Midland Area Agency on Aging

PUBLIC INFORMATION DOCUMENT

Area Plan

For

Area Plan Cycle 2022 through 2024

FOR SERVICES TO OLDER ADULTS AND PERSONS WITH DISABILITIES

OF

Clay, Effingham, Fayette, Jefferson, and Marion Counties

May 21, 2021
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I. PURPOSE

The purpose of this Public Information Document is to provide information on the proposed 2022-2024 Area Plan for services to older persons and persons with disabilities in Clay, Effingham, Fayette, Jefferson, and Marion Counties. This document includes pertinent Area Plan exhibits to be submitted and is provided for public view prior to the scheduled Public Hearing.

Issuance of the Public Information Document is to allow the public the opportunity to review the content proposed in the Area Plan and to prepare either written or oral testimony to the Area Agency for its consideration prior to submittal of the Area Plan to the Illinois Department on Aging.

II. PUBLIC HEARING INFORMATION

The Public Hearing on the proposed FY 2022-2024 Area Plan will be held virtually:

Friday June 11, 2021
10:00 a.m.

Zoom Link: https://zoom.us/meeting/register/tJEvfucHgjooEtaqrFiV-zelwO--0yL03IEJ
Email nancy@midlandaaa.org for link and to register

The Public Hearing affords the public the opportunity to provide comments, suggestions, and information on the proposed Area Plan. Written and oral testimony will be accepted at the hearing, and is encouraged.

The hearing will begin promptly at 10:00a.m. and will conclude when all persons present and wishing to testify have had the opportunity to do so. It is important to be present at the beginning of the hearing to assure testimony will be received.

Written testimony containing an original signature of the person(s) providing the testimony may also be submitted no later than 4:00 p.m. Friday June 18, 2021:

Tracy Barczewski, Executive Director
Midland Area Agency on Aging
434 S. Poplar Street
Centralia, Illinois 62801

Written testimony received via facsimile or other electronic transmittal will be accepted.
Fax Number 618-532-5259
Email office@midlandaaa.org
A summary of all testimony received and any resultant changes to the proposed Area Plan will be available from the Area Agency upon request, ten (10) business days following the Public Hearing.

III. SUMMARY OF RESULTS OF NEEDS ASSESSMENT AND PLANNING PROCESS

Midland Area Agency on Aging’s planning process involves several steps using a number of procedures and resources. The planning process allows for basic identifications of the concerns and needs of older persons in the area. It includes a mechanism for adjusting the Area Agency approach to meeting those needs and addressing concerns of older persons as they change over the three-year planning cycle. The planning process in preparation for the development of the three-year Area Plan encompassed many activities and resource analyses to determine the overall service needs and concerns of older persons in the area. The plan was developed to meet those needs to the extent possible with projected resources in the area.

March of 2020 changed everything in every way of the service delivery system provided by Midland Area Agency. The Covid-19 Pandemic has made us reevaluate and redesign every service we have. Our service system has been built around face to face contact. Whether it was at a congregate meal, a home delivered meal, information and assistance, legal, transportation, caregiver services, adult protective services, ombudsman, health promotion programs, friendly visiting, or case coordination unit services which are all different services, the one common thread was they were provided in a face to face manner. In a matter of hours sites were closed, people were sent home to work remotely, technology became more important, and essential services had to be redesigned to protect both clients and workers.

Becoming familiar with virtual formats became mandatory. This is especially difficult in our rural communities where broadband system is weak at best and non-existent at worst. Our clients either do not have the ability or refuse to become part of the virtual world. Services have been provided via drive through, drop boxes, drop and knock meals, and all with PPE measures being implemented. The Aging Network in PSA 09 have been troopers and innovators in the provision of services during this unprecedented time. As we prepare for Fiscal Year 22 we are hopeful that it will be a rebuilding year. As we plan for the next 3 years we will be monitoring the vaccine utilization and effectiveness and the decrease in the spread of this virus. Our planning approach at this point is two-fold:

- One, where we continue to reach people through alternate means than face to face and:
• Two, the easing back into a safe face to face provision of services.

The subsequent planning activities as the Area Plan cycle progresses through the three years are continuous throughout the life of the plan. Needs and concerns of older persons are identified and updated regularly. Shifts in service provision and activities are made as indicated from yearly planning updates if necessary. Several steps are undertaken initially and updated information is reviewed and considered, at a minimum, on a yearly basis in preparation of subsequent years’ amendments to the original plan.

The Assessment Process in the development of the FY 2022-2024 Area Plan included the following activities:

1. Review of senior program utilization rates and trends;
2. Service level history and funding history;
3. Benefit Access Assistance utilization rates;
4. Requirements imposed by various funding sources;
5. Review of federal and state laws, rules, and regulations governing service development and administration of funds;
6. Input from the community;
7. Advisory Council input,
8. Representation on various networking groups regarding senior issues;
9. Information obtained from other organization on caregiving;
10. Information obtained from other organizations regarding mental health;
11. Results of Local Needs Assessment;
12. Results of national and state studies on senior issues;
13. Monitoring of state and federal legislative trends;
14. Census information
15. Input from the Aging and Disability Advisory Group

The results of the needs assessment and planning process are reflected in the issues identified, service priorities and strategies that have been developed to address the issues and needs identified.

