

**AREA PLAN SCHEDULE  
FY 2023 – 2026**

<b>Task</b>	<b>Deadline</b>	<b>Responsible Agency</b>
<b>1. Area Plans Format and Instructions</b>	<b>2/1/2022</b>	<b>Tennessee Commission on Aging and Disability (TCAD)</b>
<b>2. Advertise Public Hearing</b>	<b>3/12/2022</b>	<b>Area Agency on Aging and Disability (AAAD)</b>
<b>3. Public Hearings on Area Plan</b>	<b>3/26/2022</b>	<b>AAAD</b>
<b>4. AAAD RFP Process in Place</b>	<b>3/1/2022</b>	<b>AAAD</b>
<b>5. Area Plan Submitted (Submit signed copy of plan via email)</b>	<b>4/4/2022</b>	<b>AAAD</b>
<b>6. Review Area Plan and communicate to AAADs if clarification or correction is needed</b>	<b>4/15/2022</b>	<b>TCAD</b>
<b>7. Area Plan revisions submitted to TCAD, if needed</b>	<b>4/22/2022</b>	<b>AAAD</b>
<b>8. TCAD staff approval of Area Plans</b>	<b>4/29/2022</b>	<b>TCAD</b>
<b>9. Commission members given link to Area Plans</b>	<b>5/3/2022</b>	<b>TCAD</b>
<b>10. Discussion of Area Plan process at Commission Meeting</b>	<b>5/10/2022</b>	<b>TCAD</b>
<b>11. Contracts sent to AAADs</b>	<b>5/13/2022</b>	<b>TCAD</b>
<b>12. Contracts sent to TCAD for processing</b>	<b>As Soon as Possible</b>	<b>AAAD</b>
<b>13. TCAD signs contract and sends to General Services—Central Procurement Office for contract approval</b>	<b>5/20/2022</b>	<b>TCAD and General Services</b>
<b>14. AAAD contracts with service providers</b>	<b>7/1/2022</b>	<b>AAAD</b>
<b>15. Copies of AAAD Provider Contracts submitted to TCAD</b>	<b>7/8/2022</b>	<b>AAAD</b>

**Area Plan Instructions**  
**FY 2019 – 2022: July 1, 2023, to June 30, 2026**

Instructions for each exhibit are provided in the table below. It is recommended that you review the TCAD State Plan, <https://www.tn.gov/aging/administration/state-plan-on-aging.html>, as you prepare the Area Plan.

<b>EXHIBIT</b>	<b>TITLE</b>	<b>INSTRUCTION</b>
	Submittal Page	Submit
	Intro Page	Submit page following the Submittal Page
A-1	Designated PSA	Complete
A-2	AAAD County Data	Insert the County Data for your AAAD (Data will be provided by TCAD, First TN is included as a sample)
A-3	Needs Assessment and Program Challenges	Complete this section based on information provided in the Statewide Survey
B-1	Plan for Program Development & Coordination	If your plan includes the use of III-B fund for program development and coordination, provide narrative on how those funds will be used
C-1	FY 2022 Highlight of Accomplishments	Provide a status update of accomplishments
C-2	Goals, Objectives, Strategies, and Performance Measures	Provide objectives, strategies, and performance measures for FY 2023-2026 based on goals included in the TCAD State Plan
C-3	Program Planning for FY 2023	Provide information to the questions detailing program planning for FY 2023.
C-4	Targeting Status report	Update the actual accomplishments for FY 2022 (Last complete 12-month period.)
C-5	Targeting Plan, Title VI	Complete the AAAD Title VI Implementation Plan for FY 2023 - 2026
D-1	AAAD Staffing	Provide information to questions around AAAD staffing
D-2	Training & Staff Development Plan	Complete
E-1	Advisory Council	Complete information on Advisory Council
E-2	Public Hearing	A public hearing is required, and this section must be completed detailing information regarding the hearing
E-3	Advisory Council Participation in the Area Plan Process	Provide information on the involvement of the Advisory Council in the Area Plan process
F-1	Direct Provision of	Submit this waiver indicating which services the

	Services Provided by OAA Funding	AAAD is requesting to provide directly.
F-2	Five Day Requirement	Submit this waiver if the AAAD is requesting to waive the five-day meal requirement for any of its nutrition sites.
F-3	Required Minimum Expenditures for Priority Service	Submit this waiver if the AAAD is requesting to waive the requirement to meet the minimum expenditures
F-4	Cost Share Requirement	Submit this waiver if the AAAD is requesting to waive cost share requirements
F-5	TCAD Policy Requirement	Submit this waiver if the AAAD is requesting to waive a TCAD policy requirement
G-1	Assurances	Sign the attached documents which include the three (3) assurances. The assurances must be signed as a part of the FY 2019-2022 Area Plan
H-1	Budget Area Plan	Submit using the attached excel document. <i>(Please send a copy in the excel format)</i>
H-2	Personnel Area Plan	Submit using the attached excel document. <i>(Please send a copy in the excel format)</i>
H-3	Subcontracting Agencies	Complete and submit using the attached excel spreadsheet listing the subcontracting agencies for FY 2019 <i>(Please note any additions or deletions of subcontracting agencies to this document will need to be updated and resubmitted) (Please send a copy in the excel format)</i>
H-4	Nutrition Sites	Complete and submit using the attached excel spreadsheet listing nutrition sites for FY 2023 <i>(Please send a copy in the excel format)</i>

**SUBMITTAL PAGE**

- ( X ) Area Plan for July 1, 2023 - June 30, 2026
- ( ) Amendment (Date): \_\_\_\_\_

This Area Plan for Programs on Aging and Disability is hereby submitted for the 08 planning and service area. The Southwest Area Agency on Aging and Disability assumes full responsibility for implementation of this plan in accordance with all requirements of the Older Americans Act and Regulations; laws and rules of the State of Tennessee; and policies and procedures of the Tennessee Commission on Aging and Disability.

