

**The Heritage Area Agency on Aging
PSA #4**

**Area Plan on Aging
SFY 2016 – 2017**



The Heritage Agency™

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Executive Summary

With close to 45 years of experience, The Heritage Area Agency on Aging (HAAA) recognizes that this is a time of historic change in the aging network. To be effective and have the greatest impact in the region, HAAA must work to address our changing population demographics, changing needs of the populations we serve, the ever changing barriers our target populations face in accessing services, and the critical importance of data that accurately demonstrates the impact we have. Through the focus areas of LifeLong Links, Caregiver, Food Security, Elder Abuse Prevention and Awareness, Transportation and Housing; HAAA will strive to be a leader in bringing community providers, constituents, and services together to discuss real barriers and begin conversations that lead to creativity, novel ideas and solutions to problems and barriers. HAAA will work to pull all interested parties together to activate real change and forward movement for maximum impact.

HAAA is the principal advocator, planner, coordinator and funder to programs that serve 79,760 (2008-2012 American Community Survey, Special Tabulation on Aging – population Characteristic) older adults in Benton, Cedar, Iowa, Johnson, Jones, Linn and Washington Counties. Of those older adults, 27,078 (2010 Census) are living in a rural setting and a staggering 4,990 are below poverty. HAAA recognizes that even within these statistics our demographic landscape is changing and our programs must directly meet the needs of the populations we serve. Factors include, an increase of individuals with language barriers, a rise in younger disabled individuals served through LifeLong Links and an ever-growing, aging Lesbian, Gay, Bisexual, Transgender, (LGBT) populace. This growing diversity has impelled HAAA to reconsider our training offerings for staff, providers and volunteers. It has identified the lack of available technology for staff to communicate and aid all persons with obtaining materials and resources. HAAA continues to utilize services of Language Line Services and also employs a staff member bilingual in Spanish, but the Agency shall work to cultivate and enrich levels of cultural competency within our region and increase our outreach and improve communication and/or modification strategies.

HAAA does have extensive history of being a quality provider of direct services and program development. HAAA will use this experience and expertise to improve the quality of the valuable programs currently offered by and through HAAA and to also create innovative solutions. One step that HAAA has already taken in this direction is the recent addition of a Quality and Outcomes Coordinator. This individual will assist HAAA in data collection and evaluation that will assist HAAA in communicating and measuring our impact. HAAA pledges to uphold our mission of advocacy to “serve as the advocate and focal point for older individuals within the community by monitoring, evaluating, and commenting upon all policies, programs, hearings, levies and community actions which will affect older individuals,” including persons with a disability and family caregivers. HAAA is proud to have consistently been at the table advocating for administering services in the most integrated setting appropriate to the needs of individuals with disabilities. Despite all the change described above, HAAA will remain mission focused and consumer driven. While change brings challenges, it is also a time that encourages and enables great innovation and HAAA is dedicated to effectively serve the region.

Section 1: 2016-2017 Goals and Strategies

Goal 1: Empower older individuals, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

***Objective:** To increase the number of Iowans obtaining information about home and community-based long-term supports and services.*

***Focus Area:** LifeLong Links*

Strategy: Expansion Activities

The Heritage Agency recognizes the future of our Aging and Disability Resource Center is to actively expand LifeLong Links services and build community partnerships to address the needs of our target populations and upholding the true integration through the Olmstead Act and reaching out to those whose primary language is not English. Our expansion efforts are described below and following the Aging & Disability Resource Center Pillars of Service.

1. **Information, Referral & Assistance / Eligibility, Assistance Navigation**
 - a. ***Resources and Caregiver Support Specialist Position*** – Heritage is in the process of replacing this vacated position to expand our capacity to answer LifeLong Links calls. In hiring a Resources and Caregiver Support Specialist, half of their time will be dedicated to answering LifeLong Links calls.
 - b. ***Veterans Directed Home & Community Based Services*** – The Heritage Agency in partnership with the Iowa Department on Aging has developed the Veterans Directed Home & Community Based Services program and is working towards strengthening partnerships with the VA Medical Center to better connect veterans with long-term care supports.
 - c. ***Referral Process with MHDS Regional Partners*** - The Heritage Agency is in the process of developing one statewide Memorandum of Understanding to formalize AAA partnerships within the MHDS Regions. The MOU will include MHDS staff receiving Iowa Department on Aging LifeLong Links training and outline a referral process to implement among all entities.
2. **Options Counseling**
 - a. ***LifeLong Links Service Specialist Position*** – Heritage is in the process expanding our capacity to assist with the anticipated increase of Options Counseling Referrals through our LifeLong Links system. We will continue to explore developing community partnerships to deliver services and best meet the needs within our communities.
3. **Independent Living / Care Transition Support**
 - a. ***Community Caregiver Center*** – Mercy Medical Center is currently exploring the idea of creating a Community Caregiver Center that would be housed within

Mercy Medical Center. Once up and running Heritage would create a formal partnership to house an Options Counselor on-site once a week. Our Caregiver Support Specialist could also offer caregiver support groups and educational trainings within the Center.

- b. Caregiver Educational Trainings** – The Heritage Agency plans on training our Caregiver Support Specialist within the Iowa State University Extension’s Powerful Tools for Caregivers Training. The intent would be to partner with ISU to deliver classes within the Heritage service area at least twice a year.
- c. Home Modification & Assistive Technology** – In order to age in place, there may be several modifications to a person’s home that is needed to allow for greater mobility and independence. Heritage also recognizes there is an increased need for and use of assistive technologies. We plan on strengthening our partnerships with the University of Iowa Centers for Disabilities & Development by actively participating within their Community Partnership Advisory Council. We will continue to learn more about existing services and how best to connect those in need to this valuable resource. We also support the Older Iowans Legislative efforts who are working on universal design policies.

4. Adapting to the Changing Landscape

- a. Heritage recognizes that Iowa’s move to Managed Care, along with Mental Health Redesign and the Affordable Care Act, will present new and challenging opportunities. Heritage plans to work in partnership with the chosen managed care organizations to provide the best possible services to older Iowans. Heritage plans to work in partnership with the newly established regional mental health structures as well as helping seniors navigate the changing health care system in light of the Affordable Care Act. Heritage’s intent is to maximize partnerships and quality service.

Individuals to Be Served

The table below lists the number of individuals served in SFY2015 to date from all funding sources and estimated number to be served in SFY 2016 (7/1/2015 – 6/30/2016).

Table 1: LifeLong Links Consumers Served

Category	SFY 2015 As of 4/28/15	SFY 2016
Total Number of LifeLong Links IR&A consumers	4,122	4,328
IR&A Consumers Served Aged 60+	2,784	2,923
IR&A Consumers who are Caregivers	1,195	1,255
IR&A Consumers Between 18 and 60 with a Disability	288	302
Total Number of LifeLong Links Options Counseling Consumers	232	244
Options Counseling Consumers Aged 60+	186	195
Options Counseling Consumers who are Caregivers	62	65
Options Counseling Consumers Between 18 & 60 with a Disability	32	34

[ESP Database]

Innovative Funding

The Heritage Agency plans to pursue to strategies below to expand program income and funding innovation.

1. **Development of a Fee-for-Service Model** - The Heritage Agency has been working to develop materials for implementing a fee-for-service model including the development of service packages and cost per unit of service calculations.

A fee-for-service model would look at bundling direct services provide by Heritage within a Package that could be purchase by those who are in need and are willing to pay for this type of assistance.

Example 1: A persons finds themselves in the hospital after a major health event and now needs to transition from the hospital back home with additional community supports. They could call LifeLong Links and explore purchasing a care package such as the one listed below:

LifeLong Links Transitional Care Package – For persons needing one-time assistance in getting connected with the right level of care.

- Services include:
 - 1 Caregiver Consultation
 - 1 Whole Person Assessment
 - 1 Care Planning and/or Plan Implementation (Referral and Initial Service Set-up)
 - 1 Transitional Care Coordination
 - Limited, Short-Term Follow-up

2. **Marketing & Outreach** – Materials will be created to help promote our fee-for-service packages. A video will be taped and aired on the Kirkwood Channel to help promote services. Presentations will also be delivered at County Task Force meetings and other community meetings. Partnerships will also be strengthened among top LifeLong Links referral sources among the health, disability and aging networks.
 - a. Current efforts regarding our LifeLong Links efforts has included:
 - i. Almost 3,000 LifeLong Links brochures have been distributed within our seven county service area.
 - ii. Delivering 16 LifeLong Links presentations reaching over 300 service providers, caregivers and consumers about how to connect themselves or a loved one to community based supportive services. Heritage will continue to utilize VISTA Members to assist with outreach and education efforts within our service area.

3. **Community Referrals** - Partnerships will be strengthened among top LifeLong Links referral sources within the health, disability and aging networks.
 - a. A Memorandum of Understanding (MOU) has been created among our twenty (20) LifeLong Link –ADRC Advisory Council members to increase our partnership, referral and use of the LifeLong Links system of services, including a signed MOU.
 - b. Moving forward we will continue to strengthen our community partnerships and invite partners from all seven counties to participate within our LifeLong Links efforts.

4. **Internal Referrals** - Informational materials regarding our service packages will be offered over the phone or in person through our LifeLong Links I,R&A and/or Options Counseling services.
 - a. Heritage staff has completed additional training and certification to receive the AIRS new CIRS A/D – Certification for I&R Specialists in Aging/Disabilities.
 - b. Staff is also completing online training through Boston University on aging and disability issues, becoming better acquainted with services available, and on how to best work with older adults and persons living with disabilities.

Partnerships

The Heritage Agency has many key partners to assist us in reaching common goals.

1. **MHDS Regional Partnerships** - The Heritage Agency is in the process of developing one statewide Memorandum of Understanding to formalize AAA partnerships within the MHDS Regions. The MOU will include MHDS staff receiving Iowa Department on Aging LifeLong Links training and outline a referral process to implement among all entities. The purpose of the MOU will be to strengthen our referral process within the MHDS regions in connecting persons living with a mental illness to appropriate community services.
2. **MHDD Informational Group** – The Heritage Agency participates in this quarterly meeting to keep informed on happenings among mental health and disability service providers in Linn County as well as share information regarding LifeLong Links services.
3. **Iowa COMPASS Partnership** – While the future of Iowa COMPASS is uncertain, The Heritage Agency currently partners with Iowa COMPASS to house an Options Counselor within their office one – two times a month. The purpose of this partnership is to strengthen our referral system among persons living with a disability and increase our presence in the southern half of the region.
4. **Community Partnership Advisory Council** – The Heritage Agency plans to increase our participation in this monthly meeting. The purpose of this is to keep informed of issues within the disability field as well as share information regarding LifeLong Links services with caregivers, consumers and providers in southern half of the region.
5. **Community Care Coordination Coalition with Telligen** – The Heritage Agency has taken the primary role in the facilitation of this group and hopes for future relationship building. The effort is currently focused on improving diabetes care and improving care

coordination. With this effort we plan to build stronger partnerships among hospitals and community providers in Linn County to improve care coordination for older adult and persons living with a disability as they transition from one level of care to another.

6. **Caregiver Support Council** – The Heritage Agency will increase participation on the Caregiver Support Council coordinated by the VA Medical Center. This regional effort gives participants a chance to discuss their caregiver support activities and provides an opportunity to give input, promote and strengthen each other’s efforts.
7. **Mercy Home Health Advisory Board** – The Heritage Agency participates in quarterly meetings to strengthen our relationship with Mercy Medical Center in Linn County and to stay current on service changes regarding the Accountable Care Organization system of services.
8. **Johnson County Quality Long-term Care Committee** – The Heritage Agency participates in monthly meetings to strengthen our relationship with Johnson County health care providers and to stay current on service changes regarding the Accountable Care Organization system of services.
9. **Linn County Continuum of Care Planning & Policy Council** – The Heritage Agency participates in this monthly meeting to strengthen partnerships among providers who assist homeless families and veterans. The Council addresses a variety of housing issues for low-income persons within Linn County. The purpose of Heritage participating in this effort is to ensure housing issues regarding older adults and persons living with a disability are being addressed.
10. **Community Caregiver Planning Committee** – The Heritage Agency has partnered with AARP to plan for a Caregiver Wellness Day on November 12th. The planning group consists of local, regional, as well as a statewide AARP representative. This group also discusses other community caregiving events/activities on a quarterly basis to promote and strengthen each other’s efforts through collective impact on a regional level. These meetings are held at The Heritage Agency’s office.

Projected Expenditures

The table below lists budgeted expenditures from all funding sources to support IR&A / Access Assistance and Options Counseling activities.

Table 2: LifeLong Links Funding Sources

Funding Source	FY2015	FY2016
Federal	45,315	74,414
State	243,396	365,176
Local	447,757	453,455
In-Kind		
Total	736,468	893,045

[2015: IAFRS Quarter 3 projected out; 2016: IAFRS Area Plan Budget

Goal 2: Enable older individuals to remain in their own homes with high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers.

***Objective:** To increase the number of Iowans accessing home and community-based services they need to remain independent in their home.*

Focus Area 1: Transportation (including Housing)

Transportation Needs

The three most frequently identified transportation issues or challenges faced by Iowan's aged 60+ in our region are limited providers, costs and accessibility that meets the individual's needs and preferences. A key influencer to the frequently identified barriers for older adults in the region is also the location in which they reside and available housing. There are fewer options for older adults living in the rural areas in the areas of transportation and housing which has a direct impact on their ability to access home and community-based services they need to remain independent in their home. The location and housing factors must be factored in when considering the most frequently identified transportation issues below.

Limited providers: There are some areas of the Heritage region, such as Iowa County where there are limited to no providers of a transportation service. This requires older adults and/or their caregivers to find alternative means which can be very difficult and in many cases there is no solution and unmet needs exist. Such limited providers impacts the feasibility for some older adults to live in rural areas and can be a direct reason for some people to be forced to move to other areas/housing options in the region to ensure them a higher level of access to long term services and supports.

Costs: In situations where there is not a volunteer program or contribution only based services, many older adults report that formal transportation services remain unaffordable or cause financial strain on their monthly budgets. In these circumstances older adults may limit their travel and choose not to access services. Higher costs due to increased mileage are reported in the rural areas of our region. If an older adult needs to pay for transportation within Johnson County, odds are that the service will be less expensive than a person being billed for a ride across county lines. Such costs can be a primary factor for some to consider moving to another type of housing or to a more populated community closer to services to help maintain or manage their transportation costs.

Accessibility that meets the individual's needs and preferences: Heritage works with many older adults that may have access to regional transit; however, due to their personal situation and/or medical needs, it is not a fit. For example, we have experienced situations where people can access regional transit for a medical appointment or other services such as adult day care, however, trips on regional transit can take so long that the individual cannot tolerate the travel. There are many times that older adults have chosen not to access services because they

do not feel well enough or the regional system is too challenging for them to navigate, particularly those in rural areas accessing services in the more urban areas such as Cedar Rapids or Iowa City.

The most common needs met in our area through transportation services are access to medical providers, critical errands, and essential shopping. It is critical that Heritage continues to advocate for transportation services for our entire seven county region and educate the community and elected officials that it is of great need. Without this essential service, access to long term services and supports are not equitable and limit individuals' ability to remain in the housing option and community of their choice and preference.

Strategies to Address Transportation Needs

Heritage's primary strategy to address the transportation needs are through formal and informal partnerships. We also will be looking at new opportunities in relationship building and considering alternate models of service.

Formal Partnerships:

Biannually, The Heritage Area Agency on Aging requests funding applications from local service providers for services to persons age 60 and older in the Heritage service area with an annual update. The announcement for release of these applications, known as Requests for Proposals (RFP), is done through a public notice to area newspapers and posted to the Heritage website.

Heritage currently funds volunteer mileage reimbursement to volunteer transportation programs that are housed within four (4) of our seven (7) counties and will explore options in the other three counties. Those providers are: Aging Services (Linn County), Southeast Linn Community Center (Linn County), Benton County Volunteer Program (Benton County), Volunteer Services of Cedar County (Cedar), and Jones County Volunteer Center (Jones County). The service of transportation is provided through both Assisted Transportation and Transportation taxonomy definitions.

Heritage is able to coordinate regional service through collaboration and partnership despite limited funds. Most of our partner providers will transport within and outside of the county in which they are housed based on the individual need and available funds and volunteers. Each client request is considered carefully by our partners and every attempt is made to fulfill requests as long as the person making the request is eligible and meets program guidelines and service areas as established by partner provider volunteer leadership. If they are unable to do so due to program limitations such as policy, funding or volunteer capacity, all providers will give a referral to others to help meet the need of the older adult.

Heritage reimburses mileage to our partner providers based on their board-approved mileage rate and purchase of service (POS) billing statements which verify client eligibility, report units and gather Consumer Intake Form data.

Informal Partnerships:

Transportation is essential to providing a livable community. Heritage has been proud to be affiliated with such groups as Transportation Advisory Group (TAG) in Linn County and the Johnson County Livable Community Transportation Action Team in the past. While participation has been limited in the last two years, Heritage hopes to re-prioritize these efforts.

Heritage recognizes the critical nature of this service and would have no reason to adjust the strategic service implementation plan as long as providers continued to submit successful Request for Proposals, maintain a mileage rate that does not exceed the federal rate, and the funding is available. We also want to become more involved with our informal partnerships and look forward to further community studies that are in development and how these results can help to improve our strategies and efforts to better meet the needs in our region.

Relationship Building:

Heritage is aware of other trusted transportation providers in our region that are not funded by Heritage, however, can be part of the solution if invited to work inclusively to address common goals. Transit providers such as LIFTS, SEATS and JETS are valuable to our region and should be recognized as partners. In recent decades, Heritage has not collaborated with transit providers as much as in the agency's early history. There are also other groups and transportation providers that Heritage is aware of, but has limited contact. The current changing environment suggests that Heritage would best serve the region by re-establishing and or building relationships with such potential partners.

Heritage is a participant in community groups concerned with transportation issues like TAG (Transportation Advisory Group) and Johnson County Livable Community's Transportation Team, however these are in Linn and Johnson County only. Heritage is planning to become more active in such groups and to further reach out to the other five counties.