Although a wide range of services were identified, gaps in service and insufficient quantities of service still exist. Our data showed that the Area Agency funds are being utilized to fund entire programs in some cases for which other funds are unavailable. Congregate meals, senior legal services, information and assistance, health promotion, caregiver and grandparents raising grandchildren are funded exclusively with funds acquired by the Area Agency. In other cases,
funds of the Area Agency are coupled with other resources from a variety of sources and are used to leverage other resources for the provision of needed services such as transportation. Identified gaps or deficiencies in service identified in our unmet need report and our needs assessment include the following:

1. Specialize/medical transportation area wide;
2. In-home services including yard work, snow removal, housekeeping and homemaker services for senior not eligible for or unwilling to avail themselves of the state Community Care Program;
3. Transportation in the outlying areas of the PSA;
4. Emergency needs for which no other resource is available like medication, eye glasses, hearing aides (GAP filling);
5. Residential repair/home modification
6. Telephone reassurance;
7. Friendly visiting/senior companion;
8. Medication Management
9. Homeless Shelters/Homelessness in general;
10. Adult Day Services (its only available in a portion of our PSA);
11. Money Management;
12. Affordable Housing;
13. Assistive Technology;
14. Diabetic Supplies;
15. Incontinent Supplies;
16. Developmental Disability Services;
17. Dementia/Alzheimer’s Support;
18. Health Promotion Programs;
19. Grandparents Raising Grandchildren;
20. Social Isolation Prevention Services;

SERVICE PRIORITIES

In establishing service priorities, the Area Agency followed a series of established procedures. The priority listing of fundable services was developed from a review of all necessary data obtained from the needs assessment and planning processes. The priority list also takes into consideration all mandated and essential programs as required by the Older American’s Act as amended, the Illinois Act on Aging, and the Department on Aging. Simultaneously, the anticipated amount of Area Agency funds to be available is reviewed to determine funding that can be allocated to the various services.
In November 2020 a Needs assessment was sent to the Board of Directors, Advisory Council members, Provider Agencies, networking groups, and Consumers in the PSA. A piece of the Needs Assessment focused on the priorities of services in the PSA. The results of this process the Board of Directors has identified following as the priority list:

1. Home Delivered Meals
2. Caregiver
3. Transportation
4. Senior Center
5. Information and Assistance
6. Congregate Meals
7. Friendly Visiting
8. Health Promotion Programs
9. Adult Protective Services
10. Legal Services

INITIATIVE PRIORITIES

Initiative priorities were determined by examination of planning data, Advisory Council input, Focus groups, and statewide issue identification by the Illinois Department on Aging.

STATE INITIATIVE: Enhance Illinois existing Community Based Delivery System to address Social Isolation among Older Adults.

During the FY 2022-2024 Area Plan cycle Midland Area Agency on Aging will continue to work in collaboration with the Illinois Department on Aging and other Community Organizations as well as other Area Agency’s on Aging on a plan to reduce Social Isolation within in our planning and service area.

Background

Social isolation and loneliness are associated with many adverse health conditions such as depression, cardiovascular disease, cognitive impairments and even mortality.

A recent study by researchers from the AARP Public Policy Institute, Stanford University, and Harvard finds that Medicare spends an estimated $6.7 billion more each year on seniors who have little social contact with others. About 14% of study
participants were identified as socially isolated, which meant they had little contact with adult children, other relatives, or friends. The study found that Medicare spent about $1,600-a-year more on older adults who are socially isolated than those who are not. They were one-third more likely to require care in a skilled nursing facility, perhaps because they could not be safely discharged home after a hospitalization.

Risk Factors associated with social isolation are:

- Living alone
- Mobility or sensory impairment
- Major life transitions
- Socioeconomic status
- Being a caregiver for someone with severe impairment
- Psychological or cognitive vulnerabilities
- Location: rural, unsafe, or inaccessible neighborhood/community
- Inadequate social support
- Language barrier

Seniors who feel lonely and isolated are more likely to report also having poor physical and/or mental health, as reported in a study using data from the National Social Life, Health, and Aging Project. Connecting seniors with social resources, such as senior centers and volunteering programs, is one way to combat subjective feelings of isolation.

Midland Area Agency on Aging will continue to work with colleagues from the Area Agencies on Aging in Illinois and the Illinois Department on Aging and will participate in conversations on the topic of Social Isolation on a State-wide basis.

Along with collaboration with other Area Agencies on Aging and the Department on Aging, Midland AAA is working with local agencies who work with older adults who may be isolated to identify these people and strategize with the resources available how to intervene and alleviate or at least diminish the isolation.

Covid-19 has only increased and validated the impact social isolation has had on people. Once very active seniors have been not only encouraged but mandated to stay at home during this past fiscal year and it has had an effect on them. We have brought our network to a group of people who were never in need of it before.

Midland Area Agency will continue to develop and implement programs to combat social isolation during this three-year cycle. Midland Area Agency will continue to look closely at our
Home Delivered Meal clients. As we know the “traditional” Home Delivered Meal Clients are homebound by definition to receive a meal and now anyone over 60 is deemed eligible due to the pandemic. This is a population that is at great risk of isolation so we will evaluate whether we can do more than is currently being provided.

It will also take a great deal of time to reintegrate our population back into the community safely as the state reopens its doors. A service package of both virtual and in person will need to be maintained.