This plan includes all information, goals and objectives, and assurances required under the Tennessee Area Plan on Aging format, and it is, to my best knowledge, complete and correct.

Signature: Shelley Hale Date: 3.22.2022  
Area Agency Director

The Area Agency Advisory Council has participated in the development and final review of the Area Plan. Advisory Council members, participation in public hearing, and participation in Area Plan process is included in Exhibit E-1 to E-3 of the Plan.

Signature: Melina Porter Date: 3-28-22  
Chair, Area Agency Advisory Council

The Board of Directors of the sponsoring agency has reviewed this plan and Submittal Page. It is understood that we are approving all sections of the plan, Exhibits A – H. We are satisfied that the plan is complete, correct, and appropriately developed for our planning and service area.

Signature: J. W. Buh Date: 3/22/2022  
Director, Grantee Agency

Signature: [Signature] Date: 4/22/22  
Chair, Grantee Agency Board



## **AREA PLAN on AGING and DISABILITY**

*For Progress toward a Comprehensive, Coordinated Service System  
for Older Persons and Adults with Disabilities*

Southwest Tennessee

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Designated Area Agency on Aging and Disability

for the

08

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Planning and Service Area

**in TENNESSEE for  
July 1, 2023 – June 30, 2026**

**Designated Planning and Service Area**

AAAD Name:	Southwest TN Area Agency on Aging and Disability
Physical Address:	102 E. College St., Jackson TN 38301
Mailing Address (if different):	N/A
AAAD Phone and Fax Number:	Phone: 731-668-6967, Fax: 731-668-6444
AAAD Email Address:	<a href="mailto:swaad@swtdd.org">swaad@swtdd.org</a>
Website:	<a href="http://www.swtdd.org">www.swtdd.org</a>
AAAD Director:	Shelley Hale
In Operation Since:	1971
Mission:	As a planning organization, the Southwest Tennessee Development District promotes the renewal and revitalization of both rural and urban communities through betterment of an economic base (Economic Development), physical infrastructure (Community Development) and quality of life (Area Agency on Aging & Disability for the eight county area that we serve.



### AAAD County Data

Geography	Population		Language	Poverty			Rural
	60+ Population	% of 65+ who are minority	% of individuals ages 65+ who speak language other than English At Home	% of individuals ages 65+ who are below 100% FPL	% of total 65+ population who are below poverty	% of total 65+ population who are Low Income Minority	% of all 65 who are Rural
Chester County	3,766	8%	1.11%	13.77%	20.38%	0.56%	65.24%
Decatur County	3,476	6%	0.93%	13.55%	12.20%	0.88%	100.00%
Hardeman County	6,026	28%	3.73%	13.97%	12.47%	5.79%	80.21%
Hardin County	7,416	7%	2.31%	13.58%	16.09%	1.43%	67.93%
Haywood County	4,061	41%	2.10%	17.95%	16.50%	12.96%	47.42%
Henderson County	6,289	8%	0.90%	9.51%	11.02%	0.99%	76.38%
Madison County	20,509	25%	2.18%	10.06%	9.30%	4.94%	25.83%
McNairy County	6,983	6%	1.18%	13.70%	13.91%	0.97%	85.27%



### Needs Assessment and Program Challenges

As a part of the Statewide Survey, questions were asked to both older adults and providers. The top challenges or unmet needs for each are listed below:

Older Adult Survey Top 5	
What challenges keep you from being more active in your community?	What improvements would make your day-to-day life better?
<ul style="list-style-type: none"> <li>• COVID-19 Concerns (62.19%)</li> </ul>	<ul style="list-style-type: none"> <li>• COVID-19 Safety (47.18%)</li> </ul>
<ul style="list-style-type: none"> <li>• Health concerns or lack of healthcare (11.76%)</li> </ul>	<ul style="list-style-type: none"> <li>• Social Needs (47.2%)</li> </ul>
<ul style="list-style-type: none"> <li>• Financial concerns (7.5%)</li> </ul>	<ul style="list-style-type: none"> <li>• Improvement in financial concerns (7.92%)</li> </ul>
<ul style="list-style-type: none"> <li>• Transportation (6.9%)</li> </ul>	<ul style="list-style-type: none"> <li>• Exercise and Recreational Activities (6.72%)</li> </ul>
<ul style="list-style-type: none"> <li>• Social Needs (6.5%)</li> </ul>	<ul style="list-style-type: none"> <li>• Transportation (5.64%)</li> </ul>

Service Provider Survey Top 4	
What are the three (3) most common unmet needs you see in your older adult population?	In Tennessee, what are the three (3) most pressing changes to be made in order to improve daily life for older adults?
<ul style="list-style-type: none"> <li>• Social Needs (43.7%)</li> </ul>	<ul style="list-style-type: none"> <li>• Social Needs (21.1%)</li> </ul>
<ul style="list-style-type: none"> <li>• Transportation (33.3%)</li> </ul>	<ul style="list-style-type: none"> <li>• Home and Community Based Services, "HCBS" (19.9%)</li> </ul>
<ul style="list-style-type: none"> <li>• Nutrition (29.4%)</li> </ul>	<ul style="list-style-type: none"> <li>• Transportation (19.9%)</li> </ul>
<ul style="list-style-type: none"> <li>• Access to Healthcare (22.9%)</li> </ul>	<ul style="list-style-type: none"> <li>• Nutrition (14.7%)</li> </ul>

1. Choose three (3) areas of unmet need or challenges mentioned in the above surveys that the AAAD sees as challenges the AAAD will face in the next 4 years. If you conducted a needs assessment for your planning area and identified needs not addressed in the above survey, you may choose those as a part of your three (3) areas.

