCR Article 3, Section 7300(d)**

The Service Unit Plan (SUP) uses the National Aging Program Information System (NAPIS) Categories and units of service. They are defined in the [NAPIS State Program Report \(SPR\)](#)

For services not defined in NAPIS, refer to the [Service Categories and Data Dictionary](#) and the [National Ombudsman Reporting System \(NORS\) Instructions](#).

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

**Home-Delivered Meal****Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	581,413	3	
<b>2021-2022</b>	603,106	3	
<b>2022-2023</b>	594,984	3	
<b>2023-2024</b>	<b>487,960</b>	<b>3</b>	

**Adult Day/ Health Care (In-Home)****Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	26,694	3	
<b>2021-2022</b>	16,667	3	
<b>2022-2023</b>	16,667	3	
<b>2023-2024</b>	<b>30,240</b>	<b>3</b>	

**Case Management (Access)****Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	10,223	3	
<b>2021-2022</b>	7,985	3	
<b>2022-2023</b>	9,911	3	
<b>2023-2024</b>	<b>16,314</b>	<b>3</b>	

**Congregate Meals****Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	225,190	3	
<b>2021-2022</b>	215,103	3	
<b>2022-2023</b>	222,025	3	
<b>2023-2024</b>	<b>140,796</b>	<b>3</b>	

**Transportation (Access)****Unit of Service = 1 one-way trip**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	N/A	N/A	
<b>2021-2022</b>	N/A	N/A	
<b>2022-2023</b>	600	3	
<b>2023-2024</b>	<b>600</b>	<b>3</b>	

**Legal Assistance****Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	9,418	3	
<b>2021-2022</b>	7,348	3	
<b>2022-2023</b>	7,342	3	
<b>2023-2024</b>	<b>7,342</b>	<b>3</b>	

**Nutrition Education****Unit of Service = 1 session per participant**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	26,859	3	
<b>2021-2022</b>	27,566	3	
<b>2022-2023</b>	27,400	3	
<b>2023-2024</b>	<b>21,771</b>	<b>3</b>	

**Information and Assistance (Access)****Unit of Service = 1 contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	21,557	3	
<b>2021-2022</b>	16,820	3	
<b>2022-2023</b>	20,877	3	
<b>2023-2024</b>	<b>35,938</b>	<b>3</b>	

**Outreach (Access)****Unit of Service = 1 contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	1,400	3	
<b>2021-2022</b>	442	3	
<b>2022-2023</b>	600	3	
<b>2023-2024</b>	<b>600</b>	<b>3</b>	

**2. NAPIS Service Category – “Other” Title III Services**

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

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

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

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

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

**Other Supportive Service Category: Visiting**

**Unit of Service: Hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
<b>2020-2021</b>	10,251	3	
<b>2021-2022</b>	8,976	3	
<b>2022-2023</b>	11,140	3	
<b>2023-2024</b>	<b>12,481</b>	<b>3</b>	

**Other Supportive Service Category: Senior Center Activities**

**Unit of Service: Hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
<b>2020-2021</b>	17,222	3	
<b>2021-2022</b>	13,438	3	
<b>2022-2023</b>	16,676	3	
<b>2023-2024</b>	<b>19,118</b>	<b>3</b>	

**Other Supportive Service Category: Telephone Reassurance Unit of Service = 1 Contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	N/A	N/A	
<b>2021-2022</b>	N/A	N/A	
<b>2022-2023</b>	809	3	
<b>2023-2024</b>	<b>4,416</b>	<b>3</b>	

**Other Supportive Service Category: Public Information**

**Unit of Service: 1 Activity**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
<b>2020-2021</b>	4	3	
<b>2021-2022</b>	4	3	
<b>2022-2023</b>	4	3	
<b>2023-2024</b>	<b>4</b>	<b>3</b>	

### 3. Title IIID/ Disease Prevention and Health Promotion

**Instructions for Title IIID Disease Prevention and Health Promotion:** Enter the name of the proposed program to be implemented, proposed units of service and the Program Goal and Objective number(s) that provide a narrative description of the program, and explain how the service activity meets the criteria for evidence-based programs described in PM 15-10 if not ACL approved.

**Unit of Service = 1 contact**

**Service Activities: Evidenced based group exercise programs including: Enhance Fitness, Tai Chi: Moving for Better Balance, Tai Chi: Arthritis, A Matter of Balance, and BingoCize.**

- **Title IIID/ Disease Prevention and Health Promotion:** Enter required program goal and objective numbers in the Title III D Service Plan Objective Table below:

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (Required)
2020-2021	11,776	3	4.2
2021-2022	9,820	4	4.2
2022-2023	9,807	4	4.2
2023-2024	9,520	4	4.2

**TITLE IIIB and Title VIIA:**  
**LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES**

**2020-2024 Four-Year Planning Cycle**

As mandated by the Older Americans Act Reauthorization Act of 2016, the mission of the LTC Ombudsman Program is to seek resolution of problems and advocate for the rights of residents of LTC facilities with the goal of ensuring their dignity, quality of life, and quality of care.

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

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

Complete all Measures and Targets for Outcomes 1-3;

**Outcome 1. The problems and concerns of long-term care residents are solved through complaint resolution and other services of the Ombudsman Program. Older Americans Act Reauthorization Act of 2016, Section 712(a)(3), (5)]**

**Measures and Targets:**

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

1. FY 2018-2019 Baseline Resolution Rate: Number of complaints resolved <u>350</u> + number of partially resolved complaints <u>58</u> divided by the total number of complaints received <u>1,897</u> = Baseline Resolution Rate <u>22</u> % FY 2020-2021 Target Resolution Rate <u>85</u> %
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2. FY 2019-2020 Baseline Resolution Rate: Number of complaints partially or fully resolved <u>461</u> divided by the total number of complaints received <u>782</u> = Baseline Resolution Rate <u>59</u> % FY 2021-2022 Target Resolution Rate <u>90</u> %
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3. FY 2020 - 2021 Baseline Resolution Rate: Number of complaints partially or fully resolved <u>943</u> divided by the total number of complaints received <u>1,157</u> = Baseline Resolution Rate <u>82</u> % FY 2022-2023 Target Resolution Rate <u>90</u> %
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4. FY 2021-2022 Baseline Resolution Rate:  
 Number of complaints partially or fully resolved 626 divided by the total number of  
 complaints received 706 = Baseline Resolution Rate 89 %  
 FY 2023-2024 Target Resolution Rate 90 %

Program Goals and Objective Numbers: 4.12

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

1. FY 2018-2019 Baseline: Number of Resident Council meetings attended 17  
 FY 2020-2021 Target: 20
2. FY 2019-2020 Baseline: Number of Resident Council meetings attended 0  
 FY 2021-2022 Target: 5
3. FY 2020-2021 Baseline: Number of Resident Council meetings attended 4  
 FY 2022-2023 Target: 5
4. FY 2021-2022 Baseline: Number of Resident Council meetings attended 2  
 FY 2023-2024 Target: 2

Program Goals and Objective Numbers: 4.12

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

1. FY 2018-2019 Baseline: Number of Family Council meetings attended 1  
 FY 2020-2021 Target: 2
2. FY 2019-2020 Baseline: Number of Family Council meetings attended 0  
 FY 2021-2022 Target: 2
3. FY 2020-2021 Baseline: Number of Family Council meetings attended 1  
 FY 2022-2023 Target: 2
4. FY 2021-2022 Baseline: Number of Family Council meetings attended 0  
 FY 2023-2024 Target: 1

Program Goals and Objective Numbers: 4.12

**D. Information and Assistance to Facility Staff** (NORS Elements S-53 and S-54) Count of instances of Ombudsman representatives' interactions with facility staff for the purpose of providing general information and assistance unrelated to a complaint. Information and Assistance may be accomplished by telephone, letter, email, fax, or in-person.

1. FY 2018-2019 Baseline: Number of Instances 40  
 FY 2020-2021 Target: 1,000
2. FY 2019-2020 Baseline: Number of Instances 778  
 FY 2021-2022 Target: 2,000
2. FY 2020-2021 Baseline: Number of Instances 1,513  
 FY 2022-2023 Target: 2,000
4. FY 2021-2022 Baseline: Number of Instances 810  
 FY 2023-2024 Target: 1,000

Program Goals and Objective Numbers: 4.12

- E. Information and Assistance to Individuals** (NORS Element S-55) Count of instances of Ombudsman representatives' interactions with residents, family members, friends, and others in the community for the purpose of providing general information and assistance unrelated to a complaint. Information and Assistance may be accomplished by: telephone, letter, email, fax, or in person.

1. FY 2018-2019 Baseline: Number of Instances <u>8,899</u> FY 2020-2021 Target: <u>1,000</u>
2. FY 2019-2020 Baseline: Number of Instances <u>725</u> FY 2021-2022 Target: <u>3,000</u>
3. FY 2020-2021 Baseline: Number of Instances <u>3,555</u> FY 2022-2023 Target: <u>3,000</u>
4. FY 2021-2022 Baseline: Number of Instances <u>1,838</u> FY 2023-2024 Target: <u>2,000</u>
Program Goals and Objective Numbers: <u>4.12</u>

- F. Community Education** (NORS Element S-68) LTC Ombudsman Program participation in public events planned to provide information or instruction to community members about the LTC Ombudsman Program or LTC issues. The number of sessions refers to the number of events, not the number of participants. This cannot include sessions that are counted as Public Education Sessions under the Elder Abuse Prevention Program.

1. FY 2018-2019 Baseline: Number of Sessions <u>5</u> FY 2020-2021 Target: <u>10</u>
2. FY 2019-2020 Baseline: Number of Sessions <u>4</u> FY 2021-2022 Target: <u>4</u>
3. FY 2020-2021 Baseline: Number of Sessions <u>10</u> FY 2022-2023 Target: <u>4</u>
4. FY 2021-2022 Baseline: Number of Sessions <u>25</u> FY 2023-2024 Target: <u>4</u>
Program Goals and Objective Numbers: <u>4.12</u>

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

One or more new systems advocacy efforts must be provided for each fiscal year Area Plan Update. In the relevant box below for the current Area Plan year, in narrative format, please provide at least one new priority systems advocacy effort the local LTC Ombudsman Program will engage in during the fiscal year. The systems advocacy effort may be a multi-year initiative, but for each year, describe the results of the efforts made during the previous year and what specific new steps the local LTC Ombudsman program will be taking during the upcoming year. Progress and goals must be separately entered each year of the four-year cycle in the appropriate box below.

Systems Advocacy can include efforts to improve conditions in one LTC facility or can be county-wide, state-wide, or even national in scope. (Examples: Work with LTC facilities to improve pain relief or increase access to oral health care, work with law enforcement entities to improve response and investigation of abuse complaints, collaboration with other agencies to improve LTC residents' quality of care and quality of life, participation in disaster

preparedness planning, participation in legislative advocacy efforts related to LTC issues, etc.) Be specific about the actions planned by the local LTC Ombudsman Program. Enter information in the relevant box below.