This will include at a minimum:

- Education using statewide brochure in all 5 counties to be completed by AAA staff. Education will be provided to:
  - Faith Based Communities
  - Law Enforcement Agencies
  - Home Health Agencies
  - Local Health Departments
  - Emergency Management Systems
  - Hospitals
- Continuing Friendly Visiting Program in Clay and Effingham Counties by Collaborating with the RSVP program through a partnership with CEFS
- Expansion of the Evidence Based Programs in a virtual format
- Continue to disperse Social Isolation Bags throughout our PSA
- In Fiscal Year 2021 Midland Area Agency invested in 2 virtual programs:
  - Get Set Up: A learning program that teaches participants how to use virtual formats such as zoom, on line shopping, as well as social outlets dealing with pets, books, and cooking. The program keeps people connected family and community during a time when close contact in not encouraged.
  - Adaptive Equipment Corner. This is a web-based Caregiver Training program done through videos that have been designed and are provided by professional physical therapists, speech therapists, and occupational therapists. These have been very valuable during the time that the Caregiver program has been unable to provide in person training workshops.

Midland will continue to invest in these programs through Fiscal Year 22 as we are beginning to see more participation from our consumers.

Midland will continue to measure program effectiveness by utilization of the UCLA Loneliness Scale.
LOCAL INITIATIVE: To become part of Dementia Friendly Illinois

Background

Dementia Friendly Illinois is working towards making Illinois recognized as part of the Dementia Friendly America movement. It is about working with communities to educate and integrate persons with dementia and their support systems within the communities. Persons living with or at risk for dementia often feel isolated within their own community.

Building a dementia friendly community is very important. It is estimated that 220,000 people in Illinois have dementia due to Alzheimer’s disease and by 2025 that number will increase by 18% or 260,000 (2017 Alzheimer’s Association Fact and Figures report). If these people do not feel supported by their community, they start becoming isolated. Isolation leads to worsening well-being along with poor physical and mental health.

Dementia Friendly Illinois is about working with persons with dementia and their support systems and the community. All too often, persons living with or at risk for dementia feel alone and unheard. They feel left out from the activities in their community that promote well-being. Dementia Friendly Illinois is about reversing the narrative. Communities, big and small, can see the value in making their communities more dementia friendly. Dementia Friendly Illinois is about improving the journey of persons with dementia and their support systems.

Midland Area Agency will continue to develop a program following the guideline that have been set for by Dementia Friendly America-Illinois.

Midland Area Agency has collaborated with local Alzheimer’s Association, the Alzheimer’s Awareness Foundation, Our Provider Network, and Community Organizations to develop this Initiative. Midland Area Agency made this our local initiative during the last planning cycle. At that time two very rural small communities were identified as goals for our dementia friendly communities. We were ready to Convene our Town Hall meeting when the State was shut down due to Covid. Since that time, we have had many challenges and barriers in completing our goals. The staff had to convert the in-person program to a virtual format. This in itself was a daunting process as we have no one with experience in providing training this way. We have spent time teaching ourselves and taking classes to learn how to provide training this way. The next challenge was the community we chose was not receptive to receiving the training and having meetings via zoom or any virtual method. We have now located a community that is more receptive and still hope to get one community on the registry by the end of Fiscal Year 2021. Our local initiative will remain Dementia Friendly Communities for this Area Plan Cycle.
We feel with the materials and training we have developed, we can have at least 2 additional communities on the Dementia Friendly registry by the end of the Fiscal Year 22-24 cycle.

Two staff people at the AAA have been trained as Dementia Specialist by IDOA, Dementia Champions, by Rush University, and have been completing Dementia Friends Training in the PSA. This training will continue to be provided in Fiscal Year 2022-2024.

The Goal of this initiative is for people living with dementia to have a high quality of life, are engaged with their community and feel like a “whole person”. The way to accomplish this is to engage the community and businesses through education of the disease and how to communicate and respect those with Dementia.

In addition, the AAA is excited to receive additional funds this year to address specialized needs of persons with Alzheimer’s Disease and Related Dementia (ADRD) and their family Caregivers. With these funds the AAA plans to provide GAP filling services to our Caregiver program to assist Caregivers caring for someone with dementia. This past year we were able to assist with Respite In-Home, Respite Long Term Care, and Respite Adult Day Services. We built a ramp. We purchased a Lift Chair, Wheelchair, Bedding, and Personal Hygiene items. We also paid a medical bill. These funds were invaluable to Caregivers caring for their loved ones with Dementia.

IV. SERVICE DELIVERY PROJECTIONS

Attached is a chart for FY 2022 that includes and contain descriptions of the services to be funded, the funding amounts, the number of persons to be served, and units of service to be provided for each service. All affected projections will be revisited if we are advised that our State or Federal allocations for FY 2022 change.

V. IMPACT OF FLUCTUATING ALLOCATIONS

With continual fluctuations in the amount of funding available to the Area Agency from State and Federal resources, the Area Agency is often faced with how to implement funding reductions when they occur and increase allocations when received.