Heritage is in the beginning considerations of holding a regional Transportation Symposium that would invite transit providers, volunteer transportation providers, advisory or community groups, funded partners and all other interested parties to address the issue of access due to a lack of transportation. Primary objectives of this event would be to raise awareness of the negative impact that a lack of transportation options has on access and community health and to attempt to identify opportunities for collaboration.

Barriers:

Heritage has had limited staff availability the last two years to build upon informal partnerships. We hope to better develop these relationships to address our common goals.

Also, Heritage is concerned about the impact Medicaid Managed Care may or may not have within our formal partnerships. The impact of those programs being reimbursed through Medicaid funding now is uncertain. Also, will other transportation providers experience a great increase in transportation requests due to system changes? If so, Heritage must stay abreast of

the issues our partner providers are identifying and work to make adjustments to prevent unmet needs and manage agency capacity.

Heritage is interested in exploring future transportation opportunities and systems as well as re-energizing relationships with established providers such as transit. New types or models of service such as UBER may be a model to consider to address the needs. There are also developing opportunities through the One Click – One Call system with the Department of Transportation that makes this an exciting time to evaluate and reconsider our impact on this critical need.

Assisted Transportation:

Heritage currently funds volunteer mileage reimbursement to volunteer transportation programs that operate within two (2) of our seven (7) counties. Those providers that specifically are operating under Assisted Transportation beginning in Fiscal Year 2016 are Benton County Volunteer Program (Benton County) and Jones County Volunteer Center (Jones County). Many of the other transportation providers may also provide the required “escort” of Assisted Transportation, however, it is situational and not a key element of their programs. Benton County Volunteer Program and Jones County Volunteer Center require their volunteers to serve as an escort because it is a priority of their programs and makes operational sense due to the fact that they are providing long trips, typically outside of the county in which they are housed.

Heritage is able to coordinate regional service through collaboration and partnership despite limited funds. Most of our partner providers will transport within and outside of the county in which they are housed based on the individual need and available funds and volunteers. Each client request is considered carefully by our partners and every attempt is made to fulfill requests as long as the person making the request is eligible and meets program guidelines and service areas as established by partner provider volunteer leadership. If they are unable to do so due to program limitations such as policy, funding or volunteer capacity, all providers will give a referral to others to help meet the need of the older adult.

Heritage reimburses mileage to our partner providers based on their board-approved mileage rate and purchase of service (POS) billing statements which verify client eligibility, report units and gather Consumer Intake Form data.

Transportation and Housing

Transportation and housing are similar matters in that inadequate, unaffordable or unsafe options have a directly negative impact on individual and community health. They are also related in the sense that many people find themselves in a situation that they choose less desirable housing based on access to transportation or are forced to leave their home setting of choice due to a lack of transportation. Both housing and transportation are essential, critical, basic elements to a high quality of life and to ensure maximum health. Without stability and access in these areas, even such core services as nutrition are less impactful.

Much work can be done to prevent injury and improve safety by helping persons learn what steps they can take to prepare their home setting of choice in the event of declining health or mobility. This can be done by education and promotion of universal design and visibility standards. Additionally, the Heritage region is aware of a program through the Johnson County Livable Community called the Gift of Home Safety. They are working to encourage developers, architects, realtors and contractors to obtain national accreditation. Heritage would like to begin to assist this effort by training staff and exploring ways that we can assist in increasing the awareness of this effort. At a minimum, Heritage plans to help encourage persons to modify their homes so they are able to remain in their home and to encourage the construction of accessible affordable housing.

Similar educational efforts shall be explored as it relates to access of transportation. Much work can be done to increase transportation safety by helping persons learn what options they may have available to them if they are unable to self-transport in the future. Education on the options to ensure access to socialization, healthcare and other essential services are key to future planning.

Individuals to be Served

The table below lists the number of individuals served in SFY2015 to date from all funding sources and estimated number to be served in SFY 2016 (7/1/2015 – 6/30/2016).

Table 3: Transportation Consumers

Category	SFY2014	SFY 2015 As of: [date]	SFY 2016
Number of Transportation Units (one-way trips) Provided	6,286	4,670	7,164
Estimated Number of Transportation Consumers Served	2,511	296	454

[IAPRS (Assisted Transportation & Transportation)]

Projected Expenditures

The table below lists budgeted expenditures from all funding sources to support this effort.

Table 4: Transportation Funding Sources

Funding Source	FY2015	FY2016
Federal	48,061	78,058
State	10,623	22,966
Local	139,804	144,673
In-Kind	18,419	19,500
Total	216,907	265,197

[IAFRS 2015: Quarter 3 projected out; 2016: Area Plan Budget

Focus Area 2: Caregiver: Family & Grandparent-Older Relative

Caregiver Needs

Across Iowa there are 540,000 family caregivers who provide needed assistance to their loved ones at home. All Iowa's Family Caregivers face challenges such as emotional stress, using their own money to help their loved ones, trying to balance holding a job and caring for their family (AARP, 2015). In 2015, AARP Iowa commissioned a telephone survey of 1,000 Iowa registered voters age 45 and older to learn about their experiences with family caregiving. Using the 2015 Caregiving Study results, AARP compiled a high level summary that was shared with Heritage staff. Within the summary respondents reported it's important for Family Caregivers and their loved ones to have support, specifically:

- 93% want community services so family caregivers can take a break.
- 87% want community services to help themselves or their loved one stay at home.
- 75% want resources and training available for family caregivers.

The Heritage Agency relates this study to our region through our experience in working with caregivers and will be utilizing the strategies described below to address the identified needs.

Strategies to Address Caregiver Needs

The Heritage Agency is actively pursuing the strategies below and will further develop and act upon these activities under the FY 2016-2017 Area Plan but shall also reach out to other provider systems, local hospitals and regional centers to expand the strategy and reach.

1. ***Caregiver Counseling*** – Caregiver counseling is provided by our Information, Referral & Assistance Specialist and helps reduce caregiver stress as provide emotional support and information on services and supports available.
2. ***Supplemental Services*** – Services provided on a limited basis to complement the care provided by caregivers. Examples of supplemental services include, but are not limited to, home modifications, assistive technologies, emergency response systems, and incontinence supplies. Home delivered meals provided as Supplemental Services shall be reported as Home Delivered Meals and meet the Home Delivered Meal definition.
3. ***Self-Directed Care*** - An approach to providing services (including programs, benefits, supports, and technology) under the Older Americans Act intended to assist an individual with activities of daily living.
4. ***Connecting Caregivers with Community Services*** – Information, Referral & Assistance Specialists assist caregivers in connecting with home and community-based services that help keep themselves and/or their loved one stay at home.
5. ***Caregiver Support Council*** – The Heritage Agency participates on a Caregiver Support Council coordinated by the VA Medical Center. This effort gives participants a chance to discuss their caregiver support activities and provides an opportunity to give input, promote and strengthen each other's efforts.
6. ***Community Caregiver Planning Committee*** – The Heritage Agency has partnered with AARP to plan for a Caregiver Wellness Day on November 12th. The planning group

consists of local, regional, as well as a statewide AARP representative. This group also discusses other community caregiving events/activities on a quarterly basis to promote and strengthen each other's efforts through collective impact on a regional level. These meetings are held at The Heritage Agency's office. Current participating agencies include: AARP (State of Iowa), ISU (Benton, Linn, and Jones), Mercy Medical Center (Benton, Buchanan, Cedar, Delaware, Iowa, Johnson, Jones, Linn and Tama), UnityPoint-St. Luke's Hospital (Benton, Buchanan, Cedar, Iowa, Johnson, Jones, Linn, Marion, Clinton, Delaware, Jackson, and Tama), Methwick (Linn), Milestones (Linn), Alzheimer's Association (covers 19 counties including all of the Heritage service area), and The Heritage Agency (Benton, Cedar, Iowa, Jones, Johnson, Linn, and Washington).

7. **Resource and Caregiver Support Specialist Position** – Heritage is in the process of replacing this vacated position to expand our capacity to address family caregiver needs. In hiring a Resources and Caregiver Support Specialist, half of their time will be dedicated to increasing our outreach, education and emotional support provided to family caregivers.

Future Activities:

The Heritage Agency plans to implement additional strategies during the next two years to further address the needs.

1. **Community Caregiver Center** – Mercy Medical Center is currently exploring the idea of creating a Community Caregiver Center that would be housed within Mercy Medical Center. Once up and running Heritage would create a formal partnership to house an Options Counselor onsite once a week. Our Caregiver Support Specialist could also offer caregiver support groups and educational trainings within the Center.
2. **Caregiver Educational Trainings** – The Heritage Agency plans on training our Caregiver Support Specialist within the Iowa State University Extension's Powerful Tools for Caregivers Training. The intent would be to partner with ISU to deliver classes within the Heritage service area at least twice a year.

Barriers that The Heritage Agency has experienced in reaching our vision for caregivers are:

- Federal funding for caregiver support has been stagnant.
- It has been difficult to schedule caregiver support groups as many caregivers work during the day or provide care to their loved ones and are unable to attend group meeting during the day or night without respite care.
- Lack of awareness about our caregiver resources also leads to poor attendance of support group meetings and community events.

Individuals to be Served

The table below lists the number of individuals served in SFY2015 to date from all funding sources and estimated number to be served in SFY 2016 (7/1/2015 – 6/30/2016).

Table 5: Caregiver Consumers

Category	SFY 2015 As of: [date here]	SFY 2016
Total Number of Caregiver Consumers Served	5,663	7,551

[IAPRS]

Additional Services

[IAPRS Client Listing for Caregiver Program indicated that there were no unduplicated caregivers receiving more than one service. In FY 2016 Heritage will have a more accurate representation of Caregiver services given that Access Assistance is now a registered service.]

Table 6: Percentage of caregivers receiving more than one AAA service

Category	SFY 2015 As of: [02/28/2015]	SFY 2016
Percent of caregivers served receiving more than one AAA service	0%	3%

[2015: IAPRS Client Listing; 2016: Assuming a 3% growth with the addition of an Options Counselor. A portion of this position is dedicated to Caregivers.]

Projected Expenditures

The table below lists budgeted expenditures from all funding sources to support this effort.

Table 7: Caregiver Funding Sources

Funding Source	FY2015	FY2016
Federal	197,339	206,228
State	11,807	47,706
Local	198,725	229,721
In-Kind		
Total	407,871	483,655

[2015: IAFRS Quarter 3 projected out; 2016: Area Plan Budget]

Goal 3: Empower older individuals to stay active and healthy through Older Americans Act services

***Objective:** To increase the number of Iowans accessing nutrition programs so that they may remain active and healthy as possible*

***Focus Area:** Food Security Project*

Nutrition Needs

In SFY 2015, Area Agencies on Aging received a special appropriation to address food insecurity needs of older Iowans. Each agency committed to developing innovative strategies to address food insecurity among older Iowans and the decreasing participation in the congregate and home delivered meal programs. Heritage went with the innovative strategy of collaborating with a major grocery store chain, Hy-Vee, to offer meals on a voluntary contribution basis to older adults who are not currently utilizing the Older Americans Act meal program. The Hy-Vee that was chosen was in an area that experienced a recent dining site closure.

Older Iowans have expressed multiple barriers which inhibit participation in the Heritage Regional Senior Nutrition Program. The barriers that have been identified consist of the following: lack of available transportation; lack of funding keeping pace with increasing costs, and rigorous nutritional guidelines which impede the ability to offer appetizing meals.

Lack of available transportation hinders the ability of eligible participants to attend dining sites, particularly in the rural communities. The declining amount of participants in many rural communities can also be attributed to many older Iowans relocating closer to family and vital services located in more populated towns and cities. Although many participants carpool to dining sites, many older Iowans still lack the transportation resources. Another relative issue regarding transportation is the cost effectiveness of delivering rural home delivered meals to the most remote areas of the service region. At least one Heritage nutrition provider had to decrease serving days from five to three due to the inefficient cost effectiveness of delivery to the fringes of the county to only a moderate number of participants.

Lack of funding keeping pace with the increasing costs of maintaining the current nutrition program in the Heritage region has precipitated an unprecedented amount of dining site closures. This is due to the gap in the total cost of producing meals and the amount of funding and voluntary contributions that are received. Very tough decisions were made in closing congregate dining sites, and to concentrate funding on the home delivered meal portion of the nutrition program. Home delivered meals are vital to the majority of our most frail and at-risk older adults remaining in their homes. This demographic is also the least likely to possess the ability to make voluntary contributions to sustain the nutrition program. The Heritage Agency and its partner providers consistently appraise the Regional Nutrition Program in a “top down” fashion. Every aspect of the current program is evaluated on the following: food cost analysis; group purchasing; menu redevelopment; staffing structures, and creating other innovative ways to sustain the current program.

The most significant barrier in the Heritage region is the rigorous nutritional guidelines which impede the ability to offer appetizing meals. In the recent annual participant satisfaction surveys several comments were made stating participants have lived this long and should be able to eat what they choose and not be dictated what and the amount that they eat. At the most recent Heritage Regional Site Manager Meetings, multiple site managers expressed concerns on behalf of participants that they tend not to use the program as much as they would like to, due to being told what they need to be served. One of the main issues that make this a barrier is the inflexibility of the menu choices, meeting the current regulations, and offering a meal that the participant will enjoy. While the current regulations allow for the creation of special diet menu cycles for those with dietary needs, many participants do not require a special diet menu. In order to meet all of the specific needs of the current and prospective participants, there would be significant costs involved such as dietician fees developing at least three different menu cycles in addition to the current one. Also, many sites in the Heritage region lack the physical infrastructure and labor to accommodate multiple menu cycles to meet those needs. Many of the issues that are currently facing the current program could be addressed by adjusting several of the current nutrition guidelines. Heritage proposed some suggestions to the current nutrition regulations. One suggestion was to allow flexibility in the nutrition regulations/requirements in a manner that maintains the current nutrition requirements while offering alternates to at least the fruit and vegetable selections, without requiring the alternate selections to be analyzed. This will generate more acceptability to the program, controlling some costs, increasing the perceived value, and increase satisfaction, while still maintaining the majority of the nutritional guidelines which do add much needed nutrients to an older adult's diet. Another suggestion was to lower the weekly average level of potassium from the current 1567mg to 1467mg and lower the weekly level of folate from 133mg to 100mg. While these two adjustments may seem rather minor, they will make a significant impact in the creation and serving of acceptable meals and increase the participant satisfaction by offering more selections and variety of foods that would not be currently available to them. Heritage also proposed to replace the current nutrient analysis requirements with the most current MY PLATE guidelines, providing flexibility with menu creation and development, while also maintaining credibility as a nutrition program. The MY PLATE guidelines would still need to be approved by a dietician. This will allow AAA's and providers flexibility in creating menus and also to choose ingredients that are new to the foodservice market or that come into season, without having to go through the added financial costs and time considerations in developing and analyzing menu cycles each time the menu cycle is adjusted in any way.

SFY2015 Strategies

The Heritage Agency created several different strategies to address food insecurity among older Iowans and also addressing declining participation in the current program. As part of the funding allotment received from the Iowa Department on Aging, The Heritage Agency collaborated with the Johnson Avenue HY-VEE Food Store in Cedar Rapids, to create the "Fresh Choice" program as part of the Food Insecurity Grant Program (F.I.G.). This HY-VEE and area of

Cedar Rapids, was chosen due to the fact that there is a large concentration of low-income senior housing in the area and currently has no access to a congregate dining site.

The Heritage Agency contacted and marketed the F.I.G. Program to senior housing developments and food pantries in the northwest quadrant of Cedar Rapids, in addition to agencies that specialize in providing services to older adults in the Cedar Rapids metro area. Many housing managers truly appreciated the offering of this program to their residents. Outreach will continue to those senior housing complexes that have not yet expressed an interest in participating, in addition to outreach to the faith-based community and neighborhood associations in the area surrounding the Johnson Avenue HY-VEE.

In order to qualify for the F.I.G. program, applicants may not currently receive home delivered meals or have visited an OAA congregate site in the past three months. Additionally, the income guidelines mirrored those established as part of the Senior Farmer's Market Nutrition Program. Participants received 10 vouchers redeemable for a Fresh Choice Meal at the Johnson Avenue store only. Participants could choose from a variety of entrees, sides, and fruits and vegetables. The selections were designed by the store dietician, adhere to the MyPlate recommendations, and included a choice of 1% milk or yogurt. Each applicant received a packet of information with the sheet of vouchers which included MyPlate nutrition education, information about making a confidential voluntary contribution, a general program brochure, and information on how to begin participating in the current congregate and/or home delivered meal program as part of the Older Americans Act. The collaboration also included an in-kind donation of the local HY-VEE delivering meals to those without access to transportation and/or cannot travel out of their home, at no additional cost. This generous support will allow many older Iowans the opportunity to receive nutritious meals. Each participant is sent a survey (congregate or home delivered specific) approximately one month after receiving the vouchers. They are encouraged to return the survey in the postage-paid envelope provided.

This project addressed and reduced the above barriers in multiple ways. The F.I.G. Program allowed older adults in an area of Cedar Rapids that had no nutrition services, an opportunity to receive nutritious meals at an affordable cost. Additionally, this program has empowered the participants to make informed and educated decisions on what they would like to order. There are a wide variety of choices that meet the MyPlate guidelines which provide the vital nutrients, and it also allows the participant some choice as to what they would like to try. It also gives participants opportunities to try foods that they would not normally try or prepare themselves. Participants have mentioned during voucher distribution that they are extremely appreciative of this program as this will afford them the opportunity to go out to eat and socialize with friends. They also appreciate the opportunity to make their own menu selection. This program has also addressed the transportation barrier, by HY-VEE delivering meals to those that need the support the most at no additional cost. This allows participants who normally would not be able to participate in a program to receive nutritious meals that they enjoy and want to eat.

SFY2016 Strategies

The Heritage Agency is committed to retaining the F.I.G. program at its current location in FY 2016, dependent on obtaining additional funding through voluntary contributions and legislative support received in FY 2015. Additional funding will allow the ability to reach additional older lowans in a larger geographical area while maintaining the current F.I.G. program.