<b>FY 2020-2021</b>
<p><b>FY 2020-2021 Systems Advocacy Effort(s):</b> (Provide one or more new systems advocacy efforts)</p> <p>Empowered Aging and AAA will continue to positively impact the workforce serving the LTC via the expansion of the Healthcare Career Pathway (HCP), an innovative collaborative designed to re-envision the entry into the allied Healthcare Field and Person-Centered training. Empowered Aging and AAA works with stakeholders to bring the program to Alameda County and secure its position as part of the state Master Plan on Aging.</p>
<b>FY 2021-2022</b>
<p><b>Outcome of FY 2020-2021 Efforts:</b></p> <p><b>FY 2021-2022 Systems Advocacy Effort(s):</b> (Provide one or more new systems advocacy efforts)</p> <p>Empowered Aging and AAA will continue to advance the Healthcare Career Pathway (HCP) and expand the program to additional communities. Empowered Aging worked with legislators and secured funding to support the program and allow additional sites to launch with appropriate financial support. Through advocacy, Empowered Aging is advanced legislation to secure funding to replicate a CNA program throughout the state including Alameda County.</p>
<b>FY 2022-2023</b>
<p><b>Outcome of FY 2021-2022 Efforts:</b></p> <p>Outcomes in 2021 were severely challenged because funding support via legislators was not solidified. In 2022-23, funding was obtained, and the program moved forward.</p> <p><b>FY 2022-2023 Systems Advocacy Effort(s):</b></p> <ul style="list-style-type: none"> <li>-Secured funding to Launch Healthcare Career Pathway program in Alameda County.</li> <li>-Partnered with adult education programs to stand up the CNA programs within Alameda County. In May 2023 Empowered Aging presented to the ACA on the status of the project.</li> </ul>
<b>FY 2023-2024</b>

**Outcome of 2022-2023 System Advocacy Efforts:**

- 1) Worked with the Healthcare Career Pathway Program focused on securing funding to launch the Healthcare Career Pathway Program in Alameda County.
- 2) Worked on partnering with CNA programs providing services within Alameda County.
- 3) In February 2023, the AAA and Empowered Aging launched the planning process to start up a CNA training program. The partners meet every two weeks and have identified and engaged the San Leandro and Castro Valley Adult Schools to join the collaboration as the accreditation/training entities for the program.
- 4) HCP has been cited as a "Local Model" by the state's "Master Plan for Aging Local Playbook."

**FY 2023-2024 Systems Advocacy Effort(s):** (Provide one or more new systems advocacy efforts)

- 1) Collaborative work with the Healthcare Career Pathway Program to identify and secure funding to launch the program in Alameda County.
- 2) Planning work with the Healthcare Career Pathway Program Director to develop and build the foundation for program implementation in Alameda County.
- 3) Outreach and engagement efforts to partner with CNA programs providing services in Alameda County.
- 4) Coordination and support efforts with the County of Alameda AAA to:
  - a) evaluate the scope and level of need in Alameda County and
  - b) identify CNA education providers as potential partners to support the program.
- 5) Continuation of building strong partnerships to offer accreditation and social supports for students that are recruited for the Healthcare Career Pathway program.

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

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

1. FY 2018-2019 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 2 divided by the total number of Nursing Facilities 75 = Baseline 3 %  
FY 2020-2021 Target: 90 %

2. FY 2019-2020 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 0 divided by the total number of Nursing Facilities 74 = Baseline 0 %  
FY 2021-2022 Target: 90 %

3. FY 2020-2021 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 9 divided by the total number of Nursing Facilities 73 = Baseline 12 %  
FY 2022-2023 Target: 90 %

4. FY 2021-2022 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 10 divided by the total number of Nursing Facilities 73 = Baseline 14 %  
FY 2023-2024 Target: 25 %

Program Goals and Objective Numbers: 4.12

**B. Routine access: Residential Care Communities** (NORS Element S-61) Percentage of RCFEs within the PSA that were visited by an Ombudsman representative at least once each quarter during the fiscal year **not** in response to a complaint. The percentage is determined by dividing the number of RCFEs in the PSA that were visited at least once each quarter not in response to a complaint by the total number of RCFEs in the PSA. NOTE: This is not a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no RCFE can be counted more than once.

1. FY 2018-2019 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint 0 divided by the total number of RCFEs 260 = Baseline 0 %  
FY 2020-2021 Target: 80 %

2. FY 2019-2020 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint 0 divided by the total number of RCFEs 251 = Baseline 0 %  
FY 2021-2022 Target: 90 %

3. FY 2020-2021 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint 82 divided by the total number of RCFEs 255 = Baseline 32 %  
FY 2022-2023 Target: 90 %

4. FY 2021-2022 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint 2 divided by the total number of RCFEs 245 = Baseline 1 %  
FY 2023-2024 Target: 25 %

Program Goals and Objective Numbers: 4.12

**C. Number of Full-Time Equivalent (FTE) Staff** (NORS Element S-23) This number may only include staff time legitimately charged to the LTC Ombudsman Program. Time spent working for or in other programs may not be included in this number. For example, in a local LTC Ombudsman Program that considers full-time employment to be 40 hour per week, the FTE for a staff member who works in the Ombudsman Program 20 hours a week should be 0.5, even if the staff member works an additional 20 hours in another program.

1. FY 2018-2019 Baseline 4.875 FTEs FY  
2020-2021 Target: 7 FTEs

2. FY 2019-2020 Baseline: <u>6.39</u> FTEs FY 2021-2022 Target: <u>6</u> FTEs
3. FY 2020-2021 Baseline: <u>4</u> FTEs FY 2022-2023 Target: <u>6</u> FTEs
4. FY 2021-2022 Baseline: <u>4</u> FTEs FY 2023-2024 Target: <u>4</u> FTEs
Program Goals and Objective Numbers: <u>4.12</u>

**D. Number of Certified LTC Ombudsman Volunteers (NORS Element S-24)**

1. FY 2018-2019 Baseline: Number of certified LTC Ombudsman volunteers <u>12</u> FY 2020-2021 Projected Number of certified LTC Ombudsman volunteers <u>8</u>
2. FY 2019-2020 Baseline: Number of certified LTC Ombudsman volunteers <u>8</u> FY 2021-2022 Projected Number of certified LTC Ombudsman volunteers <u>8</u>
3. FY 2020-2021 Baseline: Number of certified LTC Ombudsman volunteers <u>5</u> FY 2022-2023 Projected Number of certified LTC Ombudsman volunteers <u>8</u>
3. FY 2021-2022 Baseline: Number of certified LTC Ombudsman volunteers : <u>6</u> FY 2023-2024 Projected Number of certified LTC Ombudsman volunteers : <u>4</u>
Program Goals and Objective Numbers: <u>4.12</u>

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

**Measures and Targets:**

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

Empowered Aging maintains a robust data compliance program that includes ongoing case review and data management. The Local Program Coordinator reviews all closed cases for accuracy and adherence to case standards. All open cases are reviewed to ensure that they have been handled in a timely fashion consistent with the organization reporting standards. The Local Program Coordinator also completes a monthly data review of all activities and addresses any areas of concerns.

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

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

Units of Service categories include public education sessions, training sessions for professionals, training sessions for caregivers served by a Title III E Family Caregiver Support Program, educational materials distributed, and hours of activity spent developing a coordinated system which addresses elder abuse prevention, investigation, and prosecution.

When developing targets for each fiscal year, refer to data reported on the Elder Abuse Prevention Quarterly Activity Reports. Set realistic goals based upon the prior year's numbers and the resources available. Activities reported for the Title VII Elder Abuse Prevention Program must be distinct from activities reported for the LTC Ombudsman Program. No activity can be reported for both programs.

AAAs must provide one or more of the service categories below.

**NOTE: The number of sessions refers to the number of presentations and not the number of attendees**

- **Public Education Sessions** –Indicate the total number of projected education sessions for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Training Sessions for Professionals** –Indicate the total number of projected training sessions for professionals (service providers, nurses, social workers) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Training Sessions for Caregivers Served by Title III E** –Indicate the total number of projected training sessions for unpaid family caregivers who are receiving services under Title III E of the Older Americans Act (OAA) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation. Older Americans Act Reauthorization Act of 2016, Section 302(3) 'Family caregiver' means an adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.
- **Hours Spent Developing a Coordinated System to Respond to Elder Abuse** –Indicate the number of hours to be spent developing a coordinated system to respond to elder abuse. This category includes time spent coordinating services provided by the AAA or its contracted service provider with services provided by Adult Protective Services, local law enforcement agencies, legal services providers, and other agencies involved in the protection of elder and dependent adults from abuse, neglect, and exploitation.

**Educational Materials Distributed** –Indicate the type and number of educational materials to be distributed to the general public, professionals, and caregivers (this may include materials

that have been developed by others) to help in the identification, prevention, and treatment of elder abuse, neglect, and exploitation.

- **Number of Individuals Served** –Indicate the total number of individuals expected to be reached by any of the above activities of this program.

**PSA 09**

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

The agency receiving Title VIIA Elder Abuse Prevention funding is: Legal Assistance for Seniors

<b>Fiscal Year</b>	<b>Total # of Public Education Sessions</b>	<b>Fiscal Year</b>	<b>Total # of Training Sessions for Professionals</b>
<b>2020-2021</b>	12	<b>2020-2021</b>	
<b>2021-2022</b>	12	<b>2021-2022</b>	
<b>2022-2023</b>	12	<b>2022-2023</b>	
<b>2023-2024</b>	12	<b>2023-2024</b>	

<b>Fiscal Year</b>	<b>Total # of Training Sessions for Caregivers served by Title III E</b>	<b>Fiscal Year</b>	<b>Total # of Hours Spent Developing a Coordinated System</b>
<b>2020-2021</b>		<b>2020-2021</b>	
<b>2021-2022</b>		<b>2021-2022</b>	
<b>2022-2023</b>		<b>2022-2023</b>	
<b>2023-2024</b>		<b>2023-2024</b>	

<b>Fiscal Year</b>	<b>Total # of Copies of Educational Materials to be Distributed</b>	<b>Description of Educational Materials</b>
<b>2020-2021</b>	1,920	<ul style="list-style-type: none"> <li>• Explain what elder abuse is and the laws that address it</li> <li>• Identify signs of financial, emotional, physical abuse, and neglect</li> <li>• Review legal remedies available to abused elders, including restraining orders</li> <li>• Cover practical tips to help prevent abuse</li> <li>• Provide information on agencies that can help</li> </ul>



<b>2021-2022</b>	1,920	See above
<b>2022-2023</b>	1,920	See above
<b>2023-2024</b>	<b>1,920</b>	<b>See above</b>

<b>Fiscal Year</b>	<b>Total Number of Individuals Served</b>
<b>2020-2021</b>	1,400
<b>2021-2022</b>	1,400
<b>2022-2023</b>	1,400
<b>2023-2024</b>	<b>1,400</b>

**TITLE III E SERVICE UNIT PLAN OBJECTIVES****CCR Article 3, Section 7300(d)****2020-2024 Four-Year Planning Period**

This Service Unit Plan (SUP) uses the five broad federally mandated service categories. Refer to the CDA Service Categories and Data Dictionary Revisions Effective July 2018 for eligible activities and service unit measures. Specify proposed audience size or units of service for ALL budgeted funds.