COVID-19 Concerns, Social Needs, and Transportation

2. As the State plans to be effective in the provision of services and supports to Older Tennesseans, we must utilize all available resources, including both people and money. In your planning and coordination, outline the strategies the AAAD will use to address these challenges and include the use of the following solutions:
  - Collaborative - build on new and existing partnerships
  - Diverse - provide a greater variety of services and programs to meet the needs of all populations



- Streamlined - create easier access to services and programs
- Data-driven - use data to inform decisions and track successes
- Anticipatory - address both immediate needs of older adults and the needs of future older adults

### Transportation

The AAAD has worked to build assisted volunteer transportation programs within its service region and across the state over the past four years. The experience has proven to be rewarding both for AAAD staff, contracted partners, volunteers and riders. Currently, the agency is contracting with The Memorial Foundation to administer the fourth and final year of the Senior Volunteer Transportation Network (SVTN) program. To date, this program has developed twenty-two new assisted volunteer transportation programs for older adults and working to develop eight more in 2022.

As cited in the above statewide needs assessment, we know that transportation is an area of great concern for older adults. For those who drove, giving up the keys due to disability, frailty, or cost is equated with a lack of independence, loss of social connection, and lack of access to vital services. While rural transportation and metro transportation options exist in every county, assisted transportation is a specialized, door-through-door service that is necessary for those who need extra, hands-on assistance.

The AAAD sets the following objectives to meet the need for assisted transportation in its planning and service area by:

- A. Maintain the regional MyRide programs utilizing Title IIIB funding in Madison, McNairy, Henderson, and Chester Counties in order to provide assisted transportation, social connection, and wellbeing to older adults enrolled in the program.

An evaluation of the Senior Volunteer Transportation Network by the University of Tennessee Center for Transportation Research completed in November 2021, states:

*“The SVTN program was found to have had a tremendously positive impact on the seniors it serves. Though there were too many confounding factors to measure a positive change in the overall quality-of-life of individual seniors, significant other benefits were found. Almost 25,000 rides were provided to more than 1400 individuals during the evaluation period. When asked what the most important benefit of the ride was to them, 41% of senior readers said they needed to receive assistance from someone during their trip and another 33 % indicated it reduced the burden on their family members. When asked how they would have made the trip without the local MyRide program, 49.9% said they would NOT have been able to make the trip.*”

Based on this evaluation, the senior volunteer transportation programs across Tennessee have shown the impact on the lives of the older adults served. The connection/friendship

between rider and volunteer driver, the ability to access services when needed without relying on family, and the hands-on assistance provided are vital to wellbeing and social connectedness.

B. Expand assisted volunteer transportation into additional counties within the service region as funding allows.

To implement new programs, the AAAD will work with local aging service providers, government officials, senior centers, and healthcare partners to establish a steering committee in the proposed location. This committee will research need, establish program perimeters, amend policies as needed and set rates.

C. Advocate for long-term funding and acceptance of volunteer assisted transportation as necessary and viable option in statewide transportation plans.

Though the AAAD has made great strides in the development and implementation of volunteer assisted transportation, the programs are still regarded and “nice” but not “necessary” throughout the region. The AAAD Director and local MyRide Coordinators will partner with volunteers and riders to develop advocacy materials and talking points for potential funders and transportation/planning officials.

COVID-19 Concerns

The COVID-19 pandemic highlighted the many barriers to access that older adults face in this country. Specifically, the polarization of the population based on political ideologies that set the tone for how this public health emergency was addressed caused unnecessary delays of correct information, preventative action steps, and inclusive safety measures. The AAAD understands that as the growth in Tennessee’s older population continues, the Agency will need to effectively plan for and expect public health emergencies that will disproportionately impact older adults.

A. Expand the Continuity of Service Plan and Disaster Preparedness Plan

The AAAD will collaborate with local service providers, Advisory Council members, medical professionals, local and state health officials to expand upon the Continuity of Services Plan developed during the COVID-19 pandemic. Quarterly meetings with members of most of the above listed group to exchange information, ideas, and trends are currently held and will continue into the 4-year planning period.

B. Provide timely and accurate information

The AAAD will continue to provide timely and trusted information on public health concerns to its providers, senior centers, Inter-Agency Council partners, and consumers through the SWTDD E-Newsletter, SWAAAD Facebook page, automated (robo) calls, and emails.

C. Inform Medicare beneficiaries

The SHIP and MIPPA programs will also work to inform consumers of the availability of vaccines covered by Medicare for beneficiaries.

D. Maintain situational awareness to make informed decisions

The AAAD Director will continue to monitor local and state health data on any public health concerns (including COVID-19 variants). This data will be utilized to ensure that all necessary precautions are being utilized at in-person meetings, senior centers and nutrition sites.