The Midland Area Agency on Aging Board of Directors reaffirmed its policy related to distribution of funds as fluctuations occur. That policy is as follows:

It is the intent of the Area Agency to assure first and foremost that minimum percentage requirements as mandated by the Older American’s Act and determined by the Illinois Department on Aging are met. If reductions in funds occur, such reductions will be replaced to the maximum extent possible from available unused funds. If not available, all services would be reduced based upon a percentage of fund reduction.
Should the Area Agency receive additional allotments of Federal or State funds from the Older American’s Act or State General Revenue; the intent of the Area Agency to assure that minimum percentage requirements are met, and allocate the funding depending on the type of funds, special requirements and/or restrictions, transferability, and existing needs.

Under this policy, how exactly funding fluctuations are applied to funding to services is demonstrated as follows:

**TITLES IIB, IIIC 1, AND IIIC 2 FUNDS**

The available Titles IIB, IIIC 1 and IIIC 2 funds, State GRF Match Service dollars, GRF State Non-Match funds, and available carry-over are totaled and the allocated administrative and administratively related direct service funds deducted. The balance is compared with the amount of funds in service the previous year or the current year depending upon whether the allocations reflect planning for the coming fiscal year, or represent a change in original allocations in the current fiscal year. This comparison is made to determine if service funding levels can, at a minimum, be maintained and to make sure the minimum of access, in-home and legal and transferability percentage requirements are met. If it appears that maintenance level funding can be achieved, the remainder may be retained at the Area Agency level for emergency service funding or unanticipated funding shortfalls, i.e. reduced allocations mid-year.

If this balance is adequate, maintenance funds are allocated first from Federal Title IIIC 1 funds, part of the State Match and State Non-Match Home Delivered allocations are assigned to Home Delivered Meals, including any funds previously calculated as available, and retained at the Area Agency level. If emergencies or shortfalls do not require the usage of the funds retained by the Area Agency, any funds left unspent below the allowable 5% carry-over amount are then calculated as available for the subsequent year.

Maintenance level funds are then allocated to Home Delivered meals from Federal Title IIIC 2, including any funds previously retained at the Area Agency. This is then combined with a portion of State Non-Match Community Services to assure, at a minimum, maintenance level funding.

The balance is allocated to Title IIB to maintain current service funding levels. Any unused funds within the 5% carry-over limit remaining at the end of the fiscal year is retained for the following fiscal year and applied towards a minimum of maintenance funding levels.

As long as we have transferability between titles to the extent that we have currently, because of this method, any increase or decrease in funds could affect all
services based on a percentage of the increase or decrease applied to each service original funding level.

TITLE VII

These funds, used for Elder Abuse training, are allotted first to meet expenses of the Elder Abuse Multi-Disciplinary Team in the amount of $3,000 and the Fatality Review Team in the amount of $546 as is required by the Illinois Department on Aging. An additional $1,084 for training Provider staff members having responsibilities for the program. Funds are also used for training other entities like law enforcement officials, health care professionals, and I&A Specialists. Reimbursement is provided for all or part of the elder abuse provider agency staff expenses to attend Department on Aging sponsored trainings like the annual Adult Protective Services Conference or other training approved by the Department to meet training requirements for the program. The funding may also be used for maintenance of a toll-free line, obtaining alternate methods of communication as needed with clients, or other requests that may be approved by the AAA on a case by case basis that enhances the delivery of the Elder Abuse program. The AAA administration portion will be used for training and education of the AAA staff assigned to the program.

Ombudsman funds in the amount of $11,596 are used to assist in the Regional Ombudsman program in the Operational and Advocacy cost of the program. This includes any activities completed by the Regional Ombudsman in their role as an advocate on behalf of residence in any licensed facility. There is an additional $2,081 in funding for the Fatality Review Team as required by the Illinois Department on Aging. The AAA administration portion will be used for training and education of the AAA staff assigned to the program.

TITLE III D

These funds are also allocated to each county based upon the percentage of senior population of the county as compared to the total area senior population whenever providers can be found to service a county. Any reduction or increase in Federal allocations would be applied based upon the percentage of increase realized, or reduction suffered.

TITLE III E

These funds are allocated for the Family Caregiver Program which includes Grandparents Raising Grandchildren. As the amount of additional funding would allow, additional services will be developed. If additional funding is inadequate to develop new services, funding will be allocated to existing services based upon a percentage of the allocation increase. In the event that Title III E allocations are
decreased, the reduction will be applied across all Title III E funded services based upon the percentage of the funding decrease.

VI. HOME DELIVERED MEALS

Although every one of the services that Midland Area Agency provides has been affected by Covid 19, none more than the Home Delivered Meal program. In a matter of hours, we instructed our Nutrition Providers to immediately shut down all congregate sites and convert those clients to Home Delivered Meals. In addition, the requirements to receive a meal changed drastically because anyone of 60 was/is considered to be homebound due to the pandemic. Many different methods of delivery were developed and implemented. Drive through or pick meals were offered and meal routes were expanded and new ones developed. Recruitment of volunteers increased as well as hiring of new employees as needed. This could not have been accomplished with out the additional Covid Relief funds. The Families First Coronavirus Response Act and the CARES Act funding in conjunction with the State GRF and Title III C Older Americans Act funding has allow us to meet the needs and demands that have been asked of our Nutrition providers. This is not to say this has been an easy process. Developing ways to deliver all of these meals safely has been a challenge. Many knock and drop (in a cooler) meals have been delivered to protect both the participant and deliverer of the meal. In many cases 2 meals a day were delivered to prevent food insecurity as people were told to stay at home and be safe. Shelf stable meals became a must and a new partnership with FEMA was born through the efforts of IDOA. Through all of this there has not been a waiting list in PSA 09. There has been at least weekly, but daily contact during the pandemic between the AAA and the Nutrition Providers.