**Direct and/or Contracted III E Services**

<b>CATEGORIES</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Family Caregiver Services Caring for Elderly</b>	<b><i>Proposed</i> Units of Service</b>	<b><i>Required</i> Goal #(s)</b>	<b><i>Optional</i> Objective #(s)</b>
<b>Information Services</b>	<b># of activities and Total est. audience for above</b>		
<b>2020-2021</b>	# of activities: 165 Total est. audience for above: 4,000	3	
<b>2021-2022</b>	# of activities: 168 Total est. audience for above: 4,000	3	
<b>2022-2023</b>	# of activities: 168 Total est. audience for above: 4,000	3	
<b>2023-2024</b>	# of activities: <b>168</b> Total est. audience for above: <b>4,000</b>	<b>3</b>	
<b>Access Assistance</b>	<b>Total contacts</b>		
<b>2020-2021</b>	2,550	3	
<b>2021-2022</b>	2,081	3	
<b>2022-2023</b>	2,081	3	
<b>2023-2024</b>	<b>2,081</b>	<b>3</b>	

<b>Access Assistance</b>		<b>Total contacts</b>	
<b>Support Services</b>	<b>Total hours</b>		
<b>2020-2021</b>	6,331	3	
<b>2021-2022</b>	6,561	3	
<b>2022-2023</b>	6,561	3	
<b>2023-2024</b>	<b>6,561</b>	<b>3</b>	
<b>Respite Care</b>	<b>Total hours</b>		
<b>2020-2021</b>	6,992	3	
<b>2021-2022</b>	6,121	3	
<b>2022-2023</b>	6,121	3	
<b>2023-2024</b>	<b>6,121</b>	<b>3</b>	
<b>Supplemental Services</b>	<b>Total occurrences</b>		
<b>2020-2021</b>			
<b>2021-2022</b>			
<b>2022-2023</b>			
<b>2023-2024</b>	<b>72</b>	<b>3</b>	

#### Direct and/or Contracted IIIE Services

<b>Grandparent Services Caring for Children</b>	<b><i>Proposed</i> Units of Service</b>	<b><i>Required</i> Goal #(s)</b>	<b><i>Optional</i> Objective #(s)</b>
<b>Information Services</b>	<b># of activities and Total est. audience for above</b>		
<b>2020-2021</b>	# of activities: Total est. audience for above:		
<b>2021-2022</b>	# of activities: Total est. audience for above:		
<b>2022-2023</b>	# of activities: Total est. audience for above:		
<b>2023-2024</b>	# of activities: Total est. audience for above:		

<b>Grandparent Services Caring for Children</b>	<b><i>Proposed</i> Units of Service</b>	<b><i>Required</i> Goal #(s)</b>	<b><i>Optional</i> Objective #(s)</b>
<b>Access Assistance</b>	<b>Total contacts</b>		
2020-2021			
2021-2022			
2022-2023			
2023-2024			
<b>Support Services</b>	<b>Total hours</b>		
2020-2021			
2021-2022			
2022-2023			
2023-2024			
<b>Respite Care</b>	<b>Total hours</b>		
2020-2021	3,042	3	
2021-2022	3,491	3	
2022-2023	3,491	3	
2023-2024	<b>3,491</b>	<b>3</b>	
<b>Supplemental Services</b>	<b>Total occurrences</b>		
2020-2021			
2021-2022			
2022-2023			
2023-2024			

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

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

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

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

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

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

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

AAA's should demonstrate progress toward meeting or improving on the Performance requirements established by CDA and ACL as is displayed annually on the *HICAP State and Federal Performance Measures* tool located online at: <https://www.aging.ca.gov/Providers and Partners/Area Agencies on Aging/#pp-planning>. (Reference CDA PM 17-11 for further discussion, including current HICAP Performance Measures and Definitions).

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

#### **HICAP Legal Services Units of Service (if applicable)**

<b>Fiscal Year (FY)</b>	<b>3.1 Estimated Number of Clients Represented Per FY (Unit of Service)</b>	<b>Goal Numbers</b>
<b>2020-2021</b>	100	3
<b>2021-2022</b>	100	3
<b>2022-2023</b>	100	3
<b>2023-2024</b>	<b>100</b>	<b>3</b>

<b>Fiscal Year (FY)</b>	<b>3.2 Estimated Number of Legal Representation Hours Per FY (Unit of Service)</b>	<b>Goal Numbers</b>
<b>2020-2021</b>	1,000	3
<b>2021-2022</b>	1,000	3
<b>2022-2023</b>	1,000	3
<b>2023-2024</b>	<b>1,000</b>	<b>3</b>

<b>Fiscal Year (FY)</b>	<b>3.3 Estimated Number of Program Consultation Hours Per FY (Unit of Service)</b>	<b>Goal Numbers</b>
<b>2020-2021</b>	N/A	
<b>2021-2022</b>		
<b>2022-2023</b>		
<b>2023-2024</b>		

**Disaster Preparation Planning** Conducted for the 2020-2024 Planning Cycle Older Americans Act Reauthorization Act of 2016, Section 306(a)(17); 310, CCR Title 22, Sections 7529 (a)(4) and 7547, W&I Code Division 8.5, Sections 9625 and 9716, CDA Standard Agreement, Exhibit E, Article 1, 22-25, Program Memo 10-29(P)

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

The AAA is part of the Alameda County structure and therefore conforms to the County's overall plan for disaster response and preparedness. One element of the County's plan enforces the requirement of County staff, including AAA staff, to serve as OFFICIAL DISASTER SERVICE WORKERS in accordance with Section 3100 of the California Government Code. The AAA participates fully in the Social Service Agency's (SSA) Health & Safety activities and Disaster Preparedness & Emergency Response planning and coordination protocols. These protocols include identifying onsite physical areas of responsibility during an emergency, performing preparedness resource readiness evaluations, participating in announced evacuation drills as well as unannounced timed evacuation drills administered by the City of Oakland Fire Department.

The AAA works in coordination with several community preparedness agencies including the American Red Cross, Alameda County Volunteer Organizations Active in Disaster (VOAD), and Community Emergency Response Teams (CERT) from various cities in Alameda County. The AAA regularly receives and disseminates safety information briefings, advisories, and updates from the CDA-AAA Disaster Assistance Coordinator.

2. Identify each of the local Office of Emergency Services (OES) contact person(s) within the PSA that the AAA will coordinate with in the event of a disaster (add additional information as needed for each OES within the PSA):

Name	Title	Telephone	email
Lorena Briseno	Office of Disaster Preparedness and Emergency Manager	(510) 271-9174	<a href="mailto:lbriseno@acgov.org">lbriseno@acgov.org</a>

3. Identify the Disaster Response Coordinator within the AAA:

Name	Title	Telephone	email
Marlisa Davis	Program Specialist	Office: (510) 577-3590 Cell: (510) 506-2261	<a href="mailto:marlisa.davis@acgov.org">marlisa.davis@acgov.org</a>

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

#### Critical Services

#### How Delivered?

a. Communication with subcontractors	a. The AAA maintains electronic and hard copy files of providers' contact information to ensure adequate avenues of communication with subcontractors regardless of circumstance.
b. Access to information regarding older adult services	b. The AAA will work to establish communication with service providers, verify provider operational status, confirm provider level of functionality, and inform consumers of service availability.  The County will strengthen cross-sector partnerships among subject matter experts and professionals in emergency preparedness, older adult public health, and Alzheimer's Disease and related dementias (ADRD) across the 14 cities and 6 unincorporated areas in Alameda County in order to ensure that emergency plans at all levels address the specific needs of people with dementia and their caregivers. (See section 4.6 for more information about the County's efforts for people living with ADRD.)

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

The AAA is part of the Social Services Agency of Alameda County and, as a result, has a countywide agreement with the Alameda County Office of Homeland Security and Emergency Services. SSA is responsible for coordinating and managing countywide Care and Shelter Operations through the Alameda County OES in the event of a disaster or emergency situation. The AAA performs vital functions in fulfilling SSA's broad coordination and management role, particularly as it relates to the County's older adult residents.

The Alameda County umbrella also offers the benefit of AC Alert for emergency message communication. AC Alert is the Mass Notification System used by City and County agencies throughout Alameda County to rapidly disseminate emergency alerts to people with residential, business, or social associations with Alameda County. AC Alert allows you to provide multiple methods of contact and designate multiple locations in Alameda County to receive emergency alerts. AC Alert is capable of sending alerts by voice, text, email, Nixle messaging, social media posting, and FEMA Wireless Alerts.

The AAA requires its Community Based Organization (CBO) service providers to develop and implement a written Agency Emergency Operations Plan at the onset of each four-year funding cycle. Each subsequent year of the funding cycle, the plan must be updated and include an Incident Command System (ICS) protocol. The plan must ensure provision of critical services to meet the emergency needs of consumers they are charged to serve during medical or natural disasters, such as earthquakes or floods. The plan must include assurances that preparations have been made in



the following areas: 1) preparation of the facility, 2) training for all staff, volunteers, and participants in the Agency's emergency operations plan, and 3) fire safety preparations. The template for the plan is provided to the contract CBO by the AAA.

The AAA's CBO Home Delivered Nutrition providers perform client status checks and provide emergency food packs consisting of shelf-stable food and water for the Meals on Wheels clients. The AAA also funded the purchase of infrastructure items such as vehicles and refrigerators for Home Delivered Nutrition providers to ensure their ability to respond during the COVID 19 lockdown.

6. Describe how the AAA will:

- Identify vulnerable populations:  
The AAA has worked with the County-wide disaster planning team and service providers to identify vulnerable older adults and establish effective means of communication.
- Follow-up with these vulnerable populations after a disaster event:  
The AAA maintains a database containing information regarding ADL's and IADL's representing the level of functional ability of individuals; however, the AAA database does not cross reference this data with telephone contact information. The AAA will first work to establish adequate communication with service providers and subsequently, to coordinate appropriate follow-up through contract service providers. The AAA Senior Info Hotline, Senior Info Email distribution, SSA's Office of Public Affairs, and SSA's Office of Disaster Preparedness and Emergency Management, provide additional avenues for communication and follow-up with vulnerable populations.

7. **COVID-19 PANDEMIC RESPONSE:**

AAA programs have maintained a robust supportive presence during the Covid-19 Pandemic through communication, response, and support. Personal Protective Equipment (PPE), Supportive Services, Covid-19 Information, and Vaccination Outreach and Education are the primary areas of the AAA's focus and response. The AAA distributed free face coverings through its network of community-based organizations providing direct services to older adults and people with disabilities. The AAA collaborated with community partners to place a COVID-19 resource link on the 211 Information system to provide expedited access to updated food resources for older adults. The AAA provided 700 Google Home devices and 304 iPads to help fight isolation and social exclusion among low-income older adults. Currently, the AAA is developing distribution logistics for 200 iPads to help less advantaged older adults bridge the digital divide. The AAA funded and collaborated with Alameda County Public Health in targeting Covid-19 vaccine outreach, information, and access for adults 60 years of age or older, disabled adults 18 years of age or older, and underserved and vulnerable populations in Alameda County. The AAA has an ongoing collaboration with the Public Health Officer to provide updated information on Covid-19.

**2020-2024 Four-Year Planning Cycle**

**Funding for Access, In-Home Services, and Legal Assistance**

The CCR, Article 3, Section 7312, requires the AAA to allocate an “adequate proportion” of federal funds to provide Access, In-Home Services, and Legal Assistance in the PSA. The annual minimum allocation is determined by the AAA through the planning process. The minimum percentages of applicable Title III B funds<sup>7</sup> listed below have been identified for annual expenditure throughout the four-year planning period. These percentages are based on needs assessment findings, resources available within the PSA, and discussions at public hearings on the Area Plan.

Category of Service and the Percentage of Title III B Funds expended in/or to be expended in FY 2020-21 through FY 2023-2024

**Access:**

Transportation, Assisted Transportation, Case Management, Information and Assistance, Outreach, Comprehensive Assessment, Health, Mental Health, and Public Information

2020-21 15 %                      21-22 15 %                      22-23 15 %                      23-24 15 %

**In-Home Services:**

Personal Care, Homemaker, Chore, Adult Day / Health Care, Alzheimer’s, Residential

2020-21 15 %                      21-22 15 %                      22-23 15 %                      23-24 15 %

**Legal Assistance Required Activities:**

Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar

2020-21 10 %                      21-22 10 %                      22-23 10 %                      23-24 10 %

Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA.