Additionally, The Heritage Agency is open to exploring the expansion of the F.I.G. program to another community that has a HY-VEE with the logistical capacity of the current HY-VEE. While possible expansion areas have yet to be determined, the new area would generally be in a rural area where current services are not being offered or are being underutilized. With the possible expansion of the F.I.G. program to include a rural community, this will allow older lowans in a rural area of the Heritage Service Region the opportunity to participate in the same program as residents in the northwest quadrant of Cedar Rapids.

The continuing of the F.I.G. Program will allow the opportunity to market the current Older Americans Act Nutrition Program. This will continue with the collaboration of current nutrition partner providers in the area that is selected. Marketing materials about the OAA program in that area will be included in the information packet distributed to each participant. It will also let older lowans know about the program who normally would not be aware of the program for various reasons.

Individuals to be Served

The table below lists the number of individuals served in SFY2015 to date from all funding sources and estimated number to be served in SFY 2016 (7/1/2015 – 6/30/2016).

Table 8: Meal Program Consumers

Category	SFY 2015 As of: 4/28/15	SFY 2016
Total Number of Meal Program Consumers Served	2,847	2,949

IAPRS and FIG Participant Applications

Additional Services

Most participants that are receiving additional services include I&A, Homemaker, and Case Management

Table 9: Percentage of meal program consumers receiving additional AAA services

Category	SFY 2015 As of: 4/28/15	SFY 2016
Percent of meal program consumers served receiving additional AAA services	2,796	2,897

SFY15 Multiple Services Document

Projected Expenditures

The table below lists budgeted expenditures from all funding sources to support this effort.

Table 10: Meal Programs Funding Sources

Funding Source	FY2015	FY2016
Federal	1,041,845	1,070,266
State	27,209	66,635
Local	929,119	1,028,641
In-Kind	474,420	240,225
Total	2,472,593	2,405,767

IDA contracts, Providers RFP and Contracts, IAFRS

Goal 4: Ensure the rights of older lowans and prevent their abuse, neglect and exploitation

***Objective:** To decrease abuse, neglect, and exploitation of older lowans.*

***Focus Area:** Elder Abuse Prevention and Awareness*

Prevention and Awareness Needs

The three most frequently identified abuse categories addressed by the Heritage AAA Elder Rights Specialist are Financial Exploitation, Caregiver Neglect, Verbal/Psychological Abuse, and Self-Neglect. Some clients experience more than one type of abuse concurrently.

Strategies to Address Needs

The Heritage Agency is dedicated to address the issue of Elder Abuse. Our current strategies are related to awareness, collaboration, networking/coordination and response. Each strategy is described below through activities performed by the Elder Rights Specialist.

1. **Prevention** through increase public awareness of elder abuse issues through our seven county regions.
 - a. Placed information on Heritage’s website regarding the Elder Abuse program and post information on our Facebook page.
 - b. Provides outreach to our Task Forces within each of our seven counties.
 - c. Provides educational sessions that targets community members, banks, senior centers, adult day, senior groups, service clubs, and service providers.
 - i. Has delivered 12 presentations on Elder Abuse Prevention and Awareness reaching over 250 providers, caregivers and consumers.
 - ii. Will be delivering four additional presentations by the end of the Fiscal Year.
 - d. Coordinates an Annual World Elder Abuse Awareness Day event in our service area.
 - e. Attends Heritage’s AAA annual Caregiver Wellness Day to increase awareness of program.
 - f. Attends the Linn and Johnson counties Elderly Consortium meetings to disseminate information.
 - g. Chairs of the Linn County Family Violence Prevention Coalition and conducts panel discussion on issues related to elder abuse.
 - h. Disseminates Elder Abuse Prevention and Awareness program brochures to increase awareness.
 - i. Has distributed over 200 brochures.
 - ii. Will be participating in two health fairs by the end of the Fiscal Year to increase awareness and disseminate program brochures.
2. **Collaborates** with and acts as a resource to Heritage AAA staff, physicians, law enforcement, county attorneys, DHS, financial institutions, mental health professionals, hospitals, and other community service providers.

- a. Leads multidisciplinary team (MDT)/client safety team meetings for each of the counties in the Heritage region.
 - b. Contacted DHS office within region to promote Elder Abuse Prevention and Awareness program and to invite to MDT meetings.
 - c. Leads the Elder Abuse Prevention and Awareness Coalition to build support for public policies that address the needs of abused older Iowans. Specifically working with County Task Force and Older Iowans Legislature members towards an elder abuse definition and law recommendations, develop safeguards from financial exploitation as recommended within to 2013 Elder Abuse Task Force Final Report (SF 446, Section 50)
 - d. Reaches out to key agencies within the Aging Network in each of our seven counties to increase awareness and form new partnerships.
3. **Networks and coordinates community resources** to respond to the needs of person's age 60+ who are at-risk or experiences abuse, neglect, and/or exploitation.
- a. Attends local networking groups, i.e. elderly consortiums, Triad (Stopping Crime Against Seniors), Task Forces, Guardianship Association of Iowa Network (GAIN), Johnson County Death Review Team, etc.
 - b. Attends legislative functions, i.e. Older Iowans Legislature Day at the Capital, meetings with local Legislators before and during the legislative session.
4. **Responds to reported concerns** of older Iowans who are at risk of, or experience abuse, neglect, or exploitation.
- a. Tracks and documents all activities for each client in each county, which will include intake information, type of referral, referral sources, types of abuse, client contact hours estimated # of clients able to remain at home utilizing Medicaid rather than be admitted to a LTC facility, and assessment & intervention approaches.
 - b. Responds to Elder Abuse referrals using the operating procedures provided by the Iowa Department on Aging's Elder Abuse Program Director.

Strategies The Heritage Agency will implement in FY16-FY17 to address those issues:

1. The Elder Abuse Prevention Coalition will continue to advocate for an expansion in the current Elder Abuse Law during the next legislative session.
2. Continue to network and develop new partnerships in the community and coordinate community resources to respond to the needs of persons 60 years and older who are at-risk and/or experiencing abuse, neglect, and exploitation.
3. Continue to strengthen collaboration among Iowa Department on Aging, the Department of Human Services and AAAs.
4. Work to develop collaboration with the Department of Inspection and Appeals.

Barriers that prevent The Heritage Agency from addressing those issues:

- Poor collaboration between DHS and AAA's.

- Lack of/not enough funding of direct service dollars to help older adults who are at-risk and/or experiencing abuse, neglect, and/or exploitation.
- Lack of service providers in our more rural counties.
- Lack of substitute decision makers in our service area.

Individuals to be Served

The table below lists the number of individuals served in SFY2015 to date and an estimated number to be served in SFY 2016 (7/1/2015 – 6/30/2016).

Table 11: Elder Abuse Prevention and Awareness Consumers

Category	SFY 2015 As of: [2/28/2015]	SFY 2016
Total Number of EAPA Active Consumers Served	55	65

[Data Source: Monthly EAPAP reports to Iowa Department on Aging.]

Additional Services

Which additional AAA services are EAPA consumers most frequently receiving?

- Consumers being served by the EAPA program are most frequently receiving or being referred to receive Case Management and/or Home Delivered Meals.

Table 12: Percentage of EAPA consumers receiving additional AAA services

Category	SFY 2015 As of: [2/28/2015]	SFY 2016
Percent of EAPA consumers receiving additional AAA services	18%	20%

[Data Source: Client records.]

Projected Expenditures

The following table lists budgeted expenditures from all funding sources to support this effort.

Table 13: EAPA Funding Sources

Funding Source	FY2015	FY2016
Federal	7,828	
State	144,461	108,569
Local	8,354	10,172
In-Kind		
Total	160,643	118,741

[2015: Area Plan Budget supporting documentation; 2016: Area Plan Budget supporting documentation and Provider RFP applications. The assumption in FY 2016 is that a considerable less amount of time will need to be allocated due to the fact that the new program is up and running.]

Section 2: Service Planning and Evaluation

FY 2016 Projected Older Americans Act Consumers and Service Units

[Insert a copy of your agency's Form 3A-1 detailing the services to be provided and projected consumers to be served (total & per targeted population) from Older American Act funds.]

Form 3A-1

SERVICE	Service Units Provided	Consumers Served	60+ Rural	60+ Minority	60+ Minority Below Poverty	60+ Below Poverty	SLP Low Income	SLP Moderate Income
01A: Administration	General Aging							
	Caregiver							
1: Personal Care	General Aging							
2: Homemaker	General Aging	176	6	1	1	1	4	
3: Chore	General Aging	695	92	31	1	1	61	
4: Home Delivered Meals	General Aging	267,514	1,573	346	33	18	867	
5: Adult Daycare	General Aging	11,906	73	8	7	4	37	
6: Case Management	General Aging	7,281	892	107	59	36	546	
7: Congregate Meals	General Aging	79,907	1,376	522	21	8	516	
8: Nutrition Counseling	General Aging	30	30	6	6	1	6	
9: Assisted Transportation	General Aging	1,050	175	63			80	
10: Transportation	General Aging	6,114	279	100			128	
11: Legal Assistance	General Aging	325	461	240	15	2	165	
12: Nutrition Education	General Aging	12,555	2,025	506	39	21	1,065	
13: Information & Assistance	General Aging	5,410	4,328	2,114	124	14	1,423	
14: Outreach	General Aging	3,582	3,582	1,721	111	8	861	
B02: Health Promotion & Disease Prevention	General Aging	40	40	18	1		10	
B03: Respite	General Aging							
B05: Mental Health Outreach	General Aging							
B07: Evidence Based Health Activities	General Aging	40	40	18	1		10	
C01: Advocacy	General Aging							
C05: Legal Education	General Aging							
C07: EAPAP Consultation	General Aging	52	13	7			5	
C08: EAPAP Assessment & Intervention	General Aging	409	52	26	1		15	
C09: EAPAP Training & Education	General Aging	455	455	222	2		150	
C10: Self-Directed Care	General Aging							
C11: Money Management	General Aging							
D01: Training & Education	General Aging	1,101	1,101	519	30		330	
D02: Recreation Activities	General Aging							
D03: Reassurance/Visiting	General Aging							
E01: Counseling	General Aging							
E02: Placement Services	General Aging							
E03: Assessment & Intervention	General Aging							
E05: Options Counseling	General Aging	1,145	229	44	18	9	120	
F02: Material Aide	General Aging	12	12	6			6	
F03: Public Information	General Aging							
F05: Volunteer Support	General Aging							
CG1: CG Access Assistance	Caregiver	693	521	250	16	1	172	
CG2: CG Self-Directed Care	Caregiver	3	3	1			1	
CG3: CG Counseling	Caregiver	50	50	25	1		17	
CG4: CG Information Services	Caregiver	48	6,935	334	200	20	2,288	
CG5: CG Respite	Caregiver	14,669	117	51	2		32	
CG6: CG Supplemental Services	Caregiver	3	3	1			1	
CG7: CG Home Delivered Meals	Caregiver							
CG8: CG Options Counseling	Caregiver	325	65	12	5	3	34	
GO1: GO Access Assistance	Caregiver							
GO2: GO Self-Directed Care	Caregiver							
GO3: GO Counseling	Caregiver							
GO4: GO Information Services	Caregiver							
GO5: GO Respite	Caregiver							
GO6: GO Supplemental Services	Caregiver							
GO7: GO Home Delivered Meals	Caregiver							
GO8: GO Options Counseling	Caregiver							

SERVICE		Service Units Provided	Consumers Served	60+ Rural	60+ Minority	60+ Minority Below Poverty	60+ Below Poverty	SLP Low Income	SLP Moderate Income
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	Caregiver								
1: Personal Care	General Aging								
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4: Home Delivered Meals	General Aging	267,514	1,573	346	33	18	867		
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6: Case Management	General Aging	7,281	892	107	59	36	546		
7: Congregate Meals	General Aging	79,907	1,376	522	21	8	516		
8: Nutrition Counseling	General Aging	30	30	6	6	1	6		
9: Assisted Transportation	General Aging	1,050	175	63			80		
10: Transportation	General Aging	6,114	279	100			128		
11: Legal Assistance	General Aging	825	461	240	15	2	165		
12: Nutrition Education	General Aging	12,555	2,025	506	39	21	1,065		
13: Information & Assistance	General Aging	5,410	4,328	2,114	124	14	1,423		
14: Outreach	General Aging	3,582	1,012	494	32	2	243		
B02: Health Promotion & Disease Prevention	General Aging	40	40	18	1		10		
B03: Respite	General Aging								
B05: Mental Health Outreach	General Aging								
B07: Evidence Based Health Activities	General Aging	40	40	18	1		10		
C01: Advocacy	General Aging								
C05: Legal Education	General Aging								
C07: EAPAP Consultation	General Aging	52	13	7			5		
C08: EAPAP Assessment & Intervention	General Aging	409	52	26	1		15		
C09: EAPAP Training & Education	General Aging	455	455	222	2		150		
C10: Self-Directed Care	General Aging								
C11: Money Management	General Aging								
D01: Training & Education	General Aging	1,101	1,101	519	30		330		
D02: Recreation Activities	General Aging								
D03: Reassurance/Visiting	General Aging								
E01: Counseling	General Aging								
E02: Placement Services	General Aging								
E03: Assessment & Intervention	General Aging								
E05: Options Counseling	General Aging	1,145	229	44	18	9	120		
F02: Material Aide	General Aging	24	12	6			6		
F03: Public Information	General Aging								
F05: Volunteer Support	General Aging								
CG1: CG Access Assistance	Caregiver	693	521	250	16	1	172		
CG2: CG Self-Directed Care	Caregiver	3	3	1			1		
CG3: CG Counseling	Caregiver	50	50	25	1		17		
CG4: CG Information Services	Caregiver	48	6,935	334	200	20	2,288		
CG5: CG Respite	Caregiver	14,669	117	51	2		32		
CG6: CG Supplemental Services	Caregiver	3	3	1			1		
CG7: CG Home Delivered Meals	Caregiver								
CG8: CG Options Counseling	Caregiver	325	65	12	5	3	34		
GO1: GO Access Assistance	Caregiver								
GO2: GO Self-Directed Care	Caregiver								

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G03: GO Counseling	Caregiver								
G04: GO Information Services	Caregiver								
G05: GO Respite	Caregiver								
G06: GO Supplemental Services	Caregiver								
G07: GO Home Delivered Meals	Caregiver								
G08: GO Options Counseling	Caregiver								

Handwritten marks: "20" and "10/21/15"

Service Activity and Data Collection Performance

IDA reviews Consumers Served and Units Provided data to evaluate service reach (people served) and activity (most frequently used services, increase/decrease demand or cost, and/or priorities) for mandatory services. IDA also reviews the percentage of consumers who complete an Aging & Disability Network Consumer Intake Form once during the state fiscal year in which they receive a congregate meal and/or another registered service. IDA evaluates this information because it ensures that IDA and agencies have accurate information about the individuals they serve for planning, program evaluation, and required reporting purposes.

Results: Service Data for FY2014 and FY2015 YTD

The table below contains the agency's consumer served and units provided for mandatory services in SFY2014 and for the first quarter of SFY 2015.

Mandatory Service	data category	SFY 2014 Projected	SFY 2014 Actual	2014 % Difference	SFY 2015 Projected	SFY 2015 Actual (YTD Q1)	2015 % Difference
Case Management	Consumers	914	1,026	112%	914	799	87%
	Units	7,542	7,449	99%	7,542	1,879	25%
Congregate Meals	Consumers	2,380	2,449	103%	1,996	1,100	55%
	Units	107,683	97,589	91%	90,287	21,032	23%
Health Promotion	Consumers	30	48	160%	40	11	28%
	Units	30	48	160%	40	11	28%
Home Delivered Meals	Consumers	2,000	1,867	93%	1,765	1,103	62%
	Units	291,144	286,156	98%	256,971	60,737	24%
Information & Assistance	Consumers	7,601	8,659	114%	7,324	1,488	20%
	Units	8,200	9,517	116%	7,900	1,838	23%
Legal Assistance	Consumers	499	422	85%	449	111	25%
	Units	660	660	100%	660	180	27%
Nutrition Counseling	Consumers	34	40	118%	34	5	15%
	Units	34	40	118%	34	5	15%
Nutrition Education	Consumers	15,233	2,615	17%	2,700	1,309	48%
	Units	15,233	13,567	89%	14,000	2,921	21%
Options Counseling	Consumers				640	86	13%
	Units				1,920	242	13%

Note: Options Counseling was not a mandatory service until January 2014.

Results: Consumer Data Collection

IDA expects that at least 90% of consumers who receive a congregate meal and/or another registered service will complete an Aging & Disability Network Consumer Intake Form once during the state fiscal year.

The table below contains the agency's intake form completion rate for SFY2014 and for the first quarter of SFY 2015.

Congregate Meal Consumers	SFY2014	SFY2015 YTD
# Consumers	2,449	1,100
# Forms Completed	2,008	1,100
% of Consumers Registered	82%	100%

Discussion: Service Projections and Data Collection

The primary issues Heritage encounters in forecasting service projections and in collecting data includes the following: having limited trend data inclusive of target population needs and/or potential population for various services; fluctuations in funds to provide services; limited service providers in rural areas to deliver the service; not having a formalized Quality Assurance Plan; having tools in place to collect solid unduplicated client data, and having the staff capacity to analyze meaningful trend data and applying the results of the data to strategic outcome measures.

Heritage has made great strides in overcoming the above barriers and limitations. Below are action steps that Heritage has taken:

- Hiring of Outcomes and Data Coordinator
- Developing of Quality Assurance Program
- Enhanced tracking systems, reports coordinator
- Hiring of Computer Programmer in ESP
- Expectation of unduplicated client tracking systems for all partner providers
- Expectations of partner providers
- Contractual language

The Heritage Agency has an established process to evaluate data for planning and program evaluation, such as consumer satisfaction surveys, contract monitoring, site visits, task force feedback and community forums and more.