As the state moves toward a reopening plan, our program should hopefully move back into a “normal” status. Home Delivered meals have always and will continue to be a priority service. It has been identified as the number 1 priority for at least the last 5 years. The Home Delivered Meal is more that a nutritious meal; it is a well-being check. It is a means of combatting social isolation. This delivery may be the only human contact some of the participants have. It is vital and a life line for the homebound to the community. It is also a way to get more information to the participants about other program availability as well as education not only about nutrition but other issues such as scams, vaccines, caregiver services, adult protective services, and in home care.

As congregate sites are able to reopen, the original assessment will be completed by the Nutrition providers to determine who is eligible for a home delivered meal using the IDOA standards as the guide for this assessment. The AAA will approve all assessment tools prior to them being utilized. In addition many lessons were learned during the pandemic year, Shelf Stable meals are a must and will be required of all nutrition providers. A minimum of 5 meals
per participant must be purchased and replenished as used. In addition, a minimum of 1 special
diet must be offered to each participant beginning in FY 22 and continue through the life of the
Area Plan. There has been a substantial increase in the GRF funding for Home Delivered Meals
so this should be attainable for our projects.

The AAA will continue to work very closely with the nutrition providers to assist and to assure
that meals are delivered to those in need. Enough praise cannot be given to this group of
dedicated people for all they have accomplished this past year and we have every confidence
that it will continue in the future.

VII. AREA AGENCY BUDGET/ACTIVITIES

Direct Services:

The Area Agency proposes to provide the administratively related direct service including
advocacy, program development, and coordination. The provision of advocacy and program
development are necessary to carry out the administrative responsibilities of the Area Agency.
The full 10% of Title III funds for administration will be expended for administration before
costs are incurred for the administratively related direct service.

Exhibit 2.A of the Area Plan and a funding chart are attached and describe the funding for
advocacy and program development and contains information regarding the amount of funds
budgeted for administration, advocacy, and other services performed by the Area Agency. The
budgeted amount for advocacy is $64,114 program development is $61,510, and program
coordination $13,710 and this represents approximately 10% of the area’s total allocation.

The Area Agency is also proposing to provide III E Caregiver Information and Assistance, Title
IIIB Options Counseling, Title III B Information & Assistance, Title IIIB Social Isolation Education.
A complete discussion of this can be found in Exhibit 2.B.

VIII. PROPOSED FY 2020 AREA PLAN EXHIBITS

The proposed FY 2020 exhibits to the Area Plan referenced earlier in this Public Information
Document are contained on the following pages.
Provide a description of the activities the Area Agency on Aging will engage in as it provides leadership in developing or enhancing a comprehensive and coordinated community based service system, including Elder Rights services and the National Family Caregiver Support Program, for the elderly through administration, advocacy, coordination and program development. Include resources to be utilized. Do not include Area Agency Title VII Advocacy Program activities described in Exhibit 1.C (Elder Rights Plan).

Area Agencies on Aging are restricted under the Older Americans Act to 10% of their total allocations for administrative activities. Area Agencies on Aging are also required to ensure a “comprehensive and coordinated” service delivery system, fulfill advocacy responsibilities and other mandated activities as stated in the Area Agency mission statement of the Older American’s Act.

Administrative functions are those necessary to manage the day to day operations of the government funded not-for-profit agency and meet the requirements set forth by applicable laws, rules, and regulations in the management of financial and program operations. Funds budgeted for Administration are:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tr>
<td>Title IIB</td>
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<tr>
<td>Title VII (Elder Abuse/Ombudsman)</td>
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<td>Title III C1</td>
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<td>Title III B Ombudsman</td>
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<td>Title III E Caregiver/Grandparents Raising Grandchildren</td>
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<td>GRF State Funded Services</td>
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<tr>
<td>Local Cash</td>
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</tbody>
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**ADMINISTRATIVE ACTIVITIES**

- Personnel Management
- Board and Staff Development
- Staff Support to Board and Advisory Councils
- Procurement for Services for Area Services
• Program Management
• Monitoring and Review of service provider administration financial accounting, policies and procedures, and service provision
• Technical assistance to service providers, community organizations, and individuals
• Maintenance of computerized client tracking for meeting reporting requirements and planning through AgingIS.
• Financial Management and review of service provider audits
• Participation and Response to Compliance Reviews
• Maintains comprehensive website

• Activities Under System Development:
  o Assistance with the Departmental planning and development activities, as requested by the Illinois Department on Aging
  o Create Dementia Friendly Communities within the PSA.
  o ADRD GAP filling
  o Continue the No Wrong Door/ADR/ADRC system in the PSA

• Activities Under the Adult Protective Services
  o Provide technical assistance on cases
  o Procurement process for Adult Protective Services Agency designation
  o Monitoring of the Adult Protective Services Provider
  o Attendance at all meetings/trainings required by the Illinois Department on Aging
  o Assistance with resolution of management or program issues in the area as requested by the Illinois Department on Aging
  o Assistance with conflict with APS providers and other Aging Service Providers
  o Arranges ongoing training for APS staff through quarterly meetings
  o Assisting and learning the new CMP system

ADMINISTRATIVELY RELATED DIRECT SERVICE

Administratively Related direct services include those activities necessary to ensure a comprehensive and coordinated service delivery network, program development, and advocate for necessary resources at all levels for program and service operations on behalf of seniors in our area.