As a baseline, we have established minimum percentages for Access and In-Home services at 15% and 10% for Legal Services. Setting the percentages at these rates establishes a minimum floor for provision of services which is adequate to meet the basic needs. This approach also allows the most flexibility in responding to the increasing expansion of service and support needs of the older adults in our community.

**SECTION 14 - NOTICE OF INTENT TO PROVIDE DIRECT SERVICES****PSA 09**CCR Article 3, Section 7320 (a)(b) and 42 USC Section 3027(a)(8)(C)

If a AAA plans to directly provide any of the following services, it is required to provide a description of the methods that will be used to assure that target populations throughout the PSA will be served.

☐ Check if not providing any of the below listed direct services.

Check applicable direct services**Title IIIB**

- ☒ Information and Assistance  
☒ Public Information  
☒ Outreach  
☐ Program Development  
☒ Coordination  
☐ Long Term Care Ombudsman

Check each applicable Fiscal Year**20-21      21-22      22-23      23-24**

- ☒ ☒ ☒ ☒  
☒ ☒ ☒ ☒  
☒ ☒ ☐ ☐  
☐ ☐ ☐ ☐  
☒ ☒ ☒ ☒  
☐ ☐ ☐ ☐

**Title IID**

- ☐ Disease Prevention and Health Promo.

**20-21      21-22      22-23      23-24**

- ☐ ☐ ☐ ☐

**Title IIIE<sup>9</sup>**

- ☐ Information Services  
☐ Access Assistance  
☐ Support Services

**20-21      21-22      22-23      23-24**

- ☐ ☐ ☐ ☐  
☐ ☐ ☐ ☐  
☐ ☐ ☐ ☐

**Title VIIA**

- ☐ Long Term Care Ombudsman

**20-21      21-22      22-23      23-24**

- ☐ ☐ ☐ ☐

**Title VII**

- ☐ Prevention of Elder Abuse, Neglect,  
and Exploitation.

**20-21      21-22      22-23      23-24**

- ☐ ☐ ☐ ☐

Describe methods to be used to ensure target populations will be served throughout the PSA.

The AAA employs many methods to assure that target populations throughout the PSA will be served, including providing Outreach and Information and Assistance services countywide. The AAA also publishes a quarterly newsletter distributed via hard copy as well as through electronic media. The newsletter includes contributions from staff, outside contributors and Commissioners. (See sections 3.6 and 3.10)

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

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

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**Total Number of Board Members:**       5  

<b>Name and Title of Officers:</b>	<b>Office Term Expires:</b>
Nate Miley, <b>President</b> —District 4	2024
David Haubert, <b>Vice President</b> —District 1	2024

<b>Names and Titles of All Members:</b>	<b>Board Term Expires:</b>
<b>Elisa Márquez</b> —District 2	<b>2026</b>
<b>Lena Tam</b> —District 3	<b>2026</b>
Keith Carson—District 5	2024

**Explain any expiring terms – have they been replaced, renewed, or other?**

Supervisor Richard Valle passed away on February 8, 2023, after serving as Supervisor of District 2 since June 11, 2012. Due to Supervisor Valle's passing, the Board of Supervisors adopted procedures to appoint a replacement to fill the District 2 vacancy, pursuant to the County Charter. Candidate applications were required to be submitted by March 14, 2023 at 5:00 p.m. The 7 candidates who submitted applications include Ariana P. Casanova, Teresa Keng, Elisa Márquez, Jason Matthew Miguel, Harris Mojadedi, Mark Salinas, and Thomas Wong. On March 30, 2023, the Board chose to appoint Hayward City Councilmember Elisa Márquez to fill the District 2 Supervisor seat until the election and qualification of a successor to fill the seat for the balance of the existing term (through 2026). The next general election at which a candidate may be placed on the ballot is currently scheduled for March 2024. District 2 Supervisor Elisa Márquez was sworn in on April 4, 2023.

Former City of Alameda Councilmember Lena Tam was elected to fill the District 3 Supervisor seat in the General Election held on November 8, 2022.

**SECTION 17 - ADVISORY COUNCIL****PSA 09****ADVISORY COUNCIL MEMBERSHIP  
2020-2024 Four-Year Planning Cycle**


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Older Americans Act Reauthorization Act of 2016 Section 306(a)(6)(D)  
 45 CFR, Section 1321.57  
 CCR Article 3, Section  
 7302(a)(12)

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Total Council Membership (include vacancies) 21Number of Council Members over age 60 10

<b>Race/Ethnic Composition</b>	<b>% of PSA's 60+Population</b>	<b>% on Advisory Council</b>
White	<u>46</u>	<u>40</u>
Hispanic	<u>11</u>	<u>0</u>
Black	<u>12</u>	<u>40</u>
Asian/Pacific Islander	<u>28</u>	<u>0</u>
Native American/Alaskan Native	<u>0.6</u>	<u>0</u>
Other	<u>2</u>	<u>20</u>

**Name and Title of Officers:****Office Term Expires:**

<b>Kester Watters, Chair</b>	<b>05/11/2025</b>
<b>Laura McMichael-Cady, Vice-Chair</b>	<b>Renewal Pending</b>

**Name and Title of other members:****Office Term Expires:**

Barbara Price	07/31/2023
Donna Griggs Murphy	08/05/2023
Florence Raskin	02/28/2025
Sukhvinder Waraich	3/27/2025
Gursewak Singh Dhaliwal	05/11/2025
Linda Boykins	09/20/2025
Howard Kirsch	7/2/2026
Bobby Grant	4/14/2027

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

**Yes No**

☒ ☐ Low Income

☒ ☐ Representative

**Disabled**

☐ ☐ Representative

☒ ☐ Supportive Services

☐ ☐ Provider

**Representative**

☒ ☐ Health Care Provider

☐ ☐ Representative

☐ ☐ Family Caregiver

☐ ☐ Representative Local

☒ ☐ Elected Officials

☒ ☐ Individuals with Leadership Experience in Private and Voluntary Sectors

Explain any **"No"** answer(s): \_\_\_\_\_

**Explain any expiring terms – have they been replaced, renewed, or other?**

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

Advisory Commission on Aging (ACA) members are appointed either by the Board of Supervisors or the Mayor's Conference. Each of the five County Supervisors holds 2 seats, while the Mayor's Conference holds eight seats. Three of the 21 positions are "at-large" and may be recommended by the Commission, and then forwarded to the Board of Supervisors for approval. The ACA is currently working with elected officials and their representatives to fill all existing vacancies.

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

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This section must be completed and submitted annually. The Older Americans Act Reauthorization Act of 2016 designates legal assistance as a priority service under Title III B [42 USC §3026(a)(2)] CDA developed *California Statewide Guidelines for Legal Assistance* (Guidelines), which are to be used as best practices by CDA, AAAs and LSPs in the contracting and monitoring processes for legal services, and located at:

[https://aging.ca.gov/Providers\\_and\\_Partners/Legal\\_Services/#pp-gg](https://aging.ca.gov/Providers_and_Partners/Legal_Services/#pp-gg)

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Specific to Legal Services, what is your AAA's Mission Statement or Purpose Statement? Statement must include Title IIIB requirements: **Discuss:** The AAA's adherence to the State's Mission statement, pertains to legal services. The mission statement is as follows: To provide leadership in addressing issues that relate to older Californians; to develop community-based systems of care that provide services which support independence within California's interdependent society, and which protect the quality of life of older persons and persons with functional impairments; and to promote citizen involvement in the planning and delivery of services.

1. Based on your local needs assessment, what percentage of Title IIIB funding is allocated to Legal Services? **Discuss:** 10% is allocated to Legal Services.
2. Specific to Legal Services, has there been a change in your local needs in the past four years? If so, please identify the change (include whether the change affected the level of funding and the difference in funding levels in the past four years). **Yes/No, Discuss:** We are maintaining current levels of service.
3. Specific to Legal Services, does the AAA's contract/agreement with the Legal Services Provider(s) (LSPs) specify that the LSPs are expected to use the California Statewide Guidelines in the provision of OAA legal services? **Yes/No, Discuss:** Yes
4. Does the AAA collaborate with the Legal Services Provider(s) to jointly establish specific priorities issues for legal services? If so, what are the top four (4) priority legal issues in your PSA? **Yes/No, Discuss:** Yes. 1) Combating elder abuse remains a top priority. 2) AAA has also collaborated to prioritize the need for legal services related to housing. LAS has increased their housing practice in order to meet this need. 3) The AAA/LAS collaboration continues to prioritize health law through both Legal Services and the Health Insurance Counseling and Advocacy Program (HICAP). 4) Guardianship and public benefits are also priority issues.

These programs keep older adults, families, and caregivers safe and stable in their homes, thus preventing the need for future services.

5. Specific to Legal Services, does the AAA collaborate with the Legal Services Provider(s) to jointly identify the target population? **Yes/No, Discuss:** Yes, the AAA collaborates with and funds the legal service provider, Legal Assistance for Seniors (LAS) to provide services to targeted population.

6. Specific to Legal Services, what is the targeted senior population and mechanism for reaching targeted groups in your PSA? **Discuss:** LAS targets older adults who are non-English speaking, older adults who are isolated, and older adults with disabilities, to make sure these vulnerable groups are able to access needed legal services. LAS reaches these older adults by maintaining a multilingual staff, giving community presentations in multiple languages, and using a phone interpreter service to communicate with clients when needed. LAS also reaches older adults in more isolated areas by traveling to hundreds of locations throughout the county to give presentations on topics of interest to older adults, including at senior centers, senior living facilities, and community centers. LAS holds phone and video chat appointments to meet with clients who may find it difficult to travel to LAS' Oakland office and is restoring in person service with the lifting of the COVID state of emergency. LAS attorneys make home visits to older adults who cannot travel due to health or financial concerns. During the Covid-19 pandemic, collaboration expanded to the local Meals on Wheels programs to distribute information about seniors' legal rights and LAS's services in an attempt to reach homebound seniors who many do not have access to technology to learn about services available to them.

LAS is currently evaluating legal service delivery through an equity lens to determine if there are vulnerable populations that the agency has not been effective in reaching. Through analysis of agency data, combined with conversations with community partners, LAS is striving to make sure the most vulnerable older adults in our community are receiving the legal services they need.

7. How many legal assistance service providers are in your PSA? **Complete table below.**

Fiscal Year	# of Legal Assistance Services Providers
<b>2020-2021</b>	1
<b>2021-2022</b>	1
<b>2022-2023</b>	1
<b>2023-2024</b>	1

8. What methods of outreach are Legal Services providers using? **Discuss:** LAS provides several different methods of outreach to ensure that the senior community is aware of the services available and are able to access them.

During the Covid-19 pandemic, LAS has been collaborating with local Meals on Wheels programs to include flyers about Seniors' legal rights and about the services LAS provides. LAS also provides free community education presentations virtually and at locations throughout Alameda County on topics of interest to older adults, including How to Prevent Medicare Fraud and Abuse, An Overview of Long-Term Care, and How to Get Help with Healthcare Costs, among others.

Through these free presentations, older adults are also able to learn about the free services offered by LAS. In addition to providing community education presentations, LAS



staff and volunteers also conduct outreach at health and community fairs; between LAS' outreach efforts and community education presentations, LAS is able to reach thousands of Alameda County older adults each year. LAS maintains a large network of community partners, through collaboration and service provider groups, to ensure that partners can easily refer older adults who need legal services to the agency. Additionally, LAS provides technical assistance to community partners to help them improve their services to older adults.