Social Needs

According to National Academies of Sciences, Engineering, and Medicine:

*Social isolation significantly **increased a person's risk of premature death from all causes**, a risk that may rival those of smoking, obesity, and physical inactivity. Social isolation was associated with about a 50% percent increased risk of dementia.*

[The National Academies of Sciences, Engineering, and Medicine. 2020. Social Isolation and Loneliness in Older Adults: Opportunities for the Health Care System. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25663>external icon. Centers for Disease Control:]

This staggering fact solidifies what many AAADs have known for years. Social activities and contact with others is one of the key factors to wellbeing and longevity. With this in mind, the AAAD will:

A. Promote creative and innovative programing and education in Senior Centers

The AAAD Administrative Assistant II will work directly with Center Directors to ensure that programming and educational events are interesting to the diverse population served, relevant to current situations, timely, and promote holistic wellbeing. This position is new for the AAAD and goals have been set to ensure effective collaboration.

B. Research and implement new technologies to reach isolated and/or rural older adults

Multiple online and streaming platforms were developed during the pandemic that may prove effective in reaching isolated older persons. These programs range in variety from evidence-based health promotion to caregiver training to physical fitness.

The AAAD Director will survey current senior center participants, aging service providers, and Advisory Council members to determine need and feasibility of

implementing a virtual program(s) within the region. A pilot program will be initiated to run for one year to determine effectiveness and utilization.

3. In the Service Provider survey, they identified barriers to improving the lives of older adults. These are related to areas of systems change. Choose one (1) of the following areas that the AAAD identifies as a barrier and include efforts the AAAD will make within the 4-year Area Plan cycle to address systems change in that particular area:

- Not Enough Services/Organizations (25.97%)
- Inadequate Funding (24.2%)
- Staffing Issues (13.9%)
- Rules/Regulations (8.6%)
- Transportation (8.2%)

### Transportation

As previously described, the AAAD plans to focus time and resources on the expansion of senior volunteer transportation options provided through the MyRide program.



## Plan for Program Development and Coordination

The AAAD is proposing to use \$ 41,270 in Title III-B direct service funds to pay for Program Development and Coordination during FY 2023. TCAD allows up to 10% of these funds to be used for this purpose. The proposed amount represents 10% of the AAADs new Title III-B direct service allotment.

If **yes**, include a goal, objectives, and strategies that describe the program development/coordination activities that will be performed by the AAAD staff member(s) paid from these funds and how these activities will have a direct and positive impact on the enhancement of services for older persons in the PSA. Costs should be in proportion with the benefits described.

1. **Goal:** Provide local family caregivers the opportunity to receive education and information on aging issues related to caregiving.
  - **Objective:** Partner with the Senior Services department of West TN Healthcare and local aging service providers to develop and present conferences targeted to family caregivers.
    - **Strategy:** Hold the Facing Future Choices Conference in Jackson, TN. This conference will have multiple sessions on topics that are relevant to family caregivers and older adults. Aging services vendors will also be on hand to provide information and answer any questions that attendees have. All proceeds paid by vendors will be utilized as an emergency fund by the AAAD for unmet needs.
    - **Strategy:** In partnership with the West TN Healthcare Foundation, sponsor and present at the annual Alzheimer’s Conference. The AAAD will be a vendor and speaker at the conference.

**Impact:** These two conferences positively impact older adults and family caregivers by providing resources, education, information, and training.

2. **Goal:** Provide up-to-date, timely, and reliable information, assistance, and technical support to older adults who are residing in a rural area and Senior Centers.
  - **Objective:** Utilize the AAAD’s Mobile ADRC to provide the above listed services at low-income housing, Senior Centers, and to individual rural residents.
    - **Strategy:** Develop the annual AAAD Outreach and Education Plan that includes at least monthly activity utilizing the Mobile ADRC.

**Impact:** By targeting low-income older adults, Senior Centers, and older adults residing in a rural area, the AAAD will provide individualized, person-centered assistance and

information that enables persons to make informed decisions on matters of aging and long-term care.

**FY 2022 Performance Highlight of Accomplishments with ACL Federal Funds and State Allocations**  
(Please limit your response to 3 pages)

Provide a status update of the progress and accomplishments of the following federal and state program areas *(Be sure to include accomplishments related to carryover funds used in FY 2022 as these were a part of the FY 2021 Area Plan Update)*:

**Older Americans Act Funding**

❖ Title IIIB Supportive Services:

- Increased the visibility of the AAAD as an ADRC through the use of the Agency’s Mobile ADRC (van) to provide information, assistance, and resources
- Continued to provide enhanced access to services through the AAAD’s chat feature (LiveChat) on the SWTDD website
- Collaborated with Senior Centers to facilitate re-open during the continuing COVID-19 pandemic

❖ Title IIIC Nutrition Services:

- No waiting list for nutrition services; able to screen and start consumers on home-delivered meals as they called in
- Added a new Congregate Site at the West Madison Senior Center to target low-income minority individuals
- Served approximately 15,000 meals per month
- Hired a Nutrition Site Manager in October of 2021 to operate the Agency’s largest Nutrition Site: Madison County; the AAAD previously operated the Site
- Re-started congregate meals in Nutrition Sites following COVID-19 safety protocols

❖ Title IIID Disease Prevention & Health Promotion:

## Area Plan, FY 2023 - 2026

- Funds utilized for the MyRide West TN programs under the major disaster declaration; 975 rides were provided from July 1, 2021 to date
  
- ❖ Title IIIE National Family Caregiver Support Program:
  - No waiting list for services; able to screen and begin process for services at caregivers called in
  