Funding for FY2022 for the three Administratively Related Direct Services are:

• Advocacy $ 64,114
• Program Development $ 61,510
• Coordination $ 13,710

Advocacy Activities

• Monitor, evaluate, and comment on all policies, programs, and community actions affecting area seniors
• Represent the interest of area older adults, caregivers of older adults, grandparents raising grandchildren, and persons with disabilities to local level officials, state and national level officials, public and private agencies or organizations.
• Empower older adults to recognize and report fraud and abuse in Medicare and Medicaid
• Provide education and information on aging issues that dispels the myths and sensitizes the general public about the aging process
• Encourage older adults, caregivers of older adults, grandparents raising grandchildren, and persons with disabilities to advocate on their own behalf
• Participate in the National and Illinois Associations of Area Agencies on Aging
• Maintains a Senior Advocate program through the Illinois Attorney General office that assists with cases that do not meet the APS criteria but leaves an older adult vulnerable in the community

Program Development

• AAA is the Lead Agency in the development of the Aging and Disability Resource Center—No Wrong Door System in the PSA
• AAA researches resources to develop new programs that will benefit older persons, caregivers, and persons with disabilities
• AAA participates as members of the following councils: CCPAC, APS Advisory, Ombudsman, Nutrition, County Emergency Management councils, local Fatality Review Team, and State Fatality Review Team Advisory Council
• AAA has staff aboard trained in Strong For Life exercise program
• AAA has and will continue to develop T-Care program for Caregivers
• Participates as members in caregiver/mental health and aging county coalitions
  o Develops Caregiver and GRG trainings PSA wide
  o Develop County Specific Resource Guides
• AAA will develop additional resources to combat Social Isolation
• AAA will develop a Dementia Friendly Community program
• AAA will develop a resources and education programs for ADRD
• AAA will develop Virtual Programing

Coordination

• Coordinates SHIP, SHAP, and MIPPA programs throughout the PSA
• Attend various health and senior fairs throughout the PSA
• Attend Job Fairs for Senior Employment
• Coordinate Farmers Market Coupons
• Coordinate quarterly Service Provider meetings
• Coordinate AIRS certification for I&A staff
• Coordinate Disaster Management Programs
• Coordinates and provides Assessments for the Veterans Independence Program
• Coordinates resources and outreach education programs about Covid 19 precautions
• Coordinates resources and outreach about Covid 19 vaccines
• Coordinated with the Assistive Technology Grant to obtain needed devices for older adults.
• Coordinates services with MCO in the PSA

The use of Title III funds for advocacy, program development, and coordination are necessary to continue efforts to maintain and develop services delivery in our rural area.
Provide a justification for each direct service waiver request being made. For services related to the AAA's statutory responsibilities or state mandates, provide a description of the program activities that will be undertaken and the anticipated outcomes. For other services, demonstrate how AAA will provide the service more effectively and efficiently than any other provider. The description should include resources to be utilized.

SERVICE: ____Title III B Options Counseling________________________

In Fiscal Year 2012 Midland Area Agency on Aging as part of the Statewide Initiative began developing the ADRC concept in PSA 09. As the process has developed it was quickly realized to have a successful ADRC network the Area Agency would have to take an active, visible, direct role in this process. Midland Area Agency has embraced this leadership role and is proud of the accomplishments thus far realizing we still have much to do to really accomplish the no wrong door approach that is our ultimate goal. One piece of the ADRC initiative is Options Counseling. It is a consumer driven interactive process whereby the consumer and the Options Counselor work together in identifying needs, goals, and resources to meet the consumer’s wants and needs.

In late Fiscal Year 2013 the Area Agency participated in a pilot project through the Department on Aging to test the Options Counseling program in our area. Several staff from the Area Agency attended the training that the Department on Aging arranged. In addition the Area Agency took that training and built upon it and trained all of the Aging/CIL staff that agreed to participate in the project. The Area Agency will continue to provide training as this program is implemented and questions arise. This practice will continue through the 2022-2024 Area Plan cycle.

We have secured participation from our Center for Independent Living and our Information and Assistance Providers the CCU has elected not to participate. In addition, no aging service provider has elected to provide home visits to their Options Counseling clients. Their programs are set up for the consumer to come into to office to receive service. Historically this has been the way traditional Information and Assistance has been provided. The OFA/CIL concentrates only on those persons under the age of 60. MAAA intends to provide this service to anyone 18-59 with a disability and anyone who is 60 and over through our PSA.

Midland Area Agency feels strongly that there are times that going to the home will not only benefit the consumer, but would also provide a clearer picture of the consumer’s situation. The Area Agency currently has a Senior Advocate on staff that makes home visits to persons who may be taken advantage of, but do not fit the criteria for the Adult Protective Service program. This person has received the Options Counseling training and is also playing a direct role in
other aspects of the ADRC development. This staff person will provide Options Counseling in the home as needed PSA wide. In addition, as stated before, several staff at the Area Agency received the Options Counseling training and are available to identify potential clients when they come into the office. Midland Area Agency is a SHAP site, a SHIP site, and the direct service provider for Information and Assistance in Marion County, therefore there are consumers coming through our door daily. Options Counseling is one more service that each person is screened for through our Information and Assistance Specialist. This process has already proven successful.