However, Heritage is currently finalizing an agency wide Quality Assurance and Improvement Program. The program is described below:

Purpose

The purpose of the Quality Assurance and Improvement Program (QAIP) is to provide a formal process by which The Heritage Area Agency on Aging (HAAA) evaluates and identifies any need for improvement or adjustment in agency operations, service delivery, and/or community impact.

Scope

The QAIP is not to overstep the roles or functions of program coordinators, but to provide HAAA leadership with a macro view of the agency's performance via identified measurements. Agency programs or grants will have additional reporting and/or data requirements that may not be part of this macro evaluation, however, those tools will also be considered in part of the overall QAIP. For example, Medicaid Case Management requires the program to have a Quality Assurance Plan. Elements of that plan may be included and considered within the agency QAIP, but will not take the place of the Medicaid requirements.

Information gathered through the QAIP may be used for evaluation of success, to measure impact, communicate effectiveness, advocate on issues related to the target population, and more.

Measurement tools and processes will vary due to the diversity of elements to be evaluated to determine overall impact, but attention to the following areas as applicable:

Customer Service: Providing services to clients that meet their needs in an efficient, timely and respectful manner.

Knowledge/Education: Increasing the target population's education on their options to empower them to make informed decisions and/or increase their knowledge.

Quality & Reliability: Ensuring the services provided meet the needs of the community and/or target population on a consistent basis.

Outcomes: Measuring to assess if the specific desirable result or quality level of the service is provided.

Objectives

The mission of HAAA is to serve the needs of older adults, caregivers, their families, and adults with disabilities in the following ways:

1. Planning: Developing and implementing plans that identify and meet the needs of older adults.
2. Funding: Obtaining federal, state, and other (ie; grants, etc.) funding for older adult programs
3. Advocating: Standing strong for older adults' needs at the national, state, and local levels.

The work of HAAA is to be mission driven, client and partner centered and within the vision of the volunteer leadership, Kirkwood Community College, and the Executive Director.

HAAA strives to provide the highest possible quality service, directly or through partnerships, and to have a positive impact on the community while doing so in an effective and efficient manner and in accordance with all applicable laws and regulations.

Strategy

The QAIP will look at four (4) general focus areas to assess if the agency is meeting objectives and serving the mission of the HAAA: **Service Delivery – Internal, Service Delivery – External, Community Partnership, and Operations.**

Each QAIP strategic focus area will include:

1. OBJECTIVE - Agency objectives specific to focus area and related to the QAIP
2. INFORMATION - Type(s) of outcome information collected for QAIP
3. PROCEDURE - Data collection methods (what, how, frequency, etc.) for QAIP
4. ANALYSIS - Analysis of outcome information for QAIP
5. USE - Reporting and use of outcome information related to QAIP
6. REMEDIATION - Remediation and improvement process if warranted

Section 3: Intent / Assurances

Verification of Intent

Authorized Signatures

Compliance with Assurances and General Provisions

Verification of Intent

The Heritage Agency (AAA) accepts full authority and responsibility to develop and administer the SFY 2016-SFY 2017 Area Plan on Aging in accordance with all requirements of the Older Americans Act as amended 2006, state laws, rules, and procedures. By accepting this authority and responsibility, the area agency agrees to develop and administer the Area Plan for a comprehensive and coordinated system of service and to serve as the advocate and focal point for all Iowans 60+ years of age in the area agency's planning and service area.

The Area Plan on Aging reflects input from a cross section of service providers, consumers, and caregivers that are representative of all areas and culturally diverse populations in the planning and service area; its contents are true, accurate, and incorporate the comments and recommendations of the Area Agency's Advisory Council and has been reviewed and approved by the Area Agency's Governing Body. It is acknowledged that intentional misrepresentation or falsification may result in the termination of financial assistance.

The Governing Body has reviewed and approved the SFY 2016-SFY 2017 Area Plan on Aging, and hereby submits the Area Plan to the Iowa Department on Aging for approval by the Iowa Commission on Aging.

Print Name: James Choate, Vice President & Chief Financial and Operations Office, Kirkwood Community College

James Choate 4/28/15
Signature, Chair - Governing Body Date Signed

The Advisory Council has reviewed and approved the SFY 2016-SFY 2017 Area Plan on Aging, and hereby submits the Area Plan to the Iowa Department on Aging for approval by the Iowa Commission on Aging.

Print Name: Nancy Lee Siebenmann, Chair

Nancy Lee Siebenmann 4/23/15
Signature, Chair – Advisory Council Date Signed

The Executive Director has reviewed and approved the SFY 2016-SFY 2017 Area Plan on Aging, and hereby submits the Area Plan to the Iowa Department on Aging for approval by the Iowa Commission on Aging.

Print Name: Jill Gleason, Interim Director

Jill Gleason 4-28-15
Signature, Executive Director Date Signed

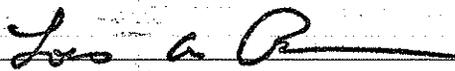
Verification of Intent

The Heritage Agency (AAA) accepts full authority and responsibility to develop and administer the SFY 2016-SFY 2017 Area Plan on Aging in accordance with all requirements of the Older Americans Act as amended 2006, state laws, rules, and procedures. By accepting this authority and responsibility, the area agency agrees to develop and administer the Area Plan for a comprehensive and coordinated system of service and to serve as the advocate and focal point for all lowans 60+ years of age in the area agency’s planning and service area.

The Area Plan on Aging reflects input from a cross section of service providers, consumers, and caregivers that are representative of all areas and culturally diverse populations in the planning and service area; its contents are true, accurate, and incorporate the comments and recommendations of the Area Agency’s Advisory Council and has been reviewed and approved by the Area Agency’s Governing Body. It is acknowledged that intentional misrepresentation or falsification may result in the termination of financial assistance.

The Governing Body has reviewed and approved the SFY 2016-SFY 2017 Area Plan on Aging, and hereby submits the Area Plan to the Iowa Department on Aging for approval by the Iowa Commission on Aging.

Print Name: Lois Bartelme, Board of Trustees Chair, Kirkwood Community College

 5/20/15

Signature, Chair - Governing Body Date Signed

The Advisory Council has reviewed and approved the SFY 2016-SFY 2017 Area Plan on Aging, and hereby submits the Area Plan to the Iowa Department on Aging for approval by the Iowa Commission on Aging.

Print Name: NancyLee Siebenmann, Chair

Previously submitted

Signature, Chair – Advisory Council Date Signed

The Executive Director has reviewed and approved the SFY 2016-SFY 2017 Area Plan on Aging, and hereby submits the Area Plan to the Iowa Department on Aging for approval by the Iowa Commission on Aging.

Print Name: Jill Gleason, Interim Director

Previously submitted

Signature, Executive Director Date Signed

Authorized Signatures

Name of Area Agency on Aging: The Heritage Agency
Street Address: Kirkwood Community College, 6301 Kirkwood Blvd. SW
City, State, Zip Code: Cedar Rapids, Iowa 52404

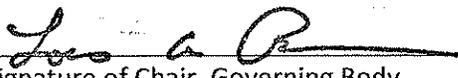
Type of Agency: Separate organizational unit within a multi-purpose agency - Kirkwood Community College
Date of Area Agency on Aging Designation: 1971

Authorized Signatures for Funding Applications and Contracts

Print Name: Jill Gleason, Interim Director
Previously submitted

Signature of Executive Director	Date Signed
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Print Name: Lois Bartelme, Board of Trustees Chair, Kirkwood Community College

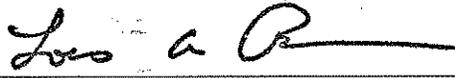
 Signature of Chair, Governing Body	5/20/15 Date Signed
---	------------------------

Authorized Signatures for Fiscal Reports

Print Name: Jill Gleason, Interim Director
Previously submitted

Signature of Executive Director	Date Signed
---------------------------------	-------------

Print Name: Lois Bartelme, Board of Trustees Chair, Kirkwood Community College

 Signature of Chair, Governing Body	5/20/15 Date Signed
---	------------------------

Print Name: Tala Nelson
Previously submitted

Signature of Community Partnership & Finance Director	Date Signed
---	-------------

Authorized Signatures for Program Reports

Print Name: Jill Gleason, Interim Director
Previously submitted

Signature of Executive Director	Date Signed
---------------------------------	-------------

Print Name: Tala Nelson
Previously submitted

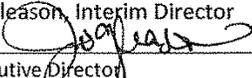
Signature of Community Partnership & Finance Director	Date Signed
---	-------------

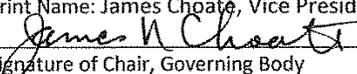
Authorized Signatures

Name of Area Agency on Aging: The Heritage Agency
Street Address: Kirkwood Community College, 6301 Kirkwood Blvd. SW
City, State, Zip Code: Cedar Rapids, Iowa 52404

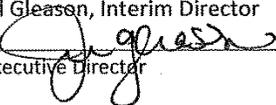
Type of Agency: Separate organizational unit within a multi-purpose agency - Kirkwood Community College
Date of Area Agency on Aging Designation: 1971

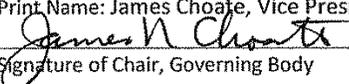
Authorized Signatures for Funding Applications and Contracts

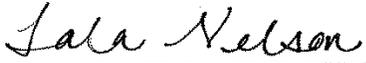
Print Name: Jill Gleason, Interim Director

Signature of Executive Director
4-28-15
Date Signed

Print Name: James Choate, Vice President and CFO/COO, Kirkwood Community College

Signature of Chair, Governing Body
4/28/15
Date Signed

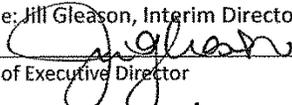
Authorized Signatures for Fiscal Reports

Print Name: Jill Gleason, Interim Director

Signature of Executive Director
4-28-15
Date Signed

Print Name: James Choate, Vice President and CFO/COO, Kirkwood Community College

Signature of Chair, Governing Body
4/28/15
Date Signed

Print Name: Tala Nelson

Signature of Community Partnership & Finance Director
4/28/15
Date Signed

Authorized Signatures for Program Reports

Print Name: Jill Gleason, Interim Director

Signature of Executive Director
4-28-15
Date Signed

Print Name: Tala Nelson

Signature of Community Partnership & Finance Director
4/28/15
Date Signed

Compliance with Assurances and General Provisions

The Area Agency on Aging hereby assures compliance, on behalf of the area agency, service providers, and/or subcontractors, with any and all applicable federal and state laws, rules, and procedures. Applicable federal and state laws, regulations, rules and procedures include, but are not limited to, the following:

- Older Americans Act, as Amended, 2006
- Code of Federal Regulations
- Assurance of Compliance with the Federal Funding Accountability and Transparency Act (FFATA), which requires grantees and their sub-recipients to have a Dun and Bradstreet Numbering System (DUNS) number (www.dnb.com) and to maintain active and current profiles in the Central Contractor Registration (CCR) (www.ccr.gov).
- Iowa Code Chapter 231, Department on Aging – Older Iowans
- Iowa Administrative Code 17, Department on Aging
- Code of Iowa, Chapter 8F, Government Accountability-Service Contracts, Contractor
- Certification and Reporting

Additionally, the Area Agency on Aging will cooperate fully with the Iowa Department on Aging to assure compliance with provisions required by legislative action taken by the Congress of the United States, and the Iowa General Assembly, and with Iowa Aging Program Instructions during fiscal years 2016-2017 of the Area Plan on Aging.

Further Assurance is given that:

1. The Area Agency on Aging will provide access to and the right to examine all record books, papers or documents related to the Area Plan.

By signing below, the Chair of the Governing Body, and the Executive Director confirm that he or she read, reviewed, and fully understands the federal and state statutes, regulations, rules and procedures identified within the Compliance with Assurances and General Provisions and agrees to fully comply with all terms thereof.

The Compliance with Assurances and General Provisions is hereby submitted for the FY'2016-2017 Area Plan to the Iowa Department on Aging for approval.

Print Name: Lois Bartelme, Board of Trustees Chair, Kirkwood Community College


Signature of Chair, Governing Body

5/20/15
Date Signed

Print Name: Jill Gleason, Interim Director
Previously submitted

Signature of Executive Director

Date Signed

Compliance with Assurances and General Provisions

The Area Agency on Aging hereby assures compliance, on behalf of the area agency, service providers, and/or subcontractors, with any and all applicable federal and state laws, rules, and procedures. Applicable federal and state laws, regulations, rules and procedures include, but are not limited to, the following:

- Older Americans Act, as Amended, 2006
- Code of Federal Regulations
- Assurance of Compliance with the Federal Funding Accountability and Transparency Act (FFATA), which requires grantees and their sub-recipients to have a Dun and Bradstreet Numbering System (DUNS) number (www.dnb.com) and to maintain active and current profiles in the Central Contractor Registration (CCR) (www.ccr.gov).
- Iowa Code Chapter 231, Department on Aging – Older Iowans
- Iowa Administrative Code 17, Department on Aging
- Code of Iowa, Chapter 8F, Government Accountability-Service Contracts, Contractor
- Certification and Reporting

Additionally, the Area Agency on Aging will cooperate fully with the Iowa Department on Aging to assure compliance with provisions required by legislative action taken by the Congress of the United States, and the Iowa General Assembly, and with Iowa Aging Program Instructions during fiscal years 2016-2017 of the Area Plan on Aging.

Further Assurance is given that:

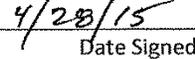
1. The Area Agency on Aging will provide access to and the right to examine all record books, papers or documents related to the Area Plan.

By signing below, the Chair of the Governing Body, and the Executive Director confirm that he or she read, reviewed, and fully understands the federal and state statutes, regulations, rules and procedures identified within the Compliance with Assurances and General Provisions and agrees to fully comply with all terms thereof.

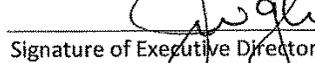
The Compliance with Assurances and General Provisions is hereby submitted for the FY'2016-2017 Area Plan to the Iowa Department on Aging for approval.

Print Name: James Choate, Vice President and CFO/COO, Kirkwood Community College


Signature of Chair, Governing Body


Date Signed

Print Name: Jill Gleason, Interim Director


Signature of Executive Director


Date Signed

38 Sec. 306 OLDER AMERICANS ACT OF 1965 (As Amended 2006)

Sec. 306, AREA PLANS

- 306(a) Each area agency on aging designated under section 305(a)(2)(A) shall, in order to be approved by the State agency, prepare and develop an area plan for a planning and service area for a two-, three-, or four-year period determined by the State agency, with such annual adjustments as may be necessary. Each such plan shall be based upon a uniform format for area plans within the State prepared in accordance with section 307(a)(1).
- 306(a)(2) Each area agency on aging shall provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services-
- 306(a)(2)(A) services associated with access to services (transportation, health services (including mental health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services);
- 306(a)(2)(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
- 306(a)(2)(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.
- 306(a)(4)(A)(i) (I) provide assurances that the area agency on aging will—
 (aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement; (bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and
 (II) include proposed methods to achieve the objectives described in items (aa) and (bb) of subclause (I);
- 306(a)(4)(A) (ii) provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—(I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by

the provider;(II) to the maximum extent feasible, provide services to low-income- minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and (III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and

- 306(a)(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each area agency on aging shall--(I) identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area; (II) describe the methods used to satisfy the service needs of such minority older individuals; and (III) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).
- 306(a)(4)(B)(i) Each area agency on aging shall provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on-- (I) older individuals residing in rural areas; (II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas); (IV) older individuals with severe disabilities;(V) older individuals with limited English proficiency; (VI) older individuals with Alzheimer’s disease and related disorders with neurological and A-3 organic brain dysfunction (and the caretakers of such individuals); and (VII) older individuals at risk for institutional placement; and
- 306(a)(4)(C) Each area agency on agency shall provide assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.
- 306(a)(5) Each area agency on aging shall 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.
- 306(a)(6)(F) Each area agency will: in coordination with the State agency and with the State agency responsible for mental health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the area agency on aging with mental health services

provided by community health centers and by other public agencies and nonprofit private organizations;

- 306(a)(9) Each area agency on aging shall provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 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 2000 in carrying out such a program under this title.
- 306(a)(11) Each area agency on aging shall provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including-
- 306(a)(11)(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;
- 306(a)(11)(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
- 306(a)(11)(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.
- 306(a)(13)(A) Each area agency on aging shall provide assurances that the area agency on aging will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.
- 306(a)(13)(B) Each area agency on aging shall provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State agency—
- 306(a)(13)(B)(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
- 306(a)(13)(B)(ii) the nature of such contract or such relationship.
- 306(a)(13)(C) Each area agency on aging shall provide assurances that the area agency will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.

- 306(a)(13)(D) Each area agency on aging shall provide assurances that the area agency will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.
- 306(a)(13)(E) Each area agency on aging shall provide assurances that the area agency will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.
- 306(a)(14) Each area agency on aging shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.
- 306(a)(15) provide assurances that funds received under this title will be used-
- 306(a)(15)(A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and
- 306(a)(15)(B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;

Section 4: Stakeholder / Public Input

Governing Body

Advisory Council

LLL Advisory Council

Public Hearing Documentation

Governing Body

Governing Body for The Heritage Agency, a department of Kirkwood Community College as a separate organizational unit within a multipurpose agency as allowed by OAA.