- ❖ Title VII Elder Rights
  - Received ample personal protective equipment (PPE) in order to safely visit residents
  - Resumed face-to-face visits in May 2021 after being very limited due to the COVID-19 pandemic
  - Opened 161 cases from July 1, 2021 to date
  - Filled in for vacancy of Northwest AAAD Ombudsman and will provide hands-on training for new hire

### **State Funds**

- ❖ OPTIONS Home and Community Based Services:
  - New HCBS provider added in September 2021
  - No waiting list for the first six months of FY 21
  - New Options Counselor hired in November 2021
  
- ❖ Guardianship:
  - Served 33 consumers from July 1, 2021 to date
  - Hired and trained a new Assistant Public Conservator in October 2021
  - 10 outreach occurrences to local County Court Clerks, 35 outreach mail-outs to local healthcare facilities



**Other**

❖ SHIP: N/A

❖ Carryover funds from FY 21:

- These funds (along with CARES funding) were utilized to clear the waitlist for IIIB Homemaker and IIIC Home Delivered Meals

## **FY 2022 Highlight of Accomplishments from Other Funding Sources**

(Please limit your response to 3 pages)

Provide a status update of any accomplishments from other funding sources that have been made regarding goals included in the FY 2021 Area Plan Update.

### **Families First**

- ❖ IIC: N/A (all Families First monies were spent in previous fiscal year)

### **Cares**

- ❖ IIIB:
  - All monies spent by October 2021; clients who were being served utilizing CARES funding were then transitioned to regular IIIB Homemaker
  - Temporarily provided additional hours to consumers in need
- ❖ IIC:
  - Restaurant meals were continued through September 2021 to consumers at the West Madison Senior Center (targeting low-income, minority consumers)
  - Increased the number of inclement weather meals provided to home delivered meals consumers from 3 to 5
- ❖ IIIE:
  - No waiting list for services; able to screen and begin process for service as caregivers called in
  - Alzheimer's Support Groups met in all 8 counties of the service region utilizing Alzheimer's Tennessee

**Covid III – HDM Supplemental**

❖ IIC:

- All home delivered meals clients who were being served utilizing CARES funding (which was expended by October 2021) were transitioned to COVID III funding.
- All funds were expended by December 2021; all clients were then transitioned to traditional Title IIC meals

## Goals, Objectives, Strategies, and Performance Measures

Goal 1: Ensure that programs and services funded with federal Older Americans Act (OAA) are cost effective and meet best practices.

### Information & Assistance

- **Objective:** Provide all consumers the highest quality experience when accessing the AAAD by ensuring up-to-date education and training
  - **Strategy:** One new AAAD staff member will become certified through the Alliance for Information and Referral Specialists (AIRS)
  - **Strategy:** Ensure AIRS Certification remains up-to-date through continuing education documented and submitted to AIRS by the two (2) currently certified staff members
- **Objective:** Ensure all consumers are provided information, assistance, referral, and/or screening utilizing a simple, easy-to-understand, non-burdensome approach
  - **Strategy:** AAAD Director and Information & Assistance Specialist will review current procedures to determine effectiveness. All items that are repetitive, burdensome, or unnecessary will be eliminated (while maintaining compliance with the standards of TCAD's Program and Policy Manual)
  - **Strategy:** AAAD Director will conduct a review of all printed material published by the Agency to ensure all language is at a 6<sup>th</sup> grade reading level or below, utilizes best practices for persons with vision impairments, directs consumers to the Agency's website, provides a direct contact number, and provides the most up-to-date information
  - **Strategy:** Maintain the Agency's online chat feature on the SWTDD website to enable consumers to receive real-time assistance. The AAAD will also train one (1) additional staff member to respond to incoming chats.
- **Performance Measure:** The AAAD Director will ensure that a total of three (3) AAAD Staff are certified to provide Information & Assistance through AIRS and that review of procedures and printed materials are completed by June 30, 2023. The SWTDD IT

Manager will train one (1) additional AAAD staff Member on responding to incoming, online chats by December 31, 2022.

### **Nutrition**

- **Objective:** Ensure timely, and up-to-date education on nutrition related issues.
  - **Strategy:** The AAAD Nutrition Director, Nutrition Site Managers, and Food Service provider will participate in monthly training calls and quarterly Meals on Wheels training webinars.
  - **Strategy:** The AAAD Nutrition Director will host quarterly in-service training on nutrition related issues for all Nutrition Site Managers.
- **Objective:** Garner effective feedback from participants in order to measure the Nutrition Program's impact on participant's wellbeing.
  - **Strategy:** Research surveys (in any format) that measure wellbeing in older adults in specific relation to nutrition.
  - **Strategy:** AAAD Director and Nutrition Director will revise current satisfaction survey to focus not only on quality measures of program but impact on participant wellbeing.
- **Objective:** Ensure that older adults and family caregivers who reach out to the AAAD to enquire about Nutrition Services receive adequate information on the process and eligibility of the meal program and a description of the meals in order to decrease home delivered meal service terminations.
  - **Strategy:** The Information & Assistance Specialist will coordinate with the AAAD Nutrition Director to develop a quick script (or bulleted talking points) to be utilized with persons inquiring about Nutrition Services.
  - **Strategy:** Update the SWTDD website to include more concise and descriptive information on home delivered meals.
- **Performance Measure:** The AAAD Nutrition Director will ensure participation in 12 monthly training calls, 4 quarterly Meals on Wheels webinars, and 4 in-services by June 30, 2023. The AAAD Director will ensure updated satisfaction surveys are researched, developed and in-use by August 31, 2022. The AAAD Director will also ensure the Agency's Nutrition "script/talking points" and website updates are completed by January 31, 2023.