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

<b>Fiscal Year</b>	<b>Name of Provider</b>	<b>Geographic Region covered</b>
<b>2020-2021</b>	Legal Assistance for Seniors	Countywide
<b>2021-2022</b>	Legal Assistance for Seniors	Countywide
<b>2022-2023</b>	Legal Assistance for Seniors	Countywide
<b>2023-2024</b>	<b>Legal Assistance for Seniors</b>	<b>Countywide</b>

10. Discuss how older adults access Legal Services in your PSA: **Discuss:** Older adults access LAS' services through several different means; many clients are referred by Adult Protective Services, the Department of Children and Family Services, and other community partners. In addition to referrals, older adults also contact LAS' office directly, either by phone or through LAS' website. Finally, older adults who attend LAS' various community education presentations are often able to ask individual questions after the presentation. If they have an issue that falls within LAS' practice areas, the appropriate LAS staff member will follow up with them after the presentation to provide additional information or assistance.

11. Identify the major types of legal issues that are handled by the Title IIIB legal provider(s) in your PSA (please include new trends of legal problems in your area): **Discuss:**

The major types of legal issues that LAS handles are:

- Elder abuse, including restraining orders and "kick-out" orders to remove abusers living in older adults' homes;
- Health law, including Medicare, Medi-Cal, and private insurance issues;
- Naturalization, including assisting older adults in applying for fee waivers and disability waivers for the language and testing component of the citizenship interview;
- Public benefits, including Social Security and SSI eligibility, reductions, and overpayment issues;
- Legal guardianship, for adults 50 and older who are caring for minor children; and
- housing, including representing older adult tenants who are at risk of losing their housing.

A recent study out of UCSF states that older adults are a significant portion of the newly

homeless in Alameda County and highlights the critical nature of preventative services, such as legal representation, to stabilize housing. When older adults are displaced, they not only lose their homes, but they also lose their cultural community, their caregivers, their support networks and stability. Tragically, these losses can cause severe health implications and more and more frequently, death. Older adults especially cannot wait for new construction to occur and the move to new units may also be disruptive. LAS believes older adults, and the affordable housing they reside in, must be protected and preserved in place.

Changes to the legal practice during the pandemic have left seniors especially vulnerable. During the past two years, many court hearings and administrative hearings have been held virtually. Many of the older adults served do not have access to the necessary technology to access justice and protect their rights. LAS has worked to teach their clients about the technology and to provide access. LAS has set up conference rooms in their office where their clients can attend court hearings virtually.

12. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. **Discuss:** For many of the older adults that LAS serves, a major barrier in access to services is transportation and mobility issues. LAS has made home visits available to older adults who, for economic reasons or physical limitations, cannot easily travel from their home. Without someone going to their home or to a meeting place close to their home, many older people would not be able to access the services they need to stay in their home and thrive in the community. During the pandemic, LAS has shifted how home visits are performed, often meeting with clients outside, maintaining six feet of spatial distance, and always masked. For many of our elder abuse clients, they have been living in unsafe and dangerous situations for many years and have had difficulty finding help. Being able to sit down with an attorney and connect face-to-face often is the difference in the senior's confidence to move forward and take the steps to seek protection. Often during a home visit, the LAS attorney is also able to identify several other needs of the senior. The attorneys help the senior address these other issues even though it may not have been a legal issue or the initial reason the senior requested assistance. Being able to meet with a senior in a safe place, one-on-one, is by far the most effective way to assist a senior with their needs.

13. What other organizations or groups does your legal service provider coordinate services with? **Discuss:** LAS works closely with many community collaborators to ensure that we are providing the strongest possible services to indigent older adults throughout Alameda County. LAS has direct contracts with the county of Alameda to provide legal services in elder abuse, guardianship, housing, immigration, public benefits and health law. LAS is also appointed by the Alameda County probate court to represent proposed conservatees. LAS holds a contract with Alameda County Adult Protective Services (APS). LAS also has working partnerships with many agencies in Alameda County. LAS currently works closely with the Alameda County Bar Association to provide a pro per guardianship assistance and pro per limited conservatorship assistance; Family Support Services of the Bay Area (FSSBA) to provide ongoing support for guardianship clients; the Alameda County Kinship Collaborative, a group of service providers focused on

families headed by kin caregivers that hosts an annual educational conference for caregivers and the youth in their care; the Court Bench Bar meeting, run by the court aimed at providing better services to the community; the Community Projects Committee, a group of nonprofit legal service providers that provide information and trainings in order to better serve the indigent population; the District Attorney's Office, to create a collaborative approach to victim's rights; and the Senior Services Coalition, to coordinate services and support among senior service providers. LAS maintains a strong network of community partners through our work. LAS works closely with many of the cities in the County, partnering with existing city services to create a comprehensive service network for seniors. Also, LAS works closely with senior housing facilities, senior centers and community centers. LAS is always searching for new and innovative community partners to ensure the highest quality services to older adults in Alameda County.

**SECTION 19 - MULTIPURPOSE SENIOR CENTER ACQUISITION OR CONSTRUCTION COMPLIANCE REVIEW**

CCR Title 22, Article 3, Section 7302(a)(15)  
**20-year tracking requirement**

- ☒ No. Title IIIB funds not used for Acquisition or Construction.
- ☐ Yes. Title IIIB funds used for Acquisition or Construction.

Title III Grantee and/or Senior Center (complete the chart below):

Title III Grantee and/or Senior Center	Type Acq/Const	IIIB Funds Awarded	% Total Cost	Recapture Period		Compliance Verification State Use Only
				Begin	End	
Name: Address:						
Name: Address:						
Name: Address:						
Name: Address:						

**SECTION 20. FAMILY CAREGIVER SUPPORT PROGRAM**

**Notice of Intent for Non-Provision of FCSP Multifaceted Systems of Support Services**  
 Older Americans Act Reauthorization Act of 2016,  
**Section 373(a) and (b)**

**2020-2024 Four-Year Planning Cycle**

Based on the AAA's review of current support needs and services for **family caregivers** and **grandparents** (or other older relative of a child in the PSA), indicate what services the AAA **intends** to provide using Title III E and/or matching FCSP funds for both family caregivers and grandparents/older relative caregivers.

Check YES or NO for each of the services identified below and indicate if the service will be provided directly or contracted. **If the AAA will not provide a service, a justification for each service is required in the space below.**

**Family Caregiver Services**

<b>Category</b>	<b>2020-2021</b>	<b>2021-2022</b>	<b>2022-2023</b>	<b>2023-2024</b>
Family Caregiver Information Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract
Family Caregiver Access Assistance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract
Family Caregiver Support Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract
Family Caregiver Respite Care	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract
Family Caregiver Supplemental Services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract

## Grandparent Services

Category	2020-2021	2021-2022	2022-2023	2023-2024
Grandparent Information Services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Grandparent Access Assistance	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Grandparent Support Services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Grandparent Respite Care	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract
Grandparent Supplemental Services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract

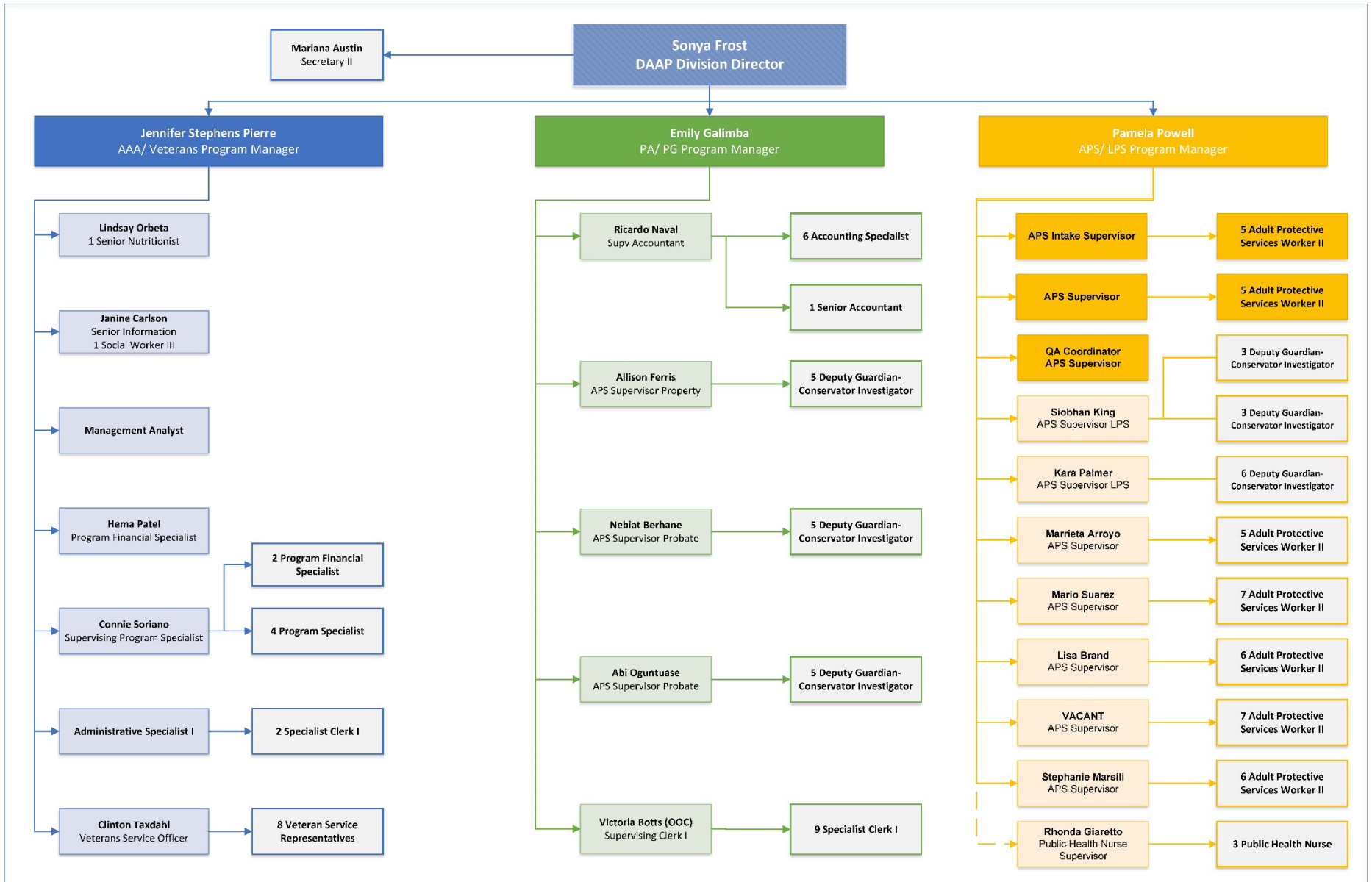
\*Refer to PM 11-11 for definitions for the above Title III E categories.