Chair

Name: Lois Bartelme
 Address: 946 23rd Ave Pl #2
 City & Zip Code: Coralville 52241
 County: District III – Johnson & Linn
 Phone: (319) 254-2398
 E-mail: loisbart@aol.com
 Term Expires: 2017

Vice-Chair

Name: James Mollenhauer
 Address: 3279 Stone Ct
 City & Zip Code: Marion 52302
 County: District VII – Linn & Jones
 Phone: (319) 431-4374
 E-mail: jamollenhauer@gmail.com
 Term Expires: 2017

Secretary/Secretary Treasurer

Name: Sheryl Cook (appointed by KCC)
 Address: Kirkwood Community College
 City & Zip Code: Cedar Rapids, Iowa 52404
 County: n/a
 Phone: 319-398-5500
 E-mail: scook@kirkwood.edu
 Term Expires: n/a

Treasurer (if separate officer)

Name: James Choate (appointed by KCC)
 Address: Kirkwood Community College
 City & Zip Code: Cedar Rapids, Iowa 52404
 County: n/a
 Phone: 319-398-7612
 E-mail: jim.choate@kirkwood.edu
 Term Expires: n/a

Other Members

Name: Karen Gorham
 Address: 608 W Washington Blvd
 City & Zip Code: Washington 52353
 County: District IV - Washington
 Phone: (319) 653-5352
 E-mail: kgorham@kirkwood.edu
 Term Expires: 2015

Name: Alan Jensen
 Address: 211 S College St
 City & Zip Code: North English 52316
 County: District V - Iowa & Johnson
 Phone: (319) 664-3634
 E-mail: ajensen@english-valleys.k12.ia.us
 Term Expires: 2015

Name: Tracy Pearson
 Address: 572 150th St
 City & Zip Code: Mechanicsville 52306
 County: District II - Cedar & Linn
 Phone: (319) 895-6224
 E-mail: tpearson@pearsoncpas.com
 Term Expires: 2015

Name: Marcia Rogers
 Address: 2201 Ridgeway Dr SE
 City & Zip Code: Cedar Rapids 52403
 County: District VIII - Linn
 Phone: (319) 395-9777
 E-mail: mrogers@smartlead.com
 Term Expires: 2015

Name: Keith Stamp
 Address: 17787 222nd St
 City & Zip Code: Monticello 52310
 County: District I - Jones
 Phone: (319) 465-5543
 E-mail: kstamp@gwaea.org
 Term Expires: 2017

Name: John Swanson
 Address: 1529 Bilgarie Ct NE
 City & Zip Code: Cedar Rapids 52402
 County: District IX - Linn
 Phone: (319) 363-4629
 E-mail: jwsltd@msn.com

Term Expires: 2017

Name: Joel Thys

Address: 2015 78th St

City & Zip Code: Blirstown 52209

County: District VI - Benton & Linn

Phone: (319) 454-6926

E-mail: jgthys@gmail.com

Term Expires: 2017

Advisory Council

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

Older Americans Act Code of Regulations, Subpart C, Sec. 1321.57(b) Composition of Council.

The council shall include individuals and representatives of community organizations who will help to enhance the leadership role of the area agency in developing community-based systems of services. The advisory council shall be made up of:

1. More than 50 percent older persons, including minority individuals who are participants or who are eligible to participate in programs under this part;
2. Representatives of older persons;
3. Representatives of health care provider organizations, including providers of veterans' health care (if appropriate);
4. Representatives of supportive services provider organizations;
5. Persons with leadership experience in the private and voluntary sectors;
6. Local elected officials; and
7. The general public.

If the agency's Advisory Council does not currently meet all 7 composition criteria listed above, provide the following information:

- 1) Composition criteria yet to be satisfied by the Council (# 1, 2, 3, 4, 5, 6, 7)

N/A - The Heritage Area Agency on Aging currently meets all seven composition criteria.

Advisory Council for The Heritage Agency

(Terms are one year from 7/1-6/30; can serve up to six consecutive years. Max out dates listed under Term Expires.)

Chair

Name: Nancy Lee Siebenmann
 Address: 336 Trailridge Rd SE
 City & Zip Code: Cedar Rapids 52403
 County: Linn
 Phone: (319) 365-4117
 E-mail: siebenmannN@usa.redcross.org
 Term Expires: 6/30/2017

Vice-Chair

Name: Evans Waller
 Address: 1403 W Broadway Box 371
 City & Zip Code: Apache Junction, AZ 85120
 County: Cedar
 Phone: (563) 893-2485
 E-mail: elwaller39@aol.com
 Term Expires: 6/30/2019

Secretary/Secretary Treasurer

Name: Linda Fisher (appointed)
 Address: 6301 Kirkwood Blvd SW
 City & Zip Code: Cedar Rapids 52406
 County: n/a
 Phone: (319) 398-5559
 E-mail: Linda.Fisher@kirkwood.edu
 Term Expires: n/a

Treasurer (if separate officer)

Name:
 Address:
 City & Zip Code:
 County:
 Phone:
 E-mail:
 Term Expires:

Other Members

Name: Sandra Bell
 Address: 5665 Cornell St SW
 City & Zip Code: Cedar Rapids 52404
 County: Linn
 Phone: (319) 560-1580
 E-mail: sdemowiz@aol.com
 Term Expires: 6/30/2016

Name: Susan Blodgett
 Address: 1556 S 1st Ave Ste A
 City & Zip Code: Iowa City 52240
 County: Johnson
 Phone: (319) 338-0534
 E-mail: sblodgett@elderservicesinc.com
 Term Expires: 6/30/2017

Name: Kice Brown
 Address: 203 W Pioneer Rd
 City & Zip Code: Lone Tree 52755
 County: Johnson
 Phone: (319) 629-5524
 E-mail: kice@iowatelecom.net
 Term Expires: 6/30/2017

Name: John Elliott
 Address: 6312 Quail Ridge Dr SW
 City & Zip Code: Cedar Rapids 52404
 County: Linn
 Phone: (319) 396-4762
 E-mail: elliottjnc@aol.com
 Term Expires: 6/30/2016

Name: Judy Fries
 Address: 1421 28th St SE
 City & Zip Code: Cedar Rapids 52403
 County: Linn
 Phone: (319) 365-3719
 E-mail: judyfries1@msn.com
 Term Expires: 6/30/2016

Name: Bonnie Malone
 Address: 2222 1st Ave NE #107
 City & Zip Code: Cedar Rapids 52402
 County: Linn
 Phone: (319) 363-9290
 E-mail: bjmalone@imonmail.com
 Term Expires: 6/30/2018

Name: Rex Shepherd
Address: 905 F Ave
City & Zip Code: Vinton 52349
County: Benton
Phone: (319) 472-4854
E-mail: none
Term Expires: 6/30/2019

Name: Shawn Zierke
Address: 2959 270th St NE
City & Zip Code: North Liberty 52317
County: Johnson
Phone: (319) 321-9287
E-mail: shawn.zierke@gmail.com
Term Expires: 6/30/2017

Name: Lisa Tallman
Address: 112 N Ford St
City & Zip Code: Anamosa 52205
County: Jones
Phone: (319) 462- 4484
E-mail: jcsd@co.jones.ia.us
Term Expires: 6/30/2019

Name: Robert Welsh
Address: 84 Penfro Dr
City & Zip Code: Iowa City 52246
County: Johnson
Phone: (319) 354-4618
E-mail: welshbob@aol.com
Term Expires: 6/30/2020

Name: Sallie Streib
Address: 614 Green Valley Ter SE
City & Zip Code: Cedar Rapids 52403
County: Linn
Phone: (319) 365-1020
E-mail: streibe@msn.com
Term Expires: 6/30/2020

Name: Jim Wasta
Address: 1039 Nelson Ct
City & Zip Code: Pleasanton, CA 94566
County: Linn
Phone: (319) 294-8484
E-mail: jmwasta@gmail.com
Term Expires: 6/30/2015

Name: Dianna Young
Address: 819 5th St SE
City & Zip Code: Cedar Rapids 52401
County: Linn
Phone: (319) 398-3574
E-mail: dyoung@horizonsfamily.org
Term Expires: 6/30/2015

LifeLong Links Advisory Council

The Heritage Agency

Chair

Name: John Brandt
Address: 1240 26th Ave Ct SW
City & Zip Code: Cedar Rapids 52404
County: Linn
Phone: (319) 892-5610
E-mail: John.brandt@linncounty.org
Term Expires: 6/30/2016

Secretary/Secretary Treasurer

Name: Eugenia Vavra
Address: 6301 Kirkwood Blvd SW
City & Zip Code: Cedar Rapids 52406
County: Linn
Phone: (319) 398-5559
E-mail: Eugenia.Vavra@kirkwood.edu
Term Expires: Ongoing

Other Members

Name: Nichole Baker-Jones
Address: 1240 26th Ave Ct SW
City & Zip Code: Cedar Rapids 52404
County: Linn
Phone: (319) 892-5773
E-mail: Nichole.baker-jones@linncounty.org
Term Expires: 12/31/2016

Name: Elizabeth Boenish
Address: 290 Blairs Ferry Rd Ste 100
City & Zip Code: Cedar Rapids 52402
County: Linn
Phone: (319) 369-7315
E-mail: Elizabeth.boenish@unitypoint.org
Term Expires: 12/31/2016

Name: Mandy Ellison
Address: 1080 Cardinal Dr
City & Zip Code: Marion 542302
County: Linn
Phone: (319) 373-3494
E-mail: mellison@abbe.org
Term Expires: 6/30/2016

Vice-Chair

Name:
Address:
City & Zip Code:
County:
Phone:
E-mail:
Term Expires:

Treasurer (if separate officer)

Name:
Address:
City & Zip Code:
County:
Phone:
E-mail:
Term Expires:

Name: Stephanie Beary
Address: 680 2nd St SE Ste 200
City & Zip Code: Cedar Rapids 52401
County: Linn
Phone: (319) 365-0487
E-mail: sbeary@arceci.org
Term Expires: 6/30/2016

Name: Jordan Cullen
Address: 1415 Blairs Ferry Rd Ste B
City & Zip Code: Marion 52302
County: Linn
Phone: (319) 363-2721
E-mail: jordan@homechoiceseniorcare.com
Term Expires: 12/31/2017

Name: Rusty Goins
Address: 1240 26th Ave Ct SW
City & Zip Code: Cedar Rapids 52404
County: Linn
Phone: (319) 892-5785
E-mail: Rusty.goins@linncounty.org
Term Expires: 12/31/2017

Name: Pat Giorgio
Address: 2204 Johnson Ave NW
City & Zip Code: Cedar Rapids 52404
County: Linn
Phone: (319) 363-8116
E-mail: pat@evergreenestates.biz
Term Expires: 12/31/2016

Name: Kathy Horan
Address: 317 7th Ave SE Ste 302
City & Zip Code: Cedar Rapids 52401
County: Linn
Phone: (319) 398-3644
E-mail: khoran@abbe.org
Term Expires: 12/31/2016

Name: Chris Juett
Address: 317 7th Ave SE Ste 401
City & Zip Code: Cedar Rapids 52401
County: Linn
Phone: (319) 398-5372
E-mail: cjuett@uweci.org
Term Expires: 6/30/2017

Name: Laura Martin
Address: 4403 1st Ave SE Ste 307
City & Zip Code: Cedar Rapids 52403
County: Linn
Phone: (319) 294-1599
E-mail: MartinL@sasc-dbq.org
Term Expires: 6/30/2016

Name: Kristine Karminski
Address: 317 7th Ave SE
City & Zip Code: Cedar Rapids 52401
County: Linn
Phone: (319) 261-0576
E-mail: kkarminski@abbe.org
Term Expires: 12/31/2016

Name: Melissa Pence
Address: 317 7th Ave
City & Zip Code: Cedar Rapids 52401
County: Linn
Phone: (319) 294-9699
E-mail: mpence@alz.org
Term Expires: 12/31/2017

Name: Tiffany Overath
Address: 2740 1st Ave NE
City & Zip Code: Cedar Rapids 52402
County: Linn
Phone: (319) 540-3058
E-mail: thines@mercy care.org
Term Expires: 12/31/201

Name: Lisa Nelson
Address: 200 Clive Dr SW
City & Zip Code: Cedar Rapids 52404
County: Linn
Phone: (319)396-7171
Email: lnelson@careinitiatives.org
Term Expires: 12/31/2017

Name: Jena Maloney
Address: 1026 A Ave NE
City & Zip Code: Cedar Rapids 52406
County: Linn
Phone: (319) 369-7305
E-mail: Jena.Maloney@unitypoint.org
Term Expires: 12/31/2016

Name: Melissa Morford
Address: 1527 S Gilbert St
City & Zip Code: Iowa City 52240
County: Johnson
Phone: (319) 466-7455
E-mail: melissa@biaia.org
Term Expires: 6/30/2017

Name: Joanna Shade
Address: 300 W May St
City & Zip Code: Marengo 52301
County: Iowa
Phone: (319) 642-8063
E-mail: jshade@marengohospital.org
Term Expires: 6/30/2016

Name: Angela Salvador
Address: 1556 S 1st Ave Ste B
City & Zip Code: Iowa City 52242
County: Johnson
Phone: (319) 338-3870
E-mail: angelas@access2independence.org
Term Expires: 12/31/2016

Name: Don Tyne
Address: 1240 26th Ave Ct SW
City & Zip Code: Cedar Rapids 52404
County: Linn
Phone: (319) 892-5162
E-mail: Donald.tyne@linncounty.org
Term Expires: 6/30/2017

Name: Carlos Vega
Address: 4444 1st Ave NE Ste 436
City & Zip Code: Cedar Rapids 52402
County: Linn
Phone: (319) 365-9474
E-mail: Carlos.vega@iwd.iowa.gov
Term Expires: 6/30/2016

Name: Chris Wolf
Address: 501 E Pioneer Rd
City & Zip Code: Lone Tree 52755
County: Johnson
Phone: (319) 629-4255
E-mail: lthccadmin@lthcc.com
Term Expires: 6/30/2017

Name: Allison Walker
Address: 1441 Blairs Ferry Rd NE
City & Zip Code: Cedar Rapids 52402
County: Linn
Phone: (319) 573-9246
E-mail: awalker@goodwillheartland.org
Term Expires: 6/30/2017

Public Hearing Documentation

The Heritage Agency held two public hearings for the Area Plan. They were held on February 9, 2015 in Coralville and on February 18, 2015 in Cedar Rapids. In addition to posting on our website, official Legal Notices were sent to all area newspapers and proof of publication and date were requested.

Copy of Notice:

NOTICE OF PUBLIC HEARING ON MULTI-YEAR AREA PLAN FOR BENTON, CEDAR, IOWA, JOHNSON, JONES, LINN AND WASHINGTON COUNTIES

To older persons, public officials and other interested parties, pursuant to Iowa Administrative Code Chapter 17 – 6.2(7)a.(2):

The public is notified and invited to attend a public hearing being conducted by The Heritage Area Agency on Aging regarding the Fiscal Years 2016 - 2017 Area Plan for the seven county region (Benton, Cedar, Iowa, Johnson, Jones, Linn and Washington counties).

The purpose of the public hearings are to gather input and comments from interested parties, including priority services. The public hearing agenda is the same for each opportunity. Public hearings will be conducted on:

Monday, February 9, 2015 from 3:00 – 4:00 p.m. at the Coralville Public Library, Meeting Room A, 1401 5th Street, Coralville, Iowa 52241.

Wednesday, February 18, 2015 from 3:00 – 4:00 p.m. at the Heritage Area Agency on Aging, Conference Room – Building 32A, Kirkwood Community College main campus, 6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404.

Agenda for 2/9/15 and 2/18/15:

1. Call to order
2. Purpose of hearing
3. Public Comments on Priority Services

Title IIIB Priority services are located within the service categories of Access, In-Home and Legal. The minimum percentage (%) of Title IIIB funding required to be expended within each category are: 1. Access (10%), which includes Assessment/Intervention, Information and Assistance, Assisted Transportation, Outreach, Case Management, and Transportation. 2. In-Home (5%), which includes Adult Day Care/Adult Day Health, Personal Care, Chore,

Reassurance/Visiting, Homemaker, and Respite. 3. Legal (3%,) which includes Legal Assistance.

- a. Written comments
 - b. Other comments
4. Services under consideration to be provided as Direct Services by Heritage
 5. Adjournment

The Area Plan will guide Heritage for the period of State Fiscal Years 2016 – 2017. Comments are also welcomed in the written form of choice or by utilizing a form provided on the Heritage website at www.heritageaaa.org. Written comments should be sent to The Heritage Area Agency on Aging, Attention Ingrid Wensel, Kirkwood Community College, 6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404. The public is invited and encouraged to provide feedback and attend one or both the public hearing opportunities and/or provide written comment.

Outlets in which notice was posted and dates:

Midland Times – January 9, 2015
Iowa City Press-Citizen – January 12, 2015
The Linn News-Letter – January 13, 2015
The Vinton Eagle – January 13, 2015
The Monticello Express – January 14, 2015
The Lone Tree Reporter – January 15, 2015
North Liberty Leader – January 15, 2015
The Riverside Current – January 15, 2015
The Wellman Advance – January 15, 2015
Solon Economist – January 15, 2015
Sun-News – January 15, 2015
The Tipton Conservative and Advertiser – January 15, 2015
West Branch Times – January 15, 2015

Copy of the agendas which includes the date and location of the hearing:

**Public Hearing
Area Plan Fiscal Year 2016-2017
Monday, February 9, 2015
3:00 – 4:00 p.m.**

Coralville Public Library, Meeting Room A
1401 5th Street, Coralville, Iowa 52241.

Agenda:

1. Call to order
2. Purpose of hearing
3. Public Comments on Priority Services

Title IIIB Priority services are located within the service categories of Access, In-Home and Legal. The minimum percentage (%) of Title IIIB funding required to be expended within each category are:

1. Access (10%), which includes Assessment/Intervention, Information and Assistance, Assisted Transportation, Outreach, Case Management, and Transportation.
2. In-Home (5%), which includes Adult Day Care/Adult Day Health, Personal Care, Chore, Reassurance/Visiting, Homemaker, and Respite.
3. Legal (3%,) which includes Legal Assistance.
 - a. Written comments
 - b. Other comments
4. Services under consideration to be provided as Direct Services by Heritage
5. Adjournment

**Public Hearing
Area Plan Fiscal Year 2016-2017
Wednesday, February 18, 2015
3:00 – 4:00 p.m.**

The Heritage Area Agency on Aging, Conference Room - Building 32A
Kirkwood Community College main campus
6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa

Agenda:

1. Call to order
2. Purpose of hearing
3. Public Comments on Priority Services

Title IIIB Priority services are located within the service categories of Access, In-Home and Legal. The minimum percentage (%) of Title IIIB funding required to be expended within each category are:

1. Access (10%), which includes Assessment/Intervention, Information and Assistance, Assisted Transportation, Outreach, Case Management, and Transportation.
2. In-Home (5%), which includes Adult Day Care/Adult Day Health, Personal Care, Chore, Reassurance/Visiting, Homemaker, and Respite.
3. Legal (3%,) which includes Legal Assistance.
 - a. Written comments
 - b. Other comments
4. Services under consideration to be provided as Direct Services by Heritage
5. Adjournment

Written summaries which also include list of attendees:

**Public Hearing for Fiscal Year 2016 – 2017 Area Plan
Hearing Minutes/Summary
Monday, February 9, 2015
3:00pm – 4:00pm
Coralville Public Library Meeting Room A, Coralville, Iowa**

Public comments in italics.