### **Title IIIB In-Home Services**

- **Objective:** Ensure the greatest number of persons over age 60 are served while utilizing all available funding.
  - **Strategy:** Maintain effective waiting list procedures and fill all available slots as quickly as possible utilizing Prioritization Form scoring.
- **Objective:** Advocate alongside local aging service providers, TCAD, and local healthcare providers to ensure a strong service provider network in Southwest Tennessee.
  - **Strategy:** Convene quarterly meetings with aging service providers and healthcare leaders to discuss and build a framework for strengthening the network.
  - **Strategy:** Partner with local education institutions to present the value, need, and importance of improving the lives of older adults through a career in aging services in classrooms.
- **Performance Measure:** The AAAD Assistant Director is responsible for notifying the Options Counselors/Case Managers when a consumer can be pulled from the waiting list and added to services. This will be ongoing. The AAAD Director will ensure four (4) quarterly meetings are held with aging service providers and healthcare leaders by June 30, 2023. The Director will also ensure partnership with at least two (2) local education institutions by June 30, 2023.

### **National Family Caregiver Support Program**

- **Objective:** Ensure the greatest number of persons caring for someone age 60 and older are served while utilizing all available funding.
  - **Strategy:** Utilize a Caregiver waiting list when all available funding is expended. Maintain effective waiting list procedures and fill all available slots as quickly as possible utilizing Prioritization Form scoring.
  - **Strategy:** Partner with the Alzheimer’s Association of Tennessee to provide caregiver education and support groups within the eight (8) county service region.
  - **Strategy:** Partner with the Southwest TN Inter-Agency Council to develop resource “card deck” to provide each program participant in order to support them in finding additional resources that may be needed to care for their loved one.
- **Performance Measure:** The AAAD Assistant Director is responsible for notifying the Options Counselors/Case Managers when a consumer can be pulled from the Caregiver

waiting list and added to services. This will be ongoing. The AAAD's Caregiver Coordinator will ensure that at least one occurrence of caregiver education within regional support groups is provided by Alzheimer's Tennessee by June 30, 2023. This will be tracked by a sign-in sheet from each support group and kept on file at the AAAD. The AAAD Director will ensure development of resource card deck by March 31, 2023.

### **Evidence Based Programs**

- **Objective:** Utilize all available Title IIID funding to develop evidence based programming to promote wellbeing within the local older adult population.
  - **Strategy:** Ensure all RFPs to provide Title IIID are reviewed for accuracy and compliance.
  - **Strategy:** Ensure funding awarded to grantees serves the greatest number of older adults within the scope of their service area.
- **Performance Measure:** The AAAD Administrative Assistant II serves as the liaison between the grantee and the Agency. This employee will ensure all RFPs are reviewed for compliance and meet Tier III compliance by February 28, 2023. The Management Information Specialist will ensure the proposed number of participants are served. This responsibility is ongoing.

### **Senior Centers**

- **Objective:** Provide up-to-date training to Center Directors and Center staff on aging issues affecting the older adult population within the state and nation.
  - **Strategy:** Develop quarterly in-service training agenda annually to coincide with the AAADs training plan.
  - **Strategy:** Develop and provide monthly training calls for months when a face-to-face meeting is not scheduled.
- **Objective:** Ensure the greatest number of older adults are served at each Senior Center.
  - **Strategy:** Utilize an RFP process and RFP scoring mechanism to ensure that Centers award are in a location that provides services to the greatest number of persons within the targeted population (i.e. 60+, minority, low-income, low-income minority, and/or rural).
  - **Strategy:** Develop daily attendance averages to be met by each Senior Center.

- **Performance Measure:** The AAAD Administrative Assistant II will ensure that an annual training agenda is developed and followed by July 31, 2022. This employee will also provide at least eight (8) monthly training calls and record attendance. The Management Information Specialist will be responsible for ensuring the daily average attendance is in compliance with each Center's contract. This will be an ongoing responsibility.

### **Transportation**

- **Objective:** Provide affordable, accessible, adaptable, accessible, and available assisted transportation to older adults within the service area utilizing Title IIIB funding.
  - **Strategy:** Implement MyRide West TN programs into additional counties within the service region as funding is available.
  - **Strategy:** Ensure all MyRide West TN programs utilize best practices to maintain program integrity and ensure safe, reliable service.
  - **Strategy:** Monitor each MyRide West TN program annually to ensure each volunteer has up-to-date licensure and insurance. Ensure background check, registry checks, and motor vehicle reports are completed and maintained.
- **Objective:** Utilize available funding to provide transportation to Senior Centers to efforts to reduce social isolation and loneliness.
  - **Strategy:** Utilize the RFP process to provide funding to Senior Centers to operate Center owned vans in the transport of older adults to the Center.
- **Performance Measure:** The AAAD Director will be responsible for ensuring that new programs are developed as funding is made available. This will be an ongoing process. The AAAD Assistant Director will ensure best practices are utilized and will ensure monitoring for each program. Monitoring will be completed annually by June 30<sup>th</sup>. The AAAD Assistant Director will ensure RFPs for Senior Center transportation are accurate and scored by July 31, 2022.