By coordinating this program in with existing program(s) offered at the Area Agency, the Area Agency feels it can provide the most economic program with the highest quality. With the amount of funding offered, neither the current providers nor the Area Agency could hire new staff to do this service. The Information and Assistance providers are not trained to go into homes that leaves the only alternative being the Area Agency.

The Area Agency will continue to work with the Options Counseling providers to encourage their participation in the program, but expanding their roles. It has always been the role of the Area Agency to develop programs and then grant them out, but it has also been the role of the Area Agency to provide the service if it is not available or being provided adequately as is the case with Options Counseling in the home.

The past year with the pandemic the service was transitioned to a virtual service. In most cases it was completed via the telephone, but others preferred email or zoom. As we got our offices set up with PPE, there have been occasions that we have set up appointments on a case by case basis when it was in the best interest of the consumer. We hope to return to “normal” service delivery soon and will be making home visits as the original design describes.

The program activities for this program will include at a minimum:

Identification of potential Options Counseling Consumers

Completion of Options Counseling Intake Form

Completion of Decisional Balance Work Sheet (When Needed)

Completion of the Personal Plan Work Sheet (When Needed)

Maintenance of Client Files

Complete Home Visits with Options Counseling Consumers

Provide ongoing training to other Options Counseling Providers
The expected outcomes include appropriate consumers receiving Options Counseling, appropriate paperwork will be completed on each consumer, sufficient data will be generated to analyze the program and a consistent quality program will be offered in PSA 09.

The resources needed to provide these activities and reach these goals is $9,326.

Projected Clients 5  Projected Units 20

Geographic Area to be Served: PSA Wide
Provide a justification for each direct service waiver request being made. For services related to the AAA’s statutory responsibilities or state mandates, provide a description of the program activities that will be undertaken and the anticipated outcomes. For other services, demonstrate how AAA will provide the service more effectively and efficiently than any other provider. The description should include resources to be utilized.

SERVICE: Title III B Information and Assistance

When Midland Area Agency on Aging procured for Title III B Information and Assistance we received no letters of intent to provide the service.

According to the Older American’s Act, Information and Assistance must be available and consistent throughout the area. Midland Area Agency has provided funding for this service since 1978.

Information and Assistance is the corner stone of our network. It is usually the first stop for an older person, their caregiver, or a person with disability to find out about the Aging Network and all the services available within the County. It is one of our ADRC core partners. The pandemic has proven how important the Information and Assistance Specialist is in each of our counties. Staying up to date on resources, precautions, and vaccine information has been critical. This pandemic brought a new group of seniors to our door step and usually the first point of entry was the I&A program.

Midland Area Agency is located in Centralia which is in Marion County. We currently have staff trained in SHIP, SHAP, Options Counseling, and are an ADRC No Wrong Door, as well as many other programs. We have hired a full time additional person and trained them in all of these programs. Local agencies currently are referring their clients to our agency. The demand for Information and Assistance has continued to increase. The Benefits Access program continues to grow, the growing Caregiver Program, the development of the No Wrong Door Approach, and the expansion of MCO in our area is increasing our information and referrals from many Aging and Disability agencies. Midland Area Agency is already on the front line of all of these programs. The addition of Title III B Information and Assistance has been streamlined effectively into our agency for Marion County has proven to be the most cost effective answer.

Midland Area Agency has always prided itself with the high level of quality in the service we deliver. This program is no different and the increase in service this past year proves this. The Program Activities include:
- SHIP services
- SHAP services
- MIPPA services
- AIRS information and training
- Options Counseling
- Covid-19 precautions
- Covid-19 Vaccine
- Information Only
- Information with Assistance
- Referrals and Linkage to Agencies
- Follow up with clients to make sure services are obtained

Midland Area Agency would like to continue to provide the Service of Information and Assistance in Marion County through the 2022-2024 Area Plan cycle.

The resources needed for this service is $58,844

Projected Clients 1,900       Projected Units 4,600

Geographic Area to be Served: Marion County
Provide a justification for each direct service waiver request being made. For services related to the AAA’s statutory responsibilities or state mandates, provide a description of the program activities that will be undertaken and the anticipated outcomes. For other services, demonstrate how AAA will provide the service more effectively and efficiently than any other provider. The description should include resources to be utilized.

SERVICE: Title IIIE Information and Assistance

With the advent of the National Family Caregiver Support Program authorized by the Older Americans Act in November of 2000 and the development of the Aging and Disability Resource Network beginning in 2012 to the present, the service requirements related to Information and Assistance have been expanded to include caregivers of older adults, grandparents raising grandchildren, and persons with disabilities. The service is to provide individuals with current information and services within their communities, including information related to assistive technology. Linkages of individuals to the opportunities and services that are available. Included in service standards is the requirement to maintain accurate, up-to-date information on resources available with maximizing the accessibility of other needed services, and a data collection system be developed to meet client and service needs as a resource for meeting community needs.