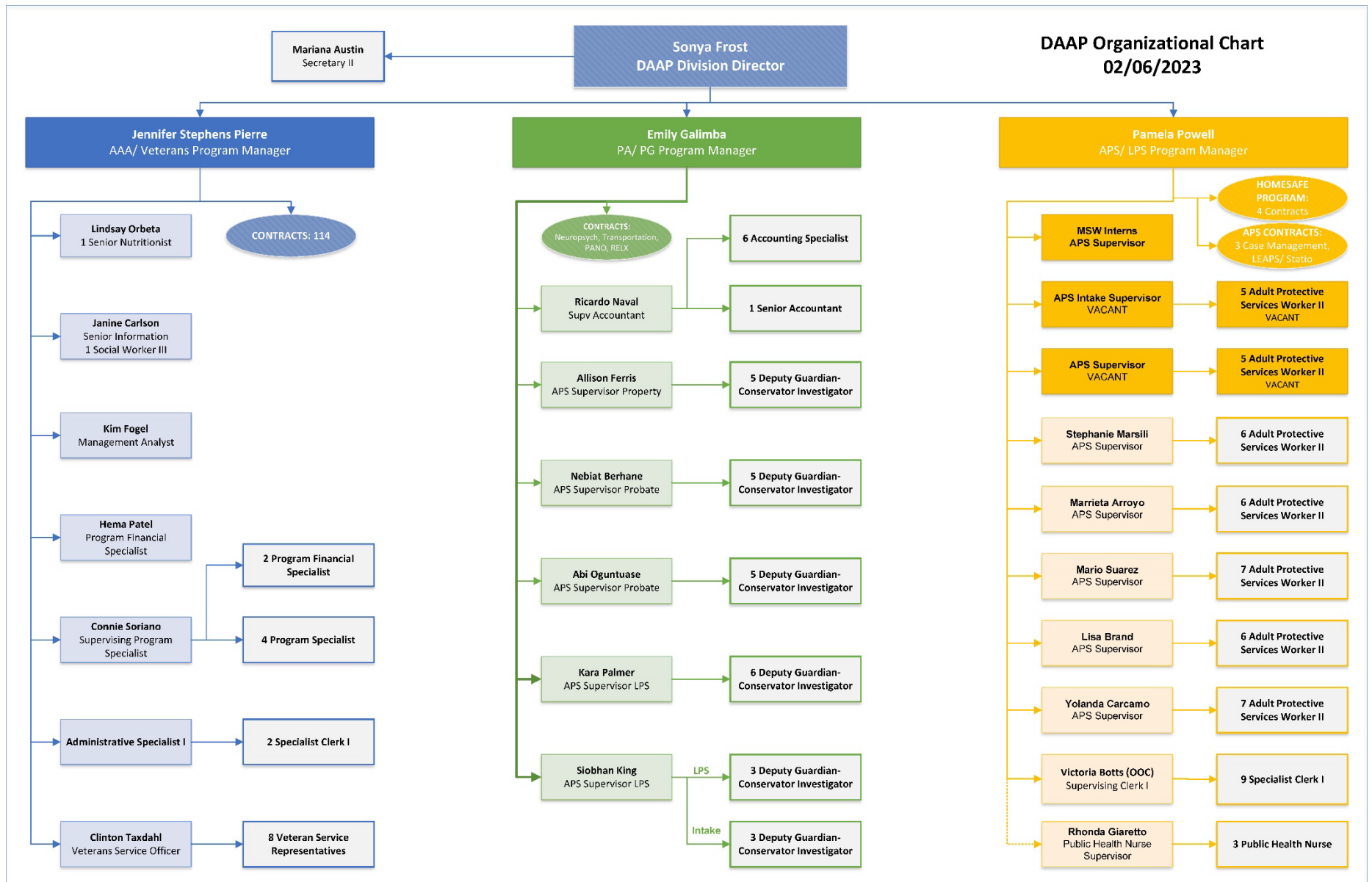
**Justification:** For each service category checked “no”, explain how it is being addressed within the PSA.

When the AAA released its last RFP, it did not receive bid responses to provide FCSP Supplemental Services. The services are provided in the PSA. For example, the On Lok PACE program located at 3683 Peralta Blvd, Fremont, CA provides assistive devices. The service is provided in Southern Alameda County.

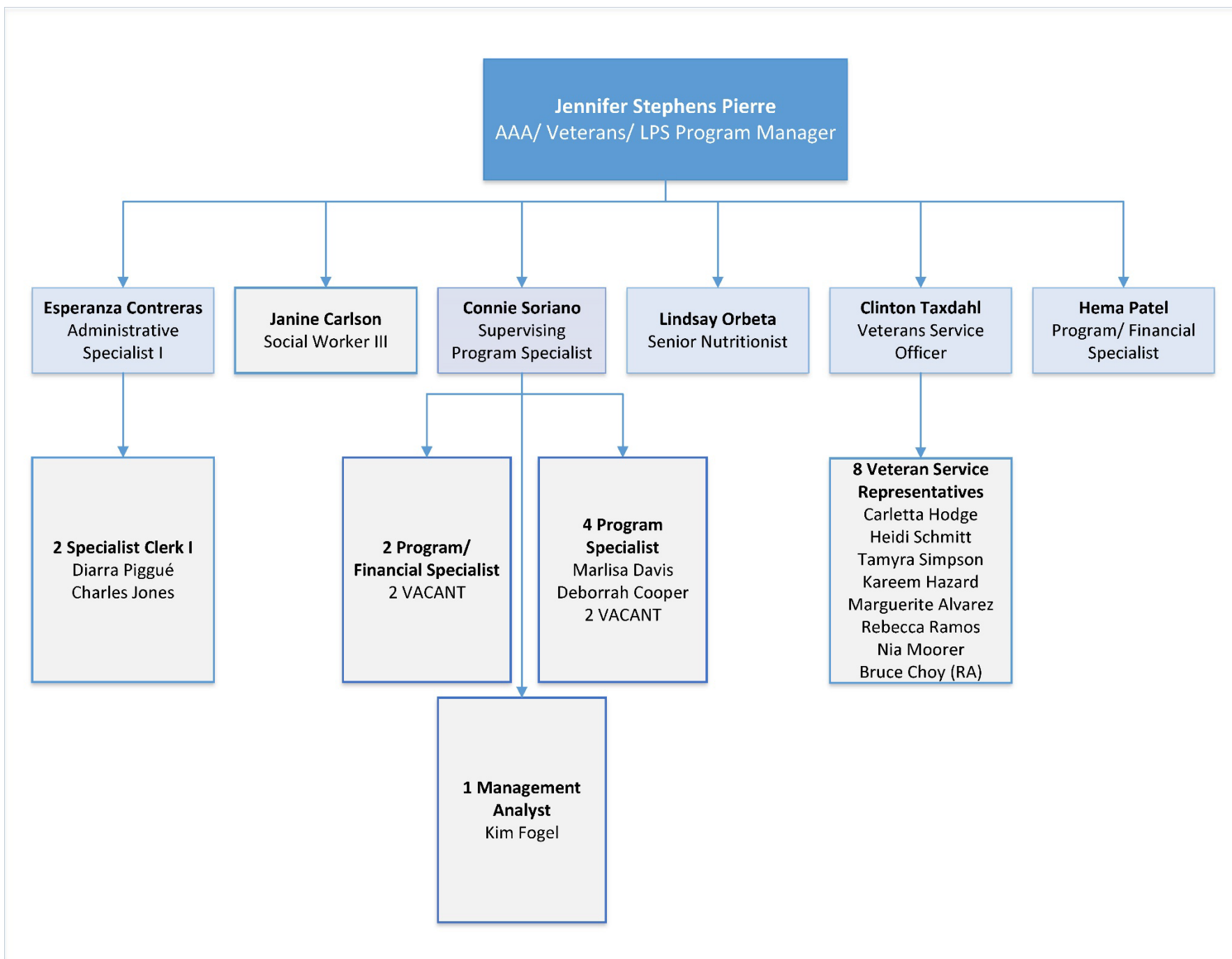
For FCSP Grandparent Services, the AAA only received a bid response to provide Respite Services. The agency providing the service, Family Support Services of the Bay Area, 401 Grand Avenue, Suite 500, Oakland, CA 94610, <http://fssba.org/our-services/kinship-support>, offers a full range of services, including information & assistance, support groups, workshops & training and supplemental services (captured as “Basic Needs” on their agency budget). These services are provided in Northern Alameda County, including Albany through Oakland.