### **Elder Abuse**

- **Objective:** Provide training and education outreach within the service region to ensure persons know how to spot and report elder abuse.
  - **Strategy:** Utilize the Mobile ADRC to provide elder abuse information and resources at community health fairs and drive-thru events.
  - **Strategy:** Develop an annual Outreach and Education Plan to focus on elder and vulnerable adult abuse and prevention.



- **Objective:** Increase awareness of the functions of the AAAD's role as Single Point of Entry among community elder abuse partners.
  - **Strategy:** Include items in the annual Outreach and Education Plan that target elder abuse partners in order to provide additional resources for them and information on how to utilize the ADRC to facilitate applications.
- **Performance Measure:** The AAAD Director will ensure the development of the Outreach & Education Plan includes at least four uses of the Mobile ADRC are specific to elder abuse education and prevention. The CREVAA Director will ensure that the SPOE is the focus of at least three outreach events targeted to community elder abuse partners. These events will be completed by June 30, 2022.

### **Ombudsman**

- **Objective:** Increase awareness of the need for Volunteer Ombudsman Representatives (VOR).
  - **Strategy:** Develop publication explaining the VOR program to be included with the AAAD's Volunteer Opportunities folder.
  - **Strategy:** Train the AAAD's new Volunteer Coordinator on the specific needs of the Ombudsman program and utilize this position to provide outreach to targeted populations.
- **Performance Measure:** The AAAD's LTC Ombudsman will be responsible for coordinating with the Volunteer Coordinator to develop the publication and to provide training. This will be completed by June 30, 2022.
- **Objective:** Ensure AAAD's LTC Ombudsman is up-to-date with current trends in LTC facilities and education/training on issues affecting the older population.
  - **Strategy:** Ombudsman will participate in monthly calls with the State LTC Ombudsman and will attend AAAD training monthly.
- **Performance Measure:** The AAAD Director will be responsible for ensuring participation in twelve (12) training calls and (12) monthly AAAD trainings. Evidence of AAAD training will be sign-in sheets kept on the AAAD server.

### **Legal Assistance**

- **Objective:** Ensure that low income, minority, and rural seniors represent at least half of legal assistance provided.

- **Strategy:** Staff will increase presentations at senior centers in rural Southwest counties to educate seniors on pressing legal needs and the senior legal services offered by WTLS.
- **Strategy:** Staff will distribute legal education materials in rural Southwest counties to increase awareness of legal issues affecting seniors.
- **Strategy:** Staff will coordinate with pro bono attorneys to provide a legal clinic to serve low income seniors.
- **Performance Measure:** The Legal Assistance project manager will monitor seniors served quarterly for improved metrics.
- **Objective:** Improve education on the importance of estate planning documents (simple wills, advance directives, and power of attorney) to prevent future legal needs (like conservatorship, heir property issues, etc.)
  - **Strategy:** Provide presentations at senior centers informing seniors on available estate planning documents and why they are important.
  - **Strategy:** Conduct an estate planning clinic for low income seniors in coordination with the WTLS Pro Bono Project that utilizes pro bono attorneys.
- **Performance Measure:** Although it will take several years of education, WTLS would expect to see a decrease in the number of senior legal requests for conservatorships and heir property issues.
- **Objective:** Improve senior education and awareness on TennCare CHOICES and estate recovery.
  - **Strategy:** Provide presentations at senior centers informing seniors on CHOICES eligibility and the estate recovery process.
  - **Strategy:** Create an estate recovery educational brochure.
- **Performance Measure:** WTLS would expect to see a decrease in the number of senior legal requests that include erroneous estate recovery information, while also seeing an increase in CHOICES-related eligibility appeal requests due to increased education and awareness.

Goal 2: Develop partnerships with aging network, community-based organizations, local governments, healthcare providers and state departments in order to advocate to reduce the gaps in services as identified in the needs assessment.

- **Objective:** Continue to provide education and resources to professionals within the aging network in Southwest Tennessee.
  - **Strategy:** Host and meet monthly with the Southwest Tennessee Inter-Agency Council to strengthen partnerships, learn of new local resources, and share information on aging issues relevant to the service region.
  - **Strategy:** Continue to partner with West Tennessee Healthcare to develop aging-related conferences and resources.
  - **Strategy:** Continue to provide bi-monthly updates to the SWTDD Executive Committee (local elected officials) to ensure they are kept up-to-date on aging issues, goals, successes and concerns. Solicit feedback to ensure local needs are being addressed.
- **Performance Measure:** The AAAD Director will ensure the AAAD will host and/or attend the monthly Southwest Tennessee Inter-Agency Council meetings. Sign-in sheets will be kept on the aging server. The Admin Assistant I will be responsible for ensuring partnership with West Tennessee Healthcare to develop two annual conferences. The AAAD Director and Assistant Director will ensure updates are given to the SWTDD Executive Committee bi-monthly. Notes are recorded and stored on-site documenting this meeting.

Goal 3: Ensure that programs and services funded by State allocations are cost effective and meet best practices.

- **Objective:** Utilize all available Options in Long-Term Care funding to provide in-home services to persons age 18 and up with a physical disability and to older adults within the service region.
  - **Strategy:** Maintain effective waiting list procedures and fill all available slots as quickly as possible utilizing Prioritization Form scoring.
- **Objective:** Ensure all Options Counselors receive monthly training on topics relevant to the population served.
  - **Strategy:** Include items in the AAAD Training Plan that are educational and informative for Options Counselors and will enhance their interaction with consumers. Items include: person-centered planning, end of life planning, resource training, and technology solutions for aging in place.
- **Objective:** Ensure that PGP staff receive adequate continuing education and training.
  - **Strategy:** PGP staff will attend monthly PG conference calls and at least one annual training event.