Present: Susan Blodgett, Ed Dunbar, Betty Kelly, Larry Kudej, Charlotte Walker, and Bob Welsh
Staff Present: Ingrid Wensel, Tala Nelson, Kellie Elliott-Kapparos, and Maude Torp

Handouts: Public Hearing Agenda, Public Input Form, and Services under consideration to be provided as Direct Services

Call to order at 3:10pm by Ingrid Wensel, Executive Director.

Ms. Wensel welcomed everyone to the public hearing. She mentioned there will be a second public hearing on February 18th in Cedar Rapids.

Ms. Wensel stated that the purpose of the public hearing is to gather input and comments from interested parties about Heritage's priority services.

Kellie Elliott-Kapparos shared that no written public comments have been submitted in advance. Ms. Wensel added that if after the meeting someone would like to add a comment they may email it or mail it and it will be incorporated.

Susan Blodgett addressed Personal Care and Homemaker. She stated that until last year they received funds to subsidize low-income individuals who need these cares. She would love to see more of those funds diverted to Johnson County.

Charlotte Walker asked if they were supposed to talk after a discussion ends.

Ms. Wensel replied no, the role of Heritage is just to listen to the comments and they will be recorded and incorporated into the Area Plan.

Ms. Walker then asked if it is ensured that the written comments will be incorporated as well as the comments made here.

Ms. Wensel responded that they will be.

Ms. Blodgett wanted to know if the services listed on the Services handout were going to be provided or subcontracted out.

Ms. Wensel said they will be the ones provided in-house.

Betty Kelly asked what the method for delivery would be for some of the programs. She also expressed that nutrition education is essential for people over 65. She is concerned about the methodology in how it is presented.

Ms. Walker had a question on what the 1 hour in parenthesis means on the Services handout.

Ms. Wensel stated that we have not gotten to that point yet, but we can move on to the next agenda item.

Ms. Blodgett stated that she feels it is critical to keep the legal and legal assistance. She noted how important that advice is under Elder Abuse.

Tala Nelson wanted to clarify that the list of taxonomy pages was just Heritage Direct Service in-house and not the complete list of taxonomies in the RFP packets.

Bob Welsh said he was unprepared but expressed that one of the problems under the Older Americans Act was the need to give preference to the frail and low income. He expressed that if we really serve the frail and low income persons, there will not be any services available for the others.

Ms. Walker responded that it was set up like that because those are the individuals who did not have the resources to get the necessary services.

Mr. Welsh commented that there isn't a determination of need. Mr. Welsh mentioned a study done by the University of Northern Iowa asking individuals what their needs are now and what they think their needs will be in 5 years and 10 years. He said mental health was not even discussed. He asked if Heritage needs to do a survey to identify what individuals real needs are. Mr. Welsh said he would say shelter, food, and medical attention are the most important. He noted that the Area Agency on Aging does little with housing, but shelter is important. He noted that there are more needs than resources available and asked how we prioritize. He mentioned that in the study chore services was number one and it is almost unlimited in terms of need.

Ms. Blodgett replied that although it is almost unlimited in need there is still a cost involved. She said we should look at what are people willing to commit to.

Larry Kudej wanted to know if the programs on the Services handout were programs Heritage is doing right now.

Ms. Wensel said the services in the Services handout are services that are under consideration to be provided as direct services. She clarified that Heritage is looking for feedback on what people think is the priority.

Mr. Kudej stated he thinks Heritage should look at the services that are already being provided in the community and look for holes to fill. Larry said people are not communicating and coordinating. He feels Heritage should be looking for services that are not already available.

Mr. Welsh said one of the roles Heritage could play is to help establish a non-profit in the rural counties that could provide these services. He explained rural counties do not really have services available, and that it is not because there is not a need, but because there is no one there to provide them.

Ms. Walker asked if the public hearing was publicized.

Ms. Wensel replied that it was in the local papers and posted on the website.

Mr. Welsh asked for a time schedule of the Area Plan.

Ms. Wensel said the plan needs to be submitted by May 1st

Mr. Welsh said the other important piece is advocacy. He commented that the Des Moines Register had an article that there is really no strong voice for older Iowan.

There was a general discussion on the main editorial while looking at the paper.

Ms. Walker expressed that she feels Heritage needs to do a better job of communicating. She said when things come up at the state level or the AAA there is not good communication with the task forces. She said she used to ask questions of Heritage and usually the response would be I don't know. She also mentioned that when things come up in the advisory meetings only a few people get the information.

Ms. Blodgett mentioned the struggle of the rural task forces getting members. She stated that unless you get people who are committed you're kind of stuck.

Ms. Walker commented that technology makes it unnecessary to travel.

Ms. Blodgett mentioned that the task forces meet in the county.

Ms. Kelly asked if the services on the Services handout will be prioritized. She mentioned she does not feel they are all equal. She feels Case Management is important, Disease Prevention, and Nutrition. She also noted the need for legal assistance.

Mr. Welsh mentioned that Information and Assistance is important but does not do any good without any available services.

Ms. Walker noted that caregivers under Elderly Waiver cannot take individuals in their car. Low income individuals, with no family members nearby, are stuck. In home care does not take care of transportation.

Ed Dunbar mentioned that some towns have “welcome wagons” to sell you on their town. He said it would be nice to have a welcome wagon for people who turn 65 to inform them of available services. Mr. Dunbar said that people need enough information to ask a question. If you do not have enough information you will not ask a question and you won’t get anything. It is a catch-22.

Ms. Blodgett mentioned that when Case Managers get CDAC workers into the home, 3 months later that organization is out of business. She would like a way to stabilize this, so the client does not need to go through multiple workers in a year.

Mr. Welsh said there are no real standards for in-home care and the necessary training. He mentioned they also get a low wage.

Ms. Wensel asked if there were any further comments.

Meeting was adjourned the meeting at 3:50pm.

(Special Note: After the public hearing, Heritage received an email from Ms. Walker. She wanted it noted that she did receive notice on the hearing and requested her comments be stricken from the record.)

**Public Hearing for Fiscal Year 2016 – 2017 Area Plan
Hearing Minutes/Summary
Wednesday, February 18, 2015
3:00pm – 4:00pm
Heritage Agency Conference Room 32A, Cedar Rapids, IA**

Public comments in italics.

Present: Sandy Bell, Evans Waller, and Nancylee Siebenmann

Staff Present: Ingrid Wensel, Tala Nelson, Kellie Elliott-Kapparos, Maude Torp, Eugenia Vavra, and Christine Smith

Handouts: Public Hearing Agenda, Public Input Form, and Services under consideration to be provided as Direct Services

Call to order at 3:05pm by Ingrid Wensel, Executive Director.

Ingrid Wensel welcomed everyone to the public hearing. Ms. Wensel stated that the purpose of the public hearing is to hear public comments on priority services and services under consideration to be provided as direct services by Heritage. Ms. Wensel stated that the role of

the Heritage staff is to listen and record the comments to be considered when developing the Area Plan. Ms. Wensel read the agenda out loud along with the list of services.

Evans Waller said he feels financial counseling is a high priority. Mr. Waller stated many elderly are concerned about how much money they have, where it is all going, and how they can spend it properly.

Nancylee Seibenmann stated she coordinates a program at her church and has had Heritage speakers come present. Ms. Seibenmann expressed that the more Heritage does this, the more the staff is noted and appreciated.

Sandy Bell said we need to make Heritage more known by reaching out to people. Ms. Bell noted that when people turn 65 they get many things in the mail but no information about where to go to get the information you need. She also said caregivers also need more information on available services.

Ms. Seibenmann said it makes a difference to have someone to talk to and answer questions.

Mr. Waller said he was anxious to hear what others had to say. He said he was hearing nice comments.

Ms. Seibenmann wanted to commend Heritage for doing a wonderful job with what it has to work with financially. She said we need to keep working to increase our resources so we can provide more services.

Mr. Waller said one of the bigger concerns he has is where the state is going to step in and provide a lot of the services we are already providing, and if they can do it cheaper than we can. Mr. Waller said he was worried about the potential competition.

Ms. Seibenmann said what actions Heritage takes, if they are high quality, is the best form of competition. We can prove ourselves by the quality of services we provide. She said sometimes government services are not as effective.

Mr. Waller stated he hopes it doesn't get too confusing and the elderly don't know which is the better service. He also stated we should be open-minded about working with them, even though we may be in competition. Mr. Waller expressed the need for an individual who can go out and find revenue and sources for Heritage.

Ms. Seibenmann said one of the areas we could look into is the nutrition education along with the Blue Zone. There might be an opportunity to partner.

Mr. Waller said we could express our point of view to the legislators before they go into session.

Ms. Seibenmann said Linn and Johnson County has done that before.

Mr. Waller said Cedar County has too, but we haven't had all of the counties do it as a group. As a group we could pool our thoughts together and be a stronger group.

Ms. Wensel thanked everyone for their comments.

Meeting was adjourned the meeting at 3:25pm.

Section 5: Area Profile - Staffing / Coverage

Table of Organization

Service Coverage by County

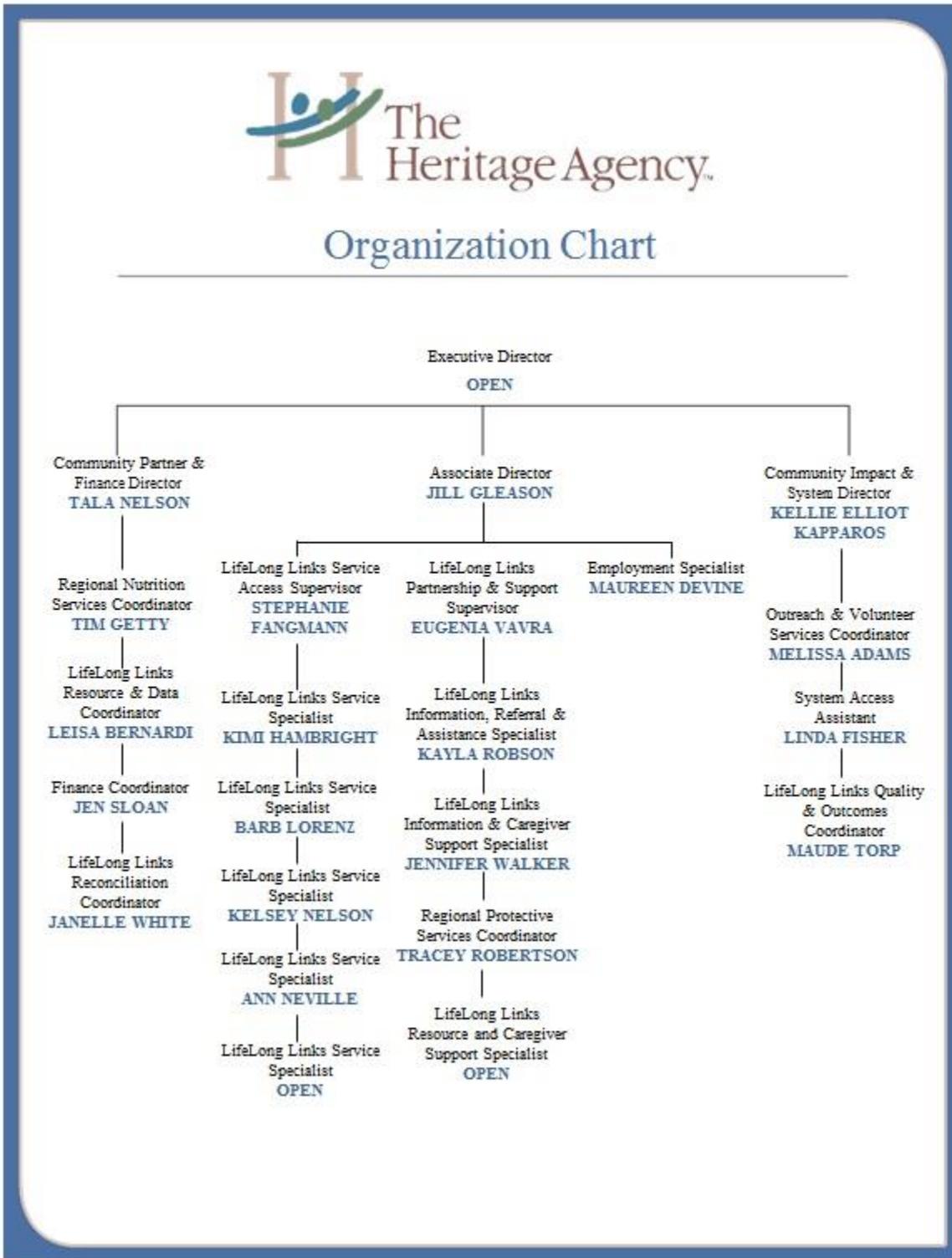
Nutrition Services and OAA Providers

Request for Direct Service Waiver

Service Planning and Data Reporting Performance Measures

Table of Organization

HAAA is considering applicants for two open positions: LLL Service Specialist and LLL Caregiver Support Specialist and anticipates selections soon. Additionally, Kirkwood Community College has just announced Mr. Joseph Sample as the new Executive Director (effective date TBD).



OAA Service Coverage by County

Heritage currently funds volunteer mileage reimbursement to volunteer transportation programs that are housed within four (4) of our seven (7) counties and will explore options in the other three counties. Those providers are: Aging Services (Linn County), Southeast Linn Community Center (Linn County), Benton County Volunteer Program (Benton County), Volunteer Services of Cedar County (Cedar), and Jones County Volunteer Center (Jones County). The service of transportation is provided through both Assisted Transportation and Transportation taxonomy definitions.

Heritage is able to coordinate regional service through collaboration and partnership despite limited funds. Most of our partner providers will transport within and outside of the county in which they are housed based on the individual need and available funds and volunteers.

Heritage currently funds volunteer mileage reimbursement to volunteer transportation programs that operate within two (2) of our seven (7) counties. Those providers that specifically are operating under Assisted Transportation beginning in Fiscal Year 2016 are Benton County Volunteer Program (Benton County) and Jones County Volunteer Center (Jones County). Benton County Volunteer Program and Jones County Volunteer Center require their volunteers to serve as an escort because it is a priority of their programs and makes operational sense due to the fact that they are providing long trips, typically outside of the county in which they are housed.

Mandatory & Other Services	Benton	Cedar	Iowa	Johnson	Jones	Linn	Washington
Case Management	X	X	X	X	X	X	X
Congregate Meals	X	X	X	X	X	X	X
Health Promotion	X	X	X	X	X	X	X
Home Delivered Meals	X	X	X	X	X	X	X
Information & Assistance	X	X	X	X	X	X	X
Legal Assistance	X	X	X	X	X	X	X
Nutrition Counseling	X	X	X	X	X	X	X
Nutrition Education	X	X	X	X	X	X	X
Options Counseling	X	X	X	X	X	X	X
Other Service(s)							
Adult Day Care/Adult Day Health	X	X	X	X	X	X	X
Evidence-Based Health Activities	X	X	X	X	X	X	X
Outreach	X	X	X	X	X	X	X
Transportation		X				X	

OAA Service Coverage by County

Heritage currently funds volunteer mileage reimbursement to volunteer transportation programs that are housed within four (4) of our seven (7) counties and will explore options in the other three counties. Those providers are: Aging Services (Linn County), Southeast Linn Community Center (Linn County), Benton County Volunteer Program (Benton County), Volunteer Services of Cedar County (Cedar), and Jones County Volunteer Center (Jones County). **The service of transportation is provided through both Assisted Transportation and Transportation taxonomy definitions. The chart below reflects both taxonomy definitions. It is important to note that the chart below reflects the county in which the service provider is based out of. Some of our five providers (under assisted transportation and/or transportation) will travel outside of their home county based on client need.**

Heritage is able to coordinate regional service through collaboration and partnership despite limited funds. Most of our partner providers will transport within and outside of the county in which they are housed based on the individual need and available funds and volunteers.

Heritage currently funds volunteer mileage reimbursement to volunteer transportation programs that operate within two (2) of our seven (7) counties. Those providers that specifically are operating under Assisted Transportation beginning in Fiscal Year 2016 are Benton County Volunteer Program (Benton County) and Jones County Volunteer Center (Jones County). Benton County Volunteer Program and Jones County Volunteer Center require their volunteers to serve as an escort because it is a priority of their programs and makes operational sense due to the fact that they are providing long trips, typically outside of the county in which they are housed.

Mandatory & Other Services	Benton	Cedar	Iowa	Johnson	Jones	Linn	Washington
Case Management	X	X	X	X	X	X	X
Congregate Meals	X	X	X	X	X	X	X
Health Promotion	X	X	X	X	X	X	X
Home Delivered Meals	X	X	X	X	X	X	X
Information & Assistance	X	X	X	X	X	X	X
Legal Assistance	X	X	X	X	X	X	X
Nutrition Counseling	X	X	X	X	X	X	X
Nutrition Education	X	X	X	X	X	X	X
Options Counseling	X	X	X	X	X	X	X
Other Service(s)							
Adult Day Care/Adult Day Health	X	X	X	X	X	X	X
Evidence-Based Health Activities	X	X	X	X	X	X	X
Outreach	X	X	X	X	X	X	X
Transportation	X	X			X	X	

Nutrition Services and OAA Providers

Please confirm that the information detailed below is current in the IAPRS for your agency.

Nutrition Services

Agency staff have reviewed the following Nutrition Services information entered into IAPRS and verify that the information is current as of 4/28/2015.