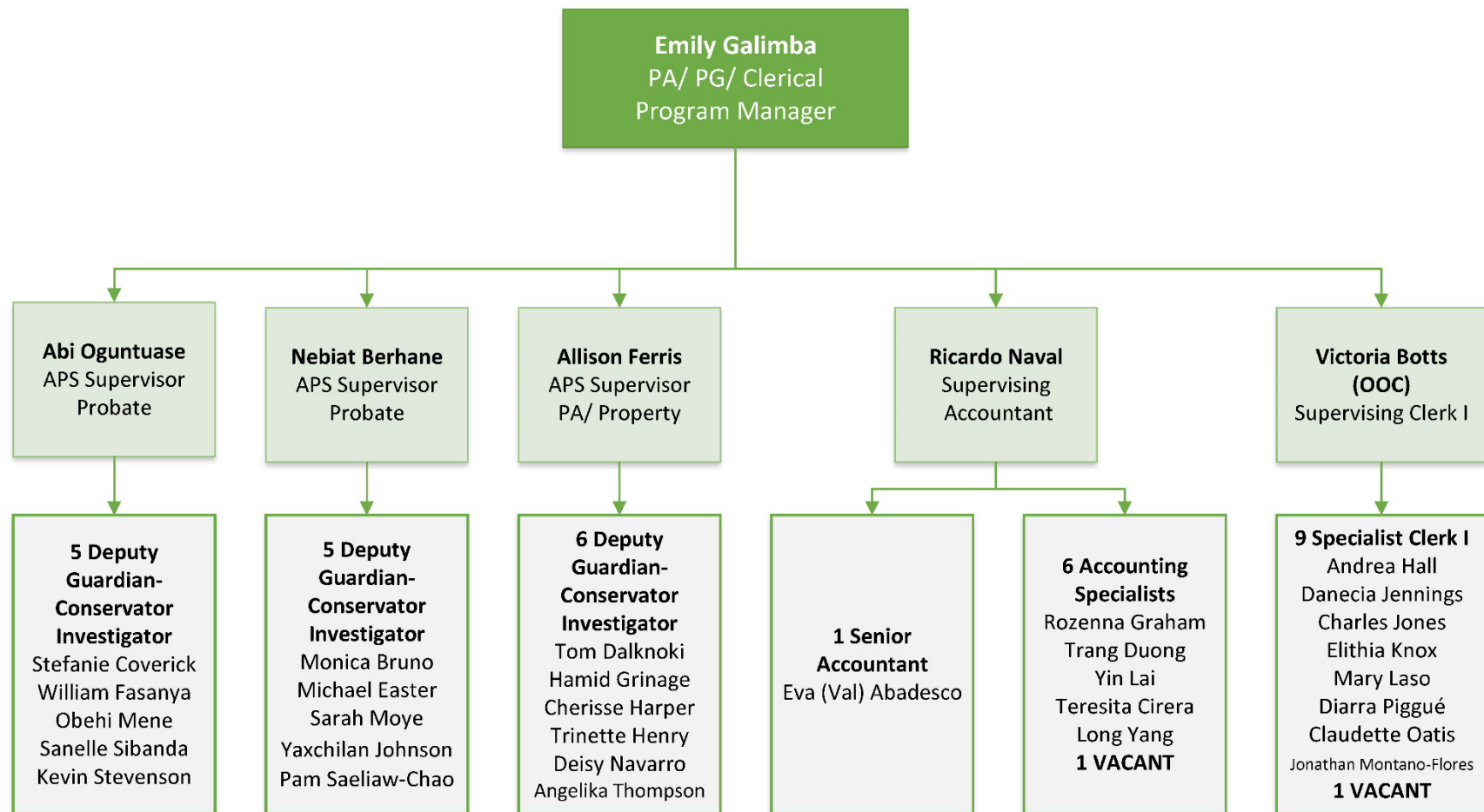
## SECTION 21 - ORGANIZATION CHART

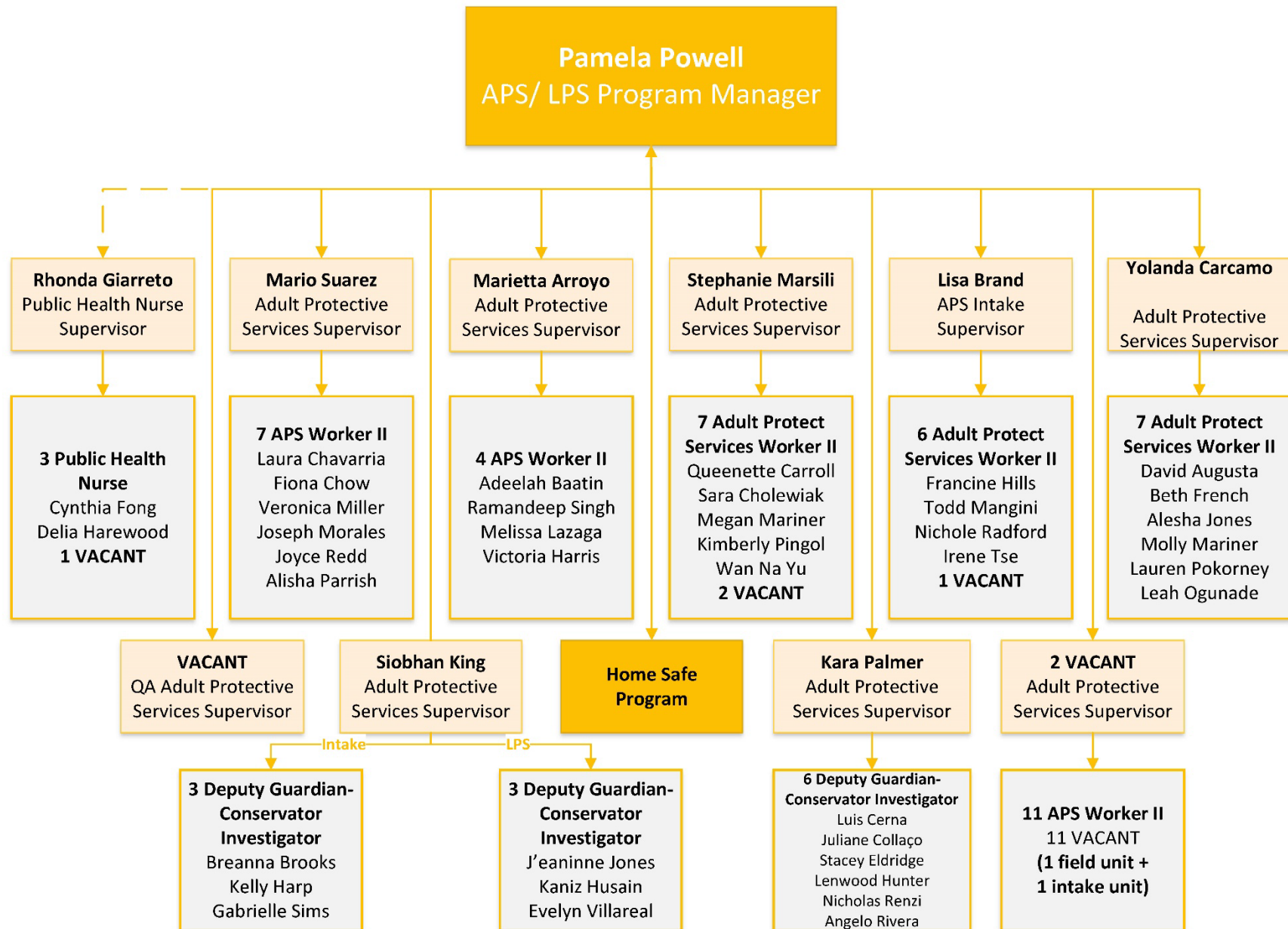












## **SECTION 22 - ASSURANCES**

Pursuant to the Older Americans Act Reauthorization Act of 2020, (OAA), the Alameda County Area Agency on Aging assures that it will:

### **A. Assurances**

#### **1. OAA 306(a)(2)**

*Provide an adequate proportion, as required under Older Americans Act Reauthorization Act of 2020 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 and behavioral 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 with 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;*

The AAA complies with this assurance by advocating for and funding resources, programs, and collaborative solutions to address critical issues of aging including financial and food insecurity, housing, mental health challenges, safety and elder justice, growing social isolation, complex care needs, dementia and the need for a formal and informal system of caregiving. (See section 2.1 and all of Section 4.)

#### **2. OAA 306(a)(4)(A)(i)(I-II)**

(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 (aa) and (bb) of subclause (I);

The AAA and the Age Friendly Council target for services individuals with greatest economic need, older individuals with greatest social need, individuals in rural areas, and older individuals at risk for institutional placement. With regard to legal services for older and disabled individuals

with limited English proficiency, Legal Assistance for Seniors (LAS) ensures these vulnerable groups are able to access needed legal services. LAS reaches these older adults by maintaining a multilingual staff, giving community presentations in multiple languages, and using a phone interpreter service to communicate with clients when needed. (Also see Section 18, #6 and Assurance #20.)

### 3. OAA 306(a)(4)(A)(ii)

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;

This APU demonstrates compliance with Assurance #3 with programs specifically directed towards low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider, particularly in the areas of housing, elder justice and elder abuse, digital divide, and contracts with providers. See Sections 4.14-17: Section 18, #6 and #11; and Assurances #2, #4, #6, #20, and #30.

### 4. OAA 306(a)(4)(A)(iii)

With respect to the fiscal year preceding the fiscal year for which such plan is prepared—

- (I) identify the number of low-income minority older individuals 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 assurance number 2.

Per the 2022 RFP, the AAA is committed to providing services throughout all regions of the county and establishes guidelines for funding that reflect each region's population of seniors that are minority, low-income, language isolated and functionally impaired.

### 5. OAA 306(a)(4)(B)

Use outreach efforts that —

- (i) 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, specifically including survivors of the Holocaust; 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;

The AAA works in partnership with other AAS Divisions, County departments, the Age-Friendly Council, its providers, and non-OAA funded agencies to increase awareness of available senior services and issues such as elder neglect and abuse and elder justice. Coordinated campaigns include public presentations, dissemination of collateral materials, public proclamations by the Board of Supervisors, social media communications, and speaking and tabling at community events. (See sections 3.6, 3.10, 4.9, 14, and 18)

Note: To date the AAA has not received any request for holocaust related services but is prepared to respond and refer the consumer if a request is received.

#### 6. OAA 306(a)(4)(C)

Contain an 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;

All AAA providers target these populations per the 2022 RFP.

#### 7. OAA 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;

The ADRC works with the nonprofits Center for Independent Living, Community Resources for Independent Living, and Empowered Aging. AAA's IIIB services and ADRC provide community-based interventions for this population. Services include Case Management, Senior Centers, Information and Assistance, and Visiting.

#### 8. OAA 306(a)(9)(A)-(B)

(A) Provide assurances that the Area Agency on Aging, in carrying out the State Long-Term Care Ombudsman program under 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2019 in carrying out such a program under this title;

(B) funds made available to the Area Agency on Aging pursuant to section 712 shall be used to supplement and not supplant other Federal, State, and local funds expended to support activities described in section 712;

AAS provides these assurances through the Ombudsman program. See sections 3.7, 4.9-12, TITLE IIIB and Title VIIA: LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES, and Section 14.

#### 9. OAA 306(a)(11)

Provide information and assurances 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.

Older disabled adults are referred when appropriate to CBO's that serve this population. Currently AAA does not receive Title VI funding.

#### 10. OAA 306(a)(13)(A-E)

- (A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;
- (B) 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;
- (C) 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 contract or such relationship;
- (D) 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 contract or such relationship; and
- (E) 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;

AAA and other AAS departments provide quarterly monitoring of all providers with whom they have a contractual relationship. AAA and all other AAS departments are in turn monitored by the CDA per state and federal law.

#### 11. 306(a)(14)

Provide assurances that preference in receiving services under this Title will not be given by the Area Agency on Aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title;

All AAA contracts are subject to the Contractual rules overseen by Alameda County's General Services Agency, which oversees the procurement process and ensures compliance with this assurance. An overview of the County's procurement policies may be found at <https://rb.gy/xo7td>

#### 12. 306(a)(15)

Provide assurances that funds received under this title will be used—

- (A) to provide benefits and services to older individuals, giving priority to older individuals identified in Section 306(a)(4)(A)(i); and
- (B) in compliance with the assurances specified in Section 306(a)(13) and the limitations specified in Section 212;

AAA obtains services through the RFP process and our performance is monitored and audited by CDA.

13: OAA 305(c)(5)

In the case of a State specified in subsection (b)(5), the State agency shall provide assurance, determined adequate by the State agency, that the Area Agency on Aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

Every four years, the AAA assesses the needs of older adults in the County through surveys, focus groups and public forums. The data collected from these efforts are used to develop the Countywide Area Plan (CWAP) for Older Adults. AAA releases a CWAP every four years and provides yearly updates.

14. OAA 307(a)(7)(B)

(B)

- (i) no individual (appointed or otherwise) involved in the designation of the State agency or an Area Agency on Aging, or in the designation of the head of any subdivision of the State agency or of an Area Agency on Aging, is subject to a conflict of interest prohibited under this Act;
- (ii) no officer, employee, or other representative of the State agency or an Area Agency on Aging is subject to a conflict of interest prohibited under this Act; and
- (iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

15. OAA 307(a)(11)(A)

- (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 (i) 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 on a pro bono and reduced fee basis.

14 & 15: The County's General Services Agency and County Counsel provide oversight that ensures compliance with these assurances. All of our contracts are reviewed by County Counsel and GSA and approved as to form prior to execution. All contracts over \$25,000 are reviewed and approved by the County's Board of Supervisors.

16. OAA 307(a)(11)(B)

That no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the Area Agency on Aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.



AAA contracts only with service providers that are nonprofit and provide services to the targeted population. The requirement is included in the RFP and the best candidate is selected through the competitive bidding process.

17. OAA 307(a)(11)(D)

To the extent practicable, that legal assistance furnished under the 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; and

18. OAA 307(a)(11)(E)

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.

The AAA collaborates with and funds the legal service provider, Legal Assistance for Seniors (LAS), to provide the services listed in this assurance to targeted populations. See sections 4.9-12, Section 10-Title VIIA: Elder Abuse Prevention Service Plan Objectives, and Section-18 Legal Assistance.

19. OAA 307(a)(12)(A)

Any Area Agency on Aging, in carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for -

- (i) public education to identify and prevent abuse of older individuals;
- (ii) receipt of reports of abuse of older individuals;
- (iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and
- (iv) referral of complaints to law enforcement or public protective service agencies where appropriate.

With regard to assurances 19iii and 19iv, AAA and programs funded by it are mandated reporters. In addition, AAA serves on APS' multi-disciplinary team (MDT), which works with law enforcement and other County services to protect vulnerable adults. With regard to Assurance 19i (public education), see sections 4.9-12, Section 10-Title VIIA: Elder Abuse Prevention Service Plan Objectives, and Section 18-Legal Assistance for the AAA's and Legal Assistance for Seniors' public education programs.

20. OAA 307(a)(15)

If a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the Area Agency on Aging for each such planning and service area -

- (A) To utilize in the delivery of outreach services under Section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability.
- (B) To designate an individual employed by the Area Agency on Aging, or available to such Area Agency on Aging on a full-time basis, whose responsibilities will include:
  - (i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and

(ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effective linguistic and cultural differences.