The Area Agency actively assists in providing Information and Assistance service for our entire PSA. During the last three year Area Plan cycle, the Area Agency expanded, updated, and maintained a computerized data base of resources available within the area. It is accessible on the Internet by anyone wanting to access information and is comfortable utilizing a computer. There are also hyperlinks to other websites with pertinent valuable information.

The Direct Service Waiver and its activities for Information and Assistance will continue through the Fiscal Year 2022-2024 Area Plan cycle. The Area Agency will continue its endeavors to collect current information on all resources available with the PSA and maintain the data base for counties for service providers and the general public. During the last planning cycle the Area Agency updated the system to make it more user friendly. There has been many changes and improvements since this design was implemented in 2000.

The Area Agency has proven we have consistently provided information and assistance to any who calls our office or walk in. The calls continue to increase as the Area Agency’s number has been place on various state publications which are mailed to older adults, caregivers, grandparents raising grandchildren and persons with disabilities.
In addition, the Area Agency in partnership with I4A and Illinois Aging Services works on maintaining and updating the state wide data base housed in AgingIls. The Area Agency also works with the local Information and Assistance offices assisting each office as needed utilizing both the Area Agency and the data base. The Area Agency web site is a resource for new T Care system which is being implemented in our Area.

The Area Agency is a Nation wide, well known name and is what is accessed when people not familiar with specific aging programs are looking for help. We then either assist them ourselves or direct them to the local resource they need. By access to the data base, the Area Agency is able to look up all information available for the entire PSA and provide direct information and assistance to customers when they call. It streamlines services and provides quality customer service. Currently the Area Agency data base is more extensive than any other resource the aging network has developed in this PSA. By locating all information into one system, identifying and adding additional resources from all various professions, disciplines, educational institutions, health care sources, etc., the integrity of the data will be maintained and access to the data expanded. The Area Agency web site also allow for direct email to us for questions and requests. We have found that many caregivers and grandparents raising grandchildren are much more inclined to utilize the computer to find resources for their loved ones so it is imperative we have this service available to them for their use.

There are other service providers that are funded by the Area Agency. One service provider is funded for general Information and Assistance and one is provided for general Information and Assistance and Caregiver Information and Assistance. Our Website encompasses all of our PSA and is more comprehensive than each individual provider.

The resources needed to provide these activities is $19,035

Geographic Area to be Served: Area Wide
Provide a justification for each direct service waiver request being made. For services related to the AAA’s statutory responsibilities or state mandates, provide a description of the program activities that will be undertaken and the anticipated outcomes. For other services, demonstrate how AAA will provide the service more effectively and efficiently than any other provider. The description should include resources to be utilized.

SERVICE: ___________Title III B Education Social Isolation________________________

A recent study by researchers from the AARP Public Policy Institute, Stanford University, and Harvard finds that Medicare spends an estimated $6.7 billion more each year on seniors who have little social contact with others. About 14% of study participants were identified as socially isolated, which meant they had little contact with adult children, other relatives, or friends. The study found that Medicare spent about $1,600-a-year more on older adults who are socially isolated than those who are not. They were one-third more likely to require care in a skilled nursing facility, perhaps because they could not be safely discharged home after a hospitalization.

Risk Factors associated with social isolation are:

- Living alone
- Mobility or sensory impairment
- Major life transitions
- Socioeconomic status
- Being a caregiver for someone with severe impairment
- Psychological or cognitive vulnerabilities
- Location: rural, unsafe, or inaccessible neighborhood/community
- Inadequate social support
- Language barrier

Education is the key to reducing the amount of Social Isolation not only in PSA 09 but throughout the state. MAAA plans to accomplish this by utilizing the state wide brochures. MAAA will set up Education trainings virtually and face to face as the state opens up after the pandemic targeting the following groups in all 5 of our counties

- Faith Based Communities
- Law Enforcement Agencies
- Home Health Agencies
- Local Health Departments
- Emergency Management Systems
o Hospitals

Each of these entities has direct contact with seniors who may be socially isolated. If we can train them to identify and refer these people to our Network we will be able to reduce the Isolation.

In addition, during the pandemic, MAAA designed Social Isolation bags to be distributed throughout the 5 county region. In the bags are mind builder activities and well as education materials about all of the resources our area. In FY 2021 the bags contained

- Work search Crossword puzzle book
- Highlighter
- Social Isolation brochure
- Midland brochure
- SMP magnet/brochure
- Friendship Card
- Pen
- Open enrollment information
- Chap stick
- Jar gripper
- Ice pack
- Hand sanitizer
- Face mask
- Letter Opener
- Paper Packet containing information about:
  o Information And Assistance Offices
  o CCU offices
  o APS Fact Sheet
  o Engaged Illinois brochure
  o Ombudsman Sheet
  o “Turning 65” Information Sheet
  o Covid 19 Tip Sheet
  o Covid 19 Vaccine Information Sheet
  o Nutrition Brochure
  o Exercise Sheets
Midland Area Agency has received so much great feedback from these bags. It is a low technology and cost effect way to reach many seniors in our PSA. This will be duplicated and distributed in the FY 2022-2024 Area Plan cycle.

Resources needed $9,400

Projected clients 1000          Projected units 1000

Geographic Area to be Served: PSA wide
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<tr>
<th>Service</th>
<th>Funding Level Includes both State and Federal Funding</th>
<th>Projected Persons Served</th>
<th>Projected Units</th>
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<tr>
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## Midland AAA Direct Services

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