Nutrition Services information to be verified for accuracy includes:

- Location: Name, Street Address, City, Zip
- Frequency

Contracts with Service Providers of OAA Services

Agency staff have reviewed the Service Provider information entered into IAPRS and verify that the information is current as of 4/28/2015.

Aging Services, Inc.	Adult Day Care
Aging Services, Inc.	Case Management
Aging Services, Inc.	Chore
Aging Services, Inc.	Information & Assistance
Aging Services, Inc.	Nutrition Counseling
Aging Services, Inc.	Respite (in-home & facility based)
Aging Services, Inc.	Transportation
Benton County Volunteer Program	Assisted Transportation
Elder Services, Inc.	Information & Assistance
First Call for Help Iowa, Inc.	Information & Assistance
Jones County Volunteer Center	Assisted Transportation
Martha Quint	Legal Assistance
Pentacrest, Inc.	Adult Day Care
Southeast Linn Community Center	Transportation
Volunteer Services of Cedar County	Respite
Volunteer Services of Cedar County	Transportation
Wesley Community Services, Inc.	Adult Day Care
Wesley Community Services, Inc.	Respite

Nutrition Services and OAA Providers

Please confirm that the information detailed below is current in the IAPRS for your agency.

Nutrition Services

Agency staff have reviewed the following Nutrition Services information entered into IAPRS and verify that the information is current as of 5/20/15.

Nutrition Services information to be verified for accuracy includes:

- Location: Name, Street Address, City, Zip
- Frequency

Contracts with Service Providers of OAA Services

Agency staff have reviewed the Service Provider information entered into IAPRS and verify that the information is current as of 5/20/15.

Aging Services, Inc.	Adult Day Care
Aging Services, Inc.	Case Management
Aging Services, Inc.	Chore
Aging Services, Inc.	Information & Assistance
Aging Services, Inc.	Nutrition Counseling
Aging Services, Inc.	Respite (in-home & facility based)
Aging Services, Inc.	Transportation
Benton County Volunteer Program	Assisted Transportation
Elder Services, Inc.	Information & Assistance
First Call for Help Iowa, Inc.	Information & Assistance
Jones County Volunteer Center	Assisted Transportation
Martha Quint	Legal Assistance
Pentacrest, Inc.	Adult Day Care
Southeast Linn Community Center	Transportation
Volunteer Services of Cedar County	Respite
Volunteer Services of Cedar County	Transportation
Wesley Community Services, Inc.	Adult Day Care
Wesley Community Services, Inc.	Respite

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Evidence Based Health Activities.

1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

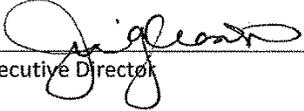
- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
 - b. Such service(s) are directly related to area agency on aging administrative functions; or
 - c. The service(s) can be provided more economically, and with comparable quality, by the area agency on aging.
2. Provide a detailed justification for the waiver request.
 - The justification should include such factors as a cost analysis or needs assessment, the area agency's efforts to secure services through a competitive solicitation process such as a request for proposal (RFP).
 - If the service is considered part of administration activity, describe the rationale for considering it part of the administrative activity and the authority for that rationale.

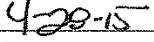
Heritage has strong, well known, Evidenced Based Health Activities & Promotion programs. Two nationally recognized programs are offered through Heritage, Chronic Disease Self-Management Program (CDSMP) and Matter of Balance (MOB). These two programs are the highest-level criteria to meet the fiscal year 2012 requirements for Title IIID funding activities. Continued implementation of these programs involves several strategies. Program implementation is through the full-time position of Volunteer and Outreach Coordinator. This position coordinates all program activity, reporting, participant and volunteer leader recruitment, partner communication and seeking continued program sustainability. This position is a Master Trainer for CDSMP and MOB. Mercy Medical Center in Cedar Rapids continues to support and coordinate the CDSMP region wide in partnership with Heritage. Heritage continues to be the evidenced based data collector and in-puter for several other Area Agencies on Aging in Iowa, Mercy Medical Center, as well as public health departments in and out of the Heritage region. Without Heritage's comprehensive support, there would be unmet needs.

Heritage did not open this taxonomy up for RFP consideration due to the current partnerships and activities. This was discussed and on the agenda for the Area Plan Public Hearings.

FY 2016 – 2017 Area Plan on Aging

Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s), per SFY 2016-2017 Area Plan on Aging instructions.


Signature, Executive Director


Date

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Health Promotion and Disease Prevention.

- 1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
 - b. Such service(s) are directly related to area agency on aging administrative functions; or
 - c. The service(s) can be provided more economically, and with comparable quality, by the area agency on aging.
- 2. Provide a detailed justification for the waiver request.
 - The justification should include such factors as a cost analysis or needs assessment, the area agency's efforts to secure services through a competitive solicitation process such as a request for proposal (RFP).
 - If the service is considered part of administration activity, describe the rationale for considering it part of the administrative activity and the authority for that rationale.

Evidenced Based Health Activities are listed under this taxonomy definition. Heritage staff recently was trained as a Stepping On class leader under the lead agency of University of Iowa – Centers for Disability and Development. We are also involved in health related activities with the Blue Zones Project, i-walk and more. Additionally, Heritage regional senior congregate dining sites often offer health screenings, educational speakers (Heritage staff and/or other community partners), flu shots clinics and other health promotion activities. We also provide health information through all of our partners, such as Mercy Medical Center, and in more casual formats like newsletters and educational pieces.

Heritage did not open this taxonomy up for RFP consideration due to the current partnerships and activities. This was discussed and on the agenda for the Area Plan Public Hearings.

Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s), per SFY 2016-2017 Area Plan on Aging instructions.


Signature, Executive Director

4-28-15
Date

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Material Aid.

1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
 - b. Such service(s) are directly related to area agency on aging administrative functions; or
 - c. The service(s) can be provided more economically, and with comparable quality, by the area agency on aging.
2. Provide a detailed justification for the waiver request.
 - The justification should include such factors as a cost analysis or needs assessment, the area agency's efforts to secure services through a competitive solicitation process such as a request for proposal (RFP).
 - If the service is considered part of administration activity, describe the rationale for considering it part of the administrative activity and the authority for that rationale.

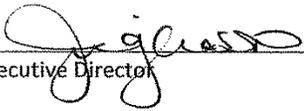
The Heritage Agency works with many clients that have unmet needs that require interventions that would fall under the taxonomy of Material Aid. Heritage will utilize funds associated under this taxonomy to meet those needs and in accordance with an annual budget. There are many circumstances where a consumer needs aid in the form of Emergency Response Systems, equipment to ensure safety in the home, or other unmet needs that if not filled, would result in an unsafe living environment and/or premature institutionalization.

When such needs are identified, such funds are accessed via Heritage's Team which includes Case Managers, Options Counselors, I/R & A/Caregiver Specialists, Elder Abuse Staff and Fiscal Team members. Each request is carefully considered for maximum impact and appropriateness.

Heritage did not open this taxonomy up for RFP consideration due to the nature of the service and current internal systems to address unmet needs in our region. This was discussed and on the agenda for the Area Plan Public Hearings.

FY 2016 – 2017 Area Plan on Aging

Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s), per SFY 2016-2017 Area Plan on Aging instructions.


Signature, Executive Director

4-28-15
Date

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Nutrition Education.

- 1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
 - b. Such service(s) are directly related to area agency on aging administrative functions; or
 - c. The service(s) can be provided more economically, and with comparable quality, by the area agency on aging.
- 2. Provide a detailed justification for the waiver request.
 - The justification should include such factors as a cost analysis or needs assessment, the area agency's efforts to secure services through a competitive solicitation process such as a request for proposal (RFP).
 - If the service is considered part of administration activity, describe the rationale for considering it part of the administrative activity and the authority for that rationale.

The Heritage Agency provides Nutrition Education directly through the distribution of informational pieces and speaking engagements on the importance of the regional senior nutrition program and other programs such as the Food Insecurity Grant (FIG) and Fresh Conversations. Heritage works in partnership with our nutrition subcontractors to distribute information directly to clients also. Community education and awareness is a key function of the Regional Nutrition Services Coordinator.

Heritage did not open this taxonomy up for RFP consideration due to the current partnerships and activities. Nutrition Education is tied to nutrition subcontractors contractual agreements with Heritage. This was discussed and on the agenda for the Area Plan Public Hearings.

Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s), per SFY 2016-2017 Area Plan on Aging instructions.


4/28/15

 Signature, Executive Director Date

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Nutrition Education.

1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
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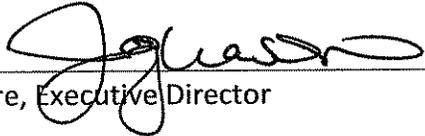
The Heritage Agency provides Nutrition Education directly through the distribution of informational pieces and speaking engagements on the importance of the regional senior nutrition program and other programs such Fresh Conversations.

Heritage works in partnership with our nutrition subcontractors to distribute information directly to clients also. Community education and awareness is a key function of the Regional Nutrition Services Coordinator. Heritage coordinates and provides educational materials that are developed by qualified professionals to all dining site locations and home delivered meal participants. The educational pieces are presented at least monthly to the congregate meal participants at the dining site on the designated day. They are also discussed by the home delivered meal driver with each client at the time of delivery. Topics vary and may include the importance of calcium, food temperature safety, exercise tips and much more.

Heritage did not open this taxonomy up for RFP consideration due to the current partnerships and activities. Nutrition Education is tied to nutrition subcontractors

contractual agreements with Heritage. This was discussed and on the agenda for the Area Plan Public Hearings.

Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s), per SFY 2016-2017 Area Plan on Aging instructions.

 5-21-15
Signature, Executive Director Date

Revised page 67 – 67a

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Options Counseling (general aging population and family caregiver/grandparent-older relative caregiver).

1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
 - b. Such service(s) are directly related to area agency on aging administrative functions; or
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 - The justification should include such factors as a cost analysis or needs assessment, the area agency's efforts to secure services through a competitive solicitation process such as a request for proposal (RFP).
 - If the service is considered part of administration activity, describe the rationale for considering it part of the administrative activity and the authority for that rationale.

The Heritage Agency recognizes the future of our Aging and Disability Resource Center is to actively expand LifeLong Links services and build community partnerships to address the needs of our target populations in many areas of service, in particular Options Counseling.

Since the Area Agencies on Aging are the only source of Options Counseling at this time, we are working to expand our capacity to assist with the anticipated increase of Options Counseling Referrals through our LifeLong Links system. We will continue to explore developing community partnerships to deliver services and best meet the needs within our communities. Heritage's trained and state approved Options Counselors provide consumer driven decision support in key decision-making time, and provides referrals and linkages to care coordinated services. They build action plans based on the client's needs, values and preferences. Options Counselors are also vital to providing education and outreach to consumers, caregivers, area agencies, organizations, and advocacy groups. Because the service of Options Counselors is the link to building a seamless service delivery system with no wrong door, Heritage will continue to develop this implementation strategy.

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Training and Education.

1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
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2. Provide a detailed justification for the waiver request.
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 - If the service is considered part of administration activity, describe the rationale for considering it part of the administrative activity and the authority for that rationale.

Training and Education is expansive throughout the Heritage region and is provided by numerous Heritage staff. Services under this taxonomy provided by Heritage currently include County Task Forces on Aging, LifeLong Links/ADRC Specific Trainings, Elder Abuse Trainings, Panel Discussions, Regional Meetings, Provider Meetings, Elder Abuse Coalition, and specified topics of interested for volunteer leadership. This includes educating providers about needs, trends and consumer unmet needs.

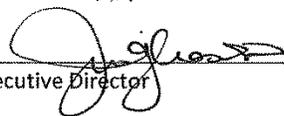
Heritage actively provides learning opportunities to our volunteer leadership, internal staff, external partners and the public. One example of excellent Training and Education is in relation to the Case Management Program. Monthly training has been conducted on a monthly basis to our internal and external Case Managers. Case Managers are trained on a variety of topics including program policies and procedures, Iowa Administrative Rules, program developments and trends, and more. If topics extend beyond the CMPFE team, staff from the Aging and Disability Resource Center, Elder Abuse Intervention program, and Information and Assistance and Caregiver Support programs are also invited to attend. They also hold monthly informational sessions allowing local providers of services to present information on their services.

Heritage staff members will continue to represent the agency when invited to speak to college classes, civic groups, provider groups, and more. Topics will include general agency information, disease specific information, elder abuse, Medicaid, Medicare, available long term services and supports, nutrition, caregiver information, and more. Heritage will also attend health fairs, issue press releases and hold advocacy forums to educate the public on keep issues.

Heritage staff has and will continue offer Training and Education to students from nearby colleges and universities. Heritage will host practicum students/interns from Kirkwood Community College, The University of Iowa, Mount Mercy University, The University of Northern Iowa, and other nearby schools as matches are identified. Heritage partners with Kirkwood Community College as a clinical rotation sight for nursing students in the "Community Nursing" portion of their rotation. Nursing students shadow a Case Manager for two days. One day the student shadows a Case Manager working in rural county and the other day they shadow a Case Manager working in a more urban setting.

Heritage did not open this taxonomy up for RFP consideration due to the current partnerships and activities. This was discussed and on the agenda for the Area Plan Public Hearings.

Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s), per SFY 2016-2017 Area Plan on Aging instructions.



Signature, Executive Director

4-28-15

Date

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Counseling (Family Caregiver, Title III E).

1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
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2. Provide a detailed justification for the waiver request.
 - The justification should include such factors as a cost analysis or needs assessment, the area agency's efforts to secure services through a competitive solicitation process such as a request for proposal (RFP).
 - If the service is considered part of administration activity, describe the rationale for considering it part of the administrative activity and the authority for that rationale.

Caregiver Counseling is a natural fit under the LifeLong Links service umbrella. Counseling will be provided by telephone or in person through LifeLong Links to better address the needs of our target populations. Emotional support is a critical need and can be addressed by our trained I/R & A/Caregiver Specialists. Through Counseling, Caregivers can receive the emotional support they need in addition to accessing a seamless service delivery system with no wrong door.

Heritage will also have a staff person trained in Powerful Tools for Caregivers and begin to offer classes in the region in addition to other individual/family caregiver training opportunities.

Heritage did not open this taxonomy up for RFP consideration due to the current method of service delivery under this taxonomy definition. This was discussed and on the agenda for the Area Plan Public Hearings.

Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s), per SFY 2016-2017 Area Plan on Aging instructions.

FY 2016 – 2017 Area Plan on Aging


Signature, Executive Director

4-2015
Date

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Self-Directed Care (Caregiver, Title IIIE).

1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
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 - c. The service(s) can be provided more economically, and with comparable quality, by the area agency on aging.
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 - The justification should include such factors as a cost analysis or needs assessment, the area agency's efforts to secure services through a competitive solicitation process such as a request for proposal (RFP).
 - If the service is considered part of administration activity, describe the rationale for considering it part of the administrative activity and the authority for that rationale.

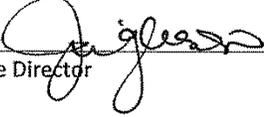
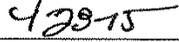
Heritage will provide services under the taxonomy of Self-Directed Care with the intent to assist caregivers in meeting their individually defined needs by empowering the family caregivers identified as caring for a particularly high risk older adult(s), experiencing an extreme level of caregiver stress, or other circumstance that would put the care recipient at undue risk for premature institutionalization. Services would be funded by Heritage based on the caregivers identified needs and in accordance with an annual budget.

When such needs are identified, such funds are accessed via Heritage's Team which includes Case Managers, Options Counselors, I/R & A/Caregiver Specialists, Elder Abuse Staff and Fiscal Team members. Each request is carefully considered for maximum impact and appropriateness.

Heritage did not open this taxonomy up for RFP consideration due to the nature of the service and current internal systems to address unmet needs in our region. This was discussed and on the agenda for the Area Plan Public Hearings.

Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s), per SFY 2016-2017 Area Plan on Aging instructions.

FY 2016 – 2017 Area Plan on Aging

 
Signature, Executive Director Date

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Supplemental Services (Caregiver, Title III E).

1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
 - b. Such service(s) are directly related to area agency on aging administrative functions; or
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 - The justification should include such factors as a cost analysis or needs assessment, the area agency's efforts to secure services through a competitive solicitation process such as a request for proposal (RFP).
 - If the service is considered part of administration activity, describe the rationale for considering it part of the administrative activity and the authority for that rationale.

Heritage will utilize funds associated under this taxonomy to meet those needs and in accordance with an annual budget. There are many circumstances where a caregiver's needs must be met to empower this individual to continue to care for their loved one successfully. This could include caregiver tools or equipment to ensure safety in the home, or other unmet needs that if not filled, would result in an unsafe living environment and/or premature institutionalization.

When such needs are identified, such funds are accessed via Heritage's Team which includes Case Managers, Options Counselors, I/R & A/Caregiver Specialists, Elder Abuse Staff and Fiscal Team members. Each request is carefully considered for maximum impact and appropriateness.

Heritage did not open this taxonomy up for RFP consideration due to the nature of the service and current internal systems to address unmet needs in our region. This was discussed and on the agenda for the Area Plan Public Hearings.

Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s), per SFY 2016-2017 Area Plan on Aging instructions.

FY 2016 – 2017 Area Plan on Aging



Signature, Executive Director

4/28/15

Date

Request for Direct Service Waiver

The service for which the Heritage Agency seeks a Direct Service Waiver for SFY 2016-2017 is: Homemaker.

1. Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

Please select the basis for which the waiver request is required. (You may select more than one).

- a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
 - b. Such service(s) are directly related to area agency on aging administrative functions; or
 - c. The service(s) can be provided more economically, and with comparable quality, by the area agency on aging.
2. Provide a detailed justification for the waiver request.
 - The justification should include such factors as a cost analysis or needs assessment, the area agency's efforts to secure services through a competitive solicitation process such as a request for proposal (RFP).
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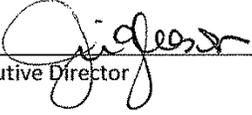
The Heritage Agency works with many clients that have unmet needs that require interventions that would fall under the taxonomy of Homemaker. Heritage will utilize funds associated under this taxonomy to meet those needs and in accordance with an annual budget. There are many circumstances where a consumer needs aid in the form of an instrumental activity of daily living, such as money management. Depending on the circumstance, Heritage will elect to provide this service directly or purchase such services on behalf of the consumer. The intent is to facilitate services under this taxonomy to ensure safety in the home and premature institutionalization.