All clients of the Alameda County Social Services Agency, where the AAA is housed, are entitled to translation when receiving Agency services. AAA funds ethnic-specific services and makes materials available in nine threshold languages. Our contractors are required to have translation services.

21. OAA 307(a)(18)

Conduct efforts to 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 in long-term care facilities, but who can return to their homes if community-based services are provided to them.

The AAA complies with this assurance through the ADRC and Ombudsman Services programs. AAA is a core partner of the ADRC, which provides care transitions, and works closely with the Ombudsman to address reports of abuse and ensure service delivery to people at risk of institutionalization. For more information on the ADRC, see sections 2.5, 3.4, and 4.4, and Section 10 (Information and Assistance). For more information on Alameda County's Ombudsman program, see sections 4.9, 4.11-12, and TITLE IIIB and Title VIIA: Long-Term Care (Ltc) Ombudsman Program Outcomes.

22. OAA 307(a)(26)

Area Agencies on Aging will provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care. FY 2023-24 – Page 55

B. Code of Federal Regulations (CFR), Title 45 Requirements:

23. CFR [1321.53(a)(b)]

(a) The Older Americans Act intends that the area agency on aging shall be the leader relative to all aging issues on behalf of all older persons in the planning and service area. This means that the area agency shall proactively carry out, under the leadership and direction of the State agency, a wide range of functions related to advocacy, planning, coordination, inter-agency linkages, information sharing, brokering, monitoring and evaluation, designed to lead to the development or enhancement of comprehensive and coordinated community-based systems in, or serving, each community in the Planning and Service Area. These systems shall be designed to assist older persons in leading independent, meaningful and dignified lives in their own homes and communities as long as possible.

(b) A comprehensive and coordinated community-based system described in paragraph (a) of this section shall: (1) Have a visible focal point of contact where anyone can go or call for help, information or referral on any aging issue;

(2) Provide a range of options:

(3) Assure that these options are readily accessible to all older persons: The independent, semi-dependent and totally dependent, no matter what their income;

(4) Include a commitment of public, private, voluntary and personal resources committed to supporting the system;

- (5) Involve collaborative decision-making among public, private, voluntary, religious and fraternal organizations and older people in the community;
- (6) Offer special help or targeted resources for the most vulnerable older persons, those in danger of losing their independence;
- (7) Provide effective referral from agency to agency to assure that information or assistance is received, no matter how or where contact is made in the community;
- (8) Evidence sufficient flexibility to respond with appropriate individualized assistance, especially for the vulnerable older person;
- (9) Have a unique character which is tailored to the specific nature of the community;
- (10) Be directed by leaders in the community who have the respect, capacity and authority necessary to convene all interested persons, assess needs, design solutions, track overall success, stimulate change and plan community responses for the present and for the future.

Under direction of the CDA, AAA has complied with this assurance by:

- Contracting with and monitoring providers for services that support older adults aging in place in the community;
- Obtaining and coordinating ADRC designation for the County. The ADRC provides a visible focal point of contact where anyone can go or call for help, information or referral on any aging issue and provides a range of options accessible to all older persons in the community (Assurance 23 – b2-3, and b6-8). For more information on the ADRC and Senior Information and Assistance, see sections 2.5, 3.4, and 4.4, and Section 10 (Information and Assistance).
- Providing leadership through membership on the County's Age Friendly Council, which is guided by the goals established through the AAA's 2020-2024 Countywide Area Plan for Older Adults. Recent accomplishments include: 1) submission of Age Friendly County application to AARP and; 2) roll out of the six-part training series for staff and providers entitled the "Alameda Geriatric Workforce Enhancement Program" (GWEP). See sections 1 and 2.
- Organizing networking opportunities such as the Providers' meeting (see section 2.7) and the Roundtable (see sections 2.7 and 3.5) for public and private partners to share resources.
- Conducting surveys, focus groups, and public forums to ensure the programs and services reflect the needs of a diverse community; and
- Taking direction from the Alameda County Board of Supervisors, which approves all programs and services, and advice from the Advisory Commission on Aging, appointed by the Board of Supervisors and the Conference of Mayors.

#### 24. CFR [1321.53(c)]

The resources made available to the Area Agency on Aging under the Older Americans Act are to be used to finance those activities necessary to achieve elements of a community-based system set forth in paragraph (b) of this section.

See Assurance #23 above.

#### 25. CFR [1321.53(c)]

Work with elected community officials in the planning and service area to designate one or more focal points on aging in each community, as appropriate.

Focal points are established in the RFP. The County's elected Board of Supervisors is the governing entity and approves all contracts.

26. CFR [1321.53(c)]

Assure that services financed under the Older Americans Act in, or on behalf of, the community will be either based at, linked to or coordinated with the focal points designated.

Please see response to Assurance 25 above.

27. CFR [1321.53(c)]

Assure access from designated focal points to services financed under the Older Americans Act.

Contractors are required to submit regular reports and are monitored for compliance with this assurance.

CFR [1321.53(c)]

Work with, or work to assure that community leadership works with, other applicable agencies and institutions in the community to achieve maximum collocation at, coordination with or access to other services and opportunities for the elderly from the designated community focal points.

AAA collaborates with the County's Age Friendly council, the County's Social Services Agency (SSA), other divisions of SSA's Adult and Aging Services department, other County departments, other AAAs, providers, and other community partners to ensure this requirement is met.

28. CFR [1321.61(b)(4)]

Consult with and support the State's long-term care ombudsman program.

AAA funds Empowered Aging to perform ombudsman services. The program is monitored by CDA and the State Ombudsman Office to ensure compliance. For more information on Alameda County's Ombudsman program, see sections 4.9, 4.11-12, and TITLE IIIB and Title VIIA: Long-Term Care (Ltc) Ombudsman Program Outcomes.

29. CFR [1321.61(d)]

No requirement in this section shall be deemed to supersede a prohibition contained in the Federal appropriation on the use of Federal funds to lobby the Congress; or the lobbying provision applicable to private nonprofit agencies and organizations contained in OMB Circular A-122.

AAA is in compliance with this assurance.

30. CFR [1321.69(a)]

Persons age 60 and older who are frail, homebound by reason of illness or incapacitating disability, or otherwise isolated, shall be given priority in the delivery of services under this part.

While all persons aged 60 and older are eligible to receive OAA services, older individuals in the greatest economic need, greatest social need, low-income minority, and frail individuals are particularly targeted for services [45CFR§1321.69]. The Alameda County AAA aims to serve these targeted groups at higher rates than what these groups represent in the overall older population, for each region.

Contractors are expected to exceed percentages shown in these tables.

North		Central	
Age 75+	30%	Age 75+	30%
Low-Income	32%	Low-Income	25%
Functionally Impaired	30%	Functionally Impaired	30%
Minorities	52%	Minorities	54%
South		East	
Age 75+	27%	Age 75+	25%
Low-Income	21%	Low-Income	16%
Functionally Impaired	27%	Functionally Impaired	25%
Minorities	62%	Minorities	24%
Countywide			
Age 75+	28%		
Low-Income	25%		
Functionally Impaired	28%		
Minorities	52%		

## ----- Summary of Brown Act Changes Effective January 1, 2023 -----

A new bill signed into law in September, AB 2449, provides boards and commissions with long-term permissions to hold remote meetings without having to give the public access to private locations, subject to certain restrictions. The new law will take effect on January 1, 2023.

In response to the pandemic, the California Legislature previously passed AB 361 to streamline the requirements for teleconference/virtual meetings under the Brown Act during times of local emergency. Before AB 361, the Brown Act's teleconference rules required posting each teleconference location and making each location open to the public, which proved ineffective during a global pandemic. Over the past two years, public agencies and the general public have become more comfortable with meeting virtually, and many public bodies lobbied to get legislation passed that would extend the remote meeting protections past AB 361's sunset date of Jan. 1, 2024. AB 2449 aims to do just that. Crucially, AB 361 still remains effective until Jan. 1, 2024, and local agencies may continue to make or renew remote meeting findings under that law as appropriate.

AB 2449 reiterates the standard Brown Act teleconference rules, re-codifies the rules set out in AB 361 for times of declared emergency, and also provides for relaxed teleconferencing rules when a member of the board/commission needs to attend remotely for an emergency, or other reasons supported by "just cause."

### ***Newly Added Teleconference Rules Available Jan. 1, 2023***

Under the new teleconference rules, a board/commission may hold a "hybrid" (partial teleconference, partial in-person) meeting without having to comply with certain procedural requirements (post agendas at teleconference locations, identify teleconference locations in the agenda, make all teleconference locations open to the public) in the following limited circumstances:

1. One or more members of the board/commission (but less than a quorum) have "just cause" for not attending the meeting in person.  
Just cause is defined as:
  - a. childcare or family caregiving need
  - b. contagious illness
  - c. physical or mental disability need, or
  - d. travel while on official public business)
2. One or more members of the board/commission (but less than a quorum) experience an *emergency circumstance* (a physical or family medical emergency that prevents in-person attendance).

In order to participate remotely under the *just cause* provisions, the member must notify the board/commission at the earliest possible opportunity, including at the start of a meeting, of their need to participate remotely and provide a general description of the circumstances related to one of the four items in #1, above.

*Emergency circumstances* means a physical or family medical emergency that prevents a member from attending in person. In order to participate remotely under the *emergency circumstances* provisions, the member must request that the board/commission allow them to participate in the meeting remotely because of emergency circumstances and the board/commission must take action to approve the request.

A member must make a request to participate remotely under the *emergency circumstances* provisions as soon as possible. The board/commission may take action on this request at the earliest opportunity. If the request does not allow sufficient time to place it on the agenda for the meeting for which the request is made, the board/commission may take action on the request at the beginning of the meeting by majority vote.

The board/commission must request a general description of the circumstances relating to the member's need to appear remotely. This description does not have to be more than 20 words and the member does not have to disclose any personal medical information.

If board/commission members participate remotely under this new law for either the *just cause* or *emergency circumstances* situations described above then the following rules apply:

- The board/commission must provide a way for the public to remotely hear, visually observe, and remotely address the board/commission, either by a two-way audiovisual platform or a two-way telephonic service and a live webcasting of the meeting.
- The board/commission must provide notice of how the public can access the meeting and offer comments.
- The agenda must identify and include an opportunity for the public to attend and directly address the board/commission through a call-in option, an internet-based service option, and in-person at the location of the meeting.
- The board/commission cannot require comments to be submitted before the start of the meeting. The public must be allowed to make "real time" public comment.
- If there is a disruption to the meeting broadcast or in the ability to take call-in or internet-based public comment, no further action can be taken on agenda items until the issue is resolved.
- The board/commission must implement a procedure for receiving and resolving requests for reasonable accommodations for individuals with disabilities, and must give notice of these procedures.
- Members participating remotely must participate through both audio and visual technology.
- Members participating remotely must publicly disclose at the meeting before any action is taken whether any other individuals 18 years of age or older are present

in the room at the remote location with the member and the general nature of the member's relationship with the individual.

- **A member may not participate in meetings solely by teleconference under this law for more than three consecutive months or 20% of the regular meetings for the public agency within a calendar year. If the board/commission regularly meets less than 10 times a year, a member may not participate remotely for more than two meetings.**

The board/commission may still meet via teleconference by following the traditional Brown Act rules of identifying the teleconference site on the agency's agenda and ensuring it is accessible for the public to attend. **Further, board/commission may meet by teleconference under AB 361 until January 1, 2024 during the Governor's proclaimed State of Emergency and as long as other requirements are met.**