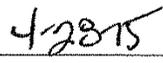
When such needs are identified, such services are accessed via Heritage's Team which includes Case Managers, Options Counselors, Information & Assistance/Caregiver Specialists, Elder Abuse Staff and Fiscal Team members. Each request is carefully considered for maximum impact and appropriateness.

Heritage did not open this taxonomy up for RFP consideration due to the nature of the service and current internal systems to address unmet needs in our region. This was discussed and on the agenda for the Area Plan Public Hearings.

FY 2016 – 2017 Area Plan on Aging

Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s), per SFY 2016-2017 Area Plan on Aging instructions.


Signature, Executive Director


Date

The Heritage Area Agency on Aging - Area Plan Corrections/Responses

Please complete required actions and respond to requests on issues identified for focus areas noted below. Responses are due by 4:00 pm on May 27, 2015. Please send responses by e-mail to Shan Sasser at Shan.Sasser@iowa.gov.

Strategy – Projections Questions

Goal 1 Focus Area: LifeLong Links

1. Please explain discrepancy in strategies to expand LifeLong Links activities and decrease in consumer and service unit projections as noted below.

Service	Total Units FY15	Total Clients FY15	Total Units FY16	Total Clients FY16	% change Units	% change clients	FY15 – total expenditure	FY16 - total expenditure	% change total expenditure
Information and Assistance	7,900	7,324	5,410	4,328	-32%	-41%	\$581,802	\$250,664	-57%
Access Assistance for Caregivers	1,000	1,000	693	521	-31%	-49%	\$50,534	\$28,655	-43%
Options Counseling	1,920	640	1,145	229	-40%	-64%	\$197,724	\$168,664	-15%
Options Counseling for Caregivers	0	0	325	65	-	-	0	\$20,264	-

Response:

Heritage submitted a revised FY 2015 Area Plan Budget on 4/17/2015 which impacts the following responses. Form 3A-1 was not updated to reflect YTD actual units.

Information & Assistance -Heritage apologizes that \$16,524 of Local Public Funds and \$436,931 Other Local Cash was listed under Nutrition Education; it should have been under the taxonomy Information & Assistance. The correction was made in IAFRS. FY 2016 Information & Assistance expenditures now total \$704,119. FY 2015 revised expenditures for Information & Assistance totals \$617,822. FY 2016 expenditures are 13.96% higher than FY



2015 revised expenditures. FY 2016 Information & Assistance units are considerably lower in as Information & Assistance will now be a registered service and unduplicated client counts will be tracked. Heritage is implementing a systems change requiring all providers to have a system in place to track unduplicated client count for all Heritage funded programs. In the past, we only required this for registered service funded contracts. YTD, Heritage Information & Assistance aggregate client count is 6,358. FY 2015 Heritage's Information & Assistance provider contract is grant funded. Heritage is considering negotiating a purchase of service contract now that Information & Assistance is a registered service and our provider is concerned about collecting all the required data for the Aging & Disability Network Consumer Intake Form. Our provider believes that only a portion of previously projected units will be deemed "reportable" to Heritage in FY 2016 as not all clients are willing to provide their information.

Access Assistance for Caregivers – The FY 2015 revised budgeted expenditures total \$55,007. FY 2016 expenditures are 47.91% less than FY 2015. In FY 2016, the taxonomy changed and all Respite services are funded only with Caregiver dollars. This change required Heritage Respite contracts to be funded with Title III E dollars to maintain the level of service of this year. Ultimately, this change decreased the FY 2016 amount of funding available to be allocated to the position of Lifelong Links Resource and Caregiver Support Specialist. In previous years, Respite contracts were funded with Title III E, Title III B and ESG dollars. This taxonomy change will result in a decrease of Access Assistance expenditures for FY 2016 due to salary allocation explanation as described above. FY 2016 projected units are 693; FY 2015 YTD Access Assistance units are 520. Heritage believes the FY 2016 units to be an accurate projection as the Lifelong Links Resource and Caregiver Support Specialist position was recently filled despite the reduction in Access Assistance expenditures for FY 2016. This position was vacant for 6 months of FY 2015.

Options Counseling – FY 2015 revised expenditures total \$97,460. FY 2016 expenditures are 73.06% greater than FY 2015. FY 2015 actual YTD units total 701. Heritage believes that the FY 2016 projection of 1,145 to be an actual figure with the addition of the currently open Options Counseling position.

Options Counseling for Caregivers – Heritage is dedicating a portion of the new Options Counselor position to the Caregiver program.

Goal 2 Focus Area: Transportation

1. Please explain need to reduce assisted transportation service units and expenditures.

2. Agency is projecting a much lower number of transportation consumers to be served in SFY16. Please explain.

Service	Total Units FY15	Total Clients FY15	Total Units FY16	Total Clients FY16	% change Units	% change clients	FY15 – total expenditure	FY16 - total expenditure	% change total expenditure
Assisted Transport.	2,066	169	1,050	175	-49%	4%	\$202,934	\$142,533	-30%
Transport.	4,000	1,425	6,114	279	53%	-80%	\$102,379	\$117,114	14%

Response #1:

One of Heritage’s FY 2015 Assisted Transportation providers submitted a FY 2016 RFP for Transportation as they believed this would be the most appropriate taxonomy for their FY 2016 program structure. Heritage believes the FY 2016 client and unit projection to be accurate given the taxonomy change mentioned above. FY 2015 YTD Assisted Transportation clients total 131. Heritage believes the FY 2016 unit and client projection to be accurate. Heritage has contracted additional dollars to Assisted Transportation providers for FY 2016.

Response #2:

FY 2015 YTD Transportation clients total 166. Heritage believes the FY 2016 client and unit projection to be accurate given the taxonomy change mentioned above. Heritage believes the FY 2016 unit and client projection to be accurate. Heritage has contracted additional dollars to Transportation providers for FY 2016.

Goal 2 Focus Area: Caregiver: Family & Grandparent-Older Relative

1. Agency narrative indicated that caregiver home delivered meals will be offered; however, not included in service & budget projections. Please explain.
2. Agency narrative indicated use of self-directed care as a strategy to address caregiver needs; however, agency projected a significant decrease in service projections for this service. Please explain.
3. Agency projected a significant increase in caregiver Information Service units with a decrease in expenditures. Please explain.

Service	Total Units FY15	Total Clients FY15	Total Units FY16	Total Clients FY16	% change Units	% change clients	FY15 – total expenditure	FY16 - total expenditure	% change total expenditure
Access Assistance	1,000	1,000	693	521	-31%	-49%	\$50,534	\$28,655	-43%



SFY 2016-2017 Area Plan on Aging

Service	Total Units FY15	Total Clients FY15	Total Units FY16	Total Clients FY16	% change Units	% change clients	FY15 – total expenditure	FY16 - total expenditure	% change total expenditure
Counseling	70	70	50	50	-29%	-29%	\$11,813	\$12,963	10%
Home Delivered Meal (Caregiver)	0	0	0	0	-	-	0	0	-
Options Counseling (Caregivers)	0	0	325	65	-	-	0	\$20,264	-
Respite	6,544	47	14,669	117	124%	149%	\$301,822	\$406,178	35%
Information Services	39	1,349	48	6,935	23%	414%	\$23,606	\$22,475	-5%
Self-Directed Care	35	35	3	3	-91%	-91%	\$4,186	\$6,028	44%
Suppl. Srvc	17	17	3	3	-82%	-82%	\$4,186	\$6,029	44%

Response #1:

The sentence listed on page 15, point #2 Supplemental Services of “Home delivered meals provided as Supplemental Services shall be reported as Home Delivered Meals and meet the Home delivered Meal definition” was included in error. Staff unintentionally copied this language from the taxonomy definition and did not remove it. Heritage apologizes that this typo was not caught in our proof reading process and appreciates the opportunity to make this correction. Heritage will not be offering home delivered meals through caregiver funds.

Response #2:

Staff turnover caused a decrease in ability to identify caregivers that would not be served in a more comprehensive manner through other means. Heritage hopes to better identify caregivers with the new staff person beginning in FY 2016, but experience has been that other interventions such as case management have been of more benefit to families in the past. Heritage will be continuously re-evaluating this strategy and the impact managed care may have. FY 2015 YTD Self-Directed Care clients total 2. Heritage believes that the FY 2016 projected clients may be conservative albeit more accurate based on current consumer usage. Heritage believes the expenditures to be correct now that this position will be adequately staffed for FY 2016.

Response #3:

The service of Caregiver Information Services are for activities directed to large audiences of current or potential caregivers. Our efforts in this area are planned to expand in Fiscal Year

2016 with the hiring of the staff person mentioned above. We plan to have a greater focus on outreach, social media, education and events. One example is in regards to our Caregiver Wellness Day. This event has been successful in the past, but in this coming year, we have increased committee and community involvement by partnering with AARP and have a greater level of speakers and presentations planned. FY 2015 YTD units total 36 activities and total 5,201 clients. Heritage believes the FY 2016 client and unit projection to be accurate. The slight decrease in expenditures is due to Title III E revenues being directed to provider Respite contracts mentioned above.

Goal 3 Focus Area: Nutrition and Food Security Project

1. Agency described plan to focus on marketing home delivered meal and congregate meal program; however, FY2016 congregate meal consumer, service unit, and expenditure projections and home delivered meal consumer and service unit projection show a decrease from previous year. Please explain.
2. The number of Nutrition Education consumers typically does not exceed the number of Congregate Meal consumers. Please explain.
3. Please explain significant increase in Nutrition Education expenditures for SFY2016 (\$436,931 from Other Local Cash).

Service	Total Units FY15	Total Clients FY15	Total Units FY16	Total Clients FY16	% change Units	% change clients	FY15 – total expenditure	FY16 - total expenditure	% change total expenditure
Congregate Meal	90,287	1,996	79,907	1,376	-12%	-31%	\$750,128	\$579,311	-23%
Home Delivered Meal	256,971	1,765	267,514	1,573	-11%	-21%	\$1,844,537	\$1,842,976	-
Nutrition Counseling	34	34	30	30	-12%	-12%	\$4,600	\$5,775	26%
Nutrition Education	14,000	14,000	12,555	2,025	-10%	-85%	\$44,239	\$490,633	1009%

Response #1:

SFY 2016 Strategies discussed marketing the congregate and home delivered meal program in relation to the F.I.G. program. The narrative referenced Heritage’s commitment to the expansion of the F.I.G. program which is dependent upon continued legislative support and FY 2016 F.I.G. funding. Heritage continues to see the shifting trend from congregate to home delivered meals. Heritage anticipates the trend to continue into FY 2016. Heritage is contracting 163 more meals, and \$16,757 additional dollars to nutrition providers in FY



2016. The additional decrease in FY 2016 is in provider's match (non-IDA resources). FY 2015 YTD clients served for congregate total 1,328 and home delivered total 1,444. Heritage believes the FY 2016 projections to be accurate.

Response #2:

Heritage coordinates and provides educational materials that are developed by qualified professionals to all dining site locations and home delivered meal participants. The educational pieces are presented at least monthly to the congregate meal participants at the dining site on the designated day. They are also discussed by the home delivered meal driver with each client at the time of delivery. Topics vary and may include the importance of calcium, food temperature safety, exercise tips and much more.

Response #3:

Heritage apologizes that \$16,524 of Local Public Funds and \$436,931 Other Local Cash was listed under Nutrition Education; it should have been under the taxonomy Information & Assistance. The correction was made in IAFRS. FY 2016 revised Nutrition Education expenditures total \$37,178, a 31.02% increase from FY 2015 revised Nutrition Education expenditures of \$28,375. FY 2015 revised form 3A-1 projects clients served to be 2,700. FY 2015 YTD Nutrition Education units total 9,712 and unduplicated clients total 1,971. Heritage believes the FY 2016 unit and client projection to be accurate.

Goal 4 Focus Area: Elder Abuse Prevention and Awareness

Agency projects 455 consumers will receive EAPA training and education; however a variety of methods were utilized in FY15 as described in the plan. Please explain low EAPA consumer projection for this service.

Response:

Through March 2015, our Regional Protective Services Coordinator has reported 490 unduplicated consumers served on our internal program unit report for Training and Education. Heritage believes that although the FY 2016 figure may be conservative it is not unrealistic as her time will be more dedicated to providing direct service to rural clients under the taxonomies of EAPAP Consultation and EAPAP Assessment and Intervention.

Form 3A-1 Corrections

Unit Projections

Material Aid. The unit projections for Material Aid *may* not align with the unit measure. If your agency staff is likely to have more than one contact with a consumer during the provision of the material aid service, then unit projections should be greater than consumer projections. (For example, a consumer needs a ramp and agency staff have three separate conversations about count this as 1 consumer and 3 units of service.)

Outreach. The unit projections for Outreach *may* not align with the unit measure. If your agency staff is likely to have more than one contact with a consumer during the provision of the Outreach service, then unit projections should be greater than consumer projections.

Required Action:

1. Verify the Material Aid and Outreach unit measures. Update as necessary.

1. Material Aid Response:

Heritage appreciates the clarification on the Material Aid taxonomy definition. Form 3A-1 has been updated accordingly.

2. Outreach Response:

Heritage appreciates the clarification for the taxonomy of Outreach. For FY 2016 Heritage is implementing a systems change requiring all providers to have a system in place to track unduplicated client count for all Heritage funded programs. Heritage believes that the FY 2016 unit projections are accurate; however the unduplicated client count will decrease for FY 2016. Form 3A-1 has been corrected to reflect multiple contacts per consumer.

Area Plan Budget Corrections

No issues identified.

Other Corrections

Verification of Intent and Authorized Signatures.

The person signing as the Board Chair is not the same person as listed as the Governing Body Board Chair on page 41.

Required Action:

Please submit revised Governing Body membership or revised Verification of Intent and Authorized Signatures pages.

The Heritage Agency has historically submitted the Area Plan with the signature of the Kirkwood Community College Vice President's signature as the Board of Trustees designee. Heritage regrets the confusion and includes supplemental signature pages with the signature of Lois Bartelme, Board of Trustees Chair, Kirkwood Community College as correction.

Please reference Revised Signature pages 33-35.

Table of Organization

The Table of Organization provided does not include Case Managers.

Required Action:

Please provide updated table of organization or explain how case managers fit within your organization.

The Heritage Agency does indeed employ individuals serving as case managers. However, to better reflect the model of service of LifeLong Links, Heritage's previous Executive Director adjusted the job titles of Options Counselors and Case Managers to LifeLong Links Service Specialists.

To clarify the organizational chart, those individuals performing the duties of case management are: Barb Lorenz, Kelsey Nelson, and Ann Neville.

OAA Service Coverage by County

Information regarding provision of transportation is confusing. Narrative indicates that transportation is offered in 4 of 7 counties, and then later indicates 2 of 7 counties. Narrative also indicates transportation is offered in Benton and Jones counties, yet these counties are not checked in service table.

Required Action:

Please clarify and resubmit page 60 with updated / verified service table.

The service of transportation on the service table was revised to reflect that services are provided through both Assisted Transportation and Transportation taxonomy definitions. The original submission only showed Transportation and did not include Assisted Transportation. It is important to note that the service table reflects the county in which the service provider is based out of. Some of our five providers (under assisted transportation and/or transportation) will travel outside of their home county based on client need.

A revised page 60 is attached to this submission.

Contract with Service Providers

Agency indicates staff have reviewed service provider information in IAPRS; however, no service providers are listed in IAPRS. (IDA staff have reviewed this issue with Heritage's IAPRS contact.)

Required Action:

Please resubmit page 61 of area plan with new verification date.

A revised page 61 is attached to this submission.

Waiver Notes and Corrections

1. Agency submitted a Direct Service Waiver for Material Aid. Justification describes using funds to purchase items rather than to provide direct service. If so, then a direct service waiver is not needed.

Heritage apologizes for the unnecessary form submission and confusion. This will be corrected in future years.

2. The description of Nutrition Education activities in the Direct Services Waiver justification does not meet the definition of this service. Distribution of educational pieces and speaking about the nutrition program is not nutrition education. Nutrition Education is a *"program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information and instruction to participants and caregivers in a group or individual setting overseen by a dietitian or individual of comparable expertise."* This activity requires an interaction between a leader and participant in groups or a personal education session.

Required Action:

Please update the justification to ensure activities for which the Nutrition Education direct service waiver is being requested reflects the service definition.

Heritage has not changed our primary strategy for Nutrition Education, but has expanded it to include Fresh Conversations. However, we recognize that this primary strategy was not as detailed as it should have been on our justification form. Heritage appreciates the opportunity to better explain our activities. A revised form is attached for the Department's consideration.

The following was added to the resubmitted form: Heritage coordinates and provides educational materials that are developed by qualified professionals to all dining site locations and home delivered meal participants. The educational pieces are presented at least monthly to the congregate meal participants at the dining site on the designated day. They are also discussed by the home delivered meal driver with each client at the time of delivery. Topics vary and may include the importance of calcium, food temperature safety, exercise tips and much more.

3. Direct Service Waivers are not required for Training and Education or for Caregiver Information Service as they are an exempt service (Public Education) from the requirements in IAC subrule 6.12(3).

Heritage apologizes for the unnecessary form submission and confusion. We did not interpret this as falling under Public Education and erred on the side of submission. This will be corrected in future years.

4. Agency submitted a Direct Service Waiver for Caregiver Supplemental Services. Justification describes using funds to purchase items rather than to provide direct service. If so, then a direct service waiver is not needed.

Heritage would like to clarify that we do interpret the need for this Direct Service Waiver due to the fact that our internal staff work within this taxonomy definition by identifying, assisting and discussing possibilities with individuals when choosing their individual preferences in addition to coordinating payments to providers.

Heritage will better communicate this strategy in future Direct Service Waiver Forms if this strategy continues.