- **Strategy:** PGP staff will obtain NCG certification and maintain recertification.
- **Strategy:** PGP will hold monthly staff meetings and monthly PG meetings to discuss cases, trainings, and concerns/needs.
- **Objective:** Ensure that PGP staff strive to serve an acceptable caseload as efficiently and successfully as possible.
  - **Strategy:** Ensure PGP staff utilize good time management skills as evidenced by current documentation and record keeping, current client visits, and timely court appearances and filings
  - **Strategy:** PGP staff will secure PGP fees as court approved and create appropriate fund raising opportunities to increase financial support of PGP if needed
  - **Strategy:** Ensure appropriate case review to effectively manage referrals/applications and adequately care for needs of caseload with existing resources available
  - **Strategy:** Enhance community awareness of PGP through regular outreach activities and events.
- **Performance measures:** PG staff will participate in roll call on monthly PG conference calls and maintain agendas on the AAAD server. NCG certification and all other training certificates will be maintained on AAAD server. Meeting sign-in sheets and PG meeting notes will be maintained on server. The AAAD Director will be responsible for ensuring each of these items.

The Public Guardian will ensure that all designated forms, applications, and logs are utilized. The AAAD Director will ensure the Monthly PG Report will be submitted to TCAD on time. All client files will be kept up to date and fees will be collected as approved. This will be the responsibility of the Public Guardian.

The AAAD Assistant Director will ensure that appropriate outreach and education is completed and documented by the PG program staff. The AAAD Director will ensure that each application is reviewed by the management team and that the program has capacity to effectively maintain its caseload.

Goal 4: Ensure that Tennesseans have access to information about aging issues, programs, and services in order to be able to make informed decisions about living healthy and independent for as long as possible and about planning for their financial futures, healthcare access, and long-term care.

- **Objective:** Utilize the AAAD's Mobile ADRC van to provide education and assistance in rural and low-income communities.

- **Strategy:** Include at least one event per quarter on the AAAD's Outreach and Education Plan that utilizes the Mobile ADRC in low-income and rural communities.
- **Strategy:** Partner with Alzheimer's Tennessee to provide education and outreach to consumers on Silver Alert. Strive to provide fifty (50) Silver Alert kits per county utilizing the Mobile ADRC.
- **Strategy:** Provide Medicare counseling and assistance during the Open Enrollment through the SHIP program utilizing the Mobile ADRC on-site at Senior Centers and other locations where older adults reside throughout the service region.
- **Performance Measure:** The AAAD Assistant Director will ensure the Agency's Outreach and Education Plan includes at least one (1) quarterly event utilizing the Mobile ADRC. The AAAD Director will ensure Silver Alert kits are provided in each of the eight (8) counties of the service region. The SHIP/MIPPA Coordinator will ensure that the Mobile ADRC is utilized in at least four (4) events during the Open Enrollment Period.
- **Objective:** Provide reliable and timely information to older adults through local conferences, Senior Centers, and social media.
  - **Strategy:** Partner with West TN Healthcare and other aging service providers to display and provide information on the AAAD's services at the Annual Alzheimer's Conference (for family caregivers, aging, and medical professionals) and Facing Future Choices Conferences (for family caregivers).
  - **Strategy:** Ensure all area Senior Centers receive up-to-date training and materials on aging issues.
  - **Strategy:** Weekly, provide relevant and timely information on issues affecting the older adult population and their caregivers on the AAAD's Facebook, Twitter, and Instagram accounts.
- **Performance Measure:** The AAAD Director will ensure the AAAD's participation/booth at the Annual Alzheimer's Conference (Union University, Jackson TN) and Facing Future Choices Conferences (West Jackson Baptist Church, Jackson TN). The AAAD's Admin Asst. II will ensure that Senior Centers receive information and materials through the quarterly Senior Center Directors Meeting and as needed through email and on-site visits. The AAAD Assistant Director and two (2) MyRide Coordinators will ensure that relevant information is put on social media weekly.

### Program Planning for FY 2023

#### Information & Assistance

1. Complete the following table:

<b>Total # of I&amp;A Staff:</b>	1
<b>Total # of AIRS Certified I&amp;A Staff:</b>	2*

\*Former I & A Specialist (now an Options Counselor) maintains certification through annual training.

2. Describe your plan for outreach to low income, minority, rural and limited English proficiency individuals to ensure these populations are aware of information and assistance services.

As described in Section C-2, the Agency utilizes multiple methods to ensure that older adults, family caregivers, elected officials, and the general public to ensure awareness, knowledge, and education on issues that concern the aging population. Targeted groups are included in the development of the Agency’s Outreach and Education Plan, which is developed after a 3-year analysis of which areas/communities/populations have been effectively reached and those that have not.

The AAAD provides informational updates and materials to the Executive Committee of its Board of Directors bi-monthly to ensure that elected officials are aware of outreach efforts and initiatives.

#### Home and Community-Based Services (Title IIIB and OPTIONS)

1. Complete the following table:

	<b>FY 2021</b>	<b>FY 2022 – Projected (Served/Units)</b>	<b>FY 2023 – Projected (Served/Units)</b>
<b>State – Options Allocation Amount</b>	\$565,200	\$539,500	\$516,100
<b># Served</b>	291	300	250
<b>Units of Service</b>	36,302	40,000	30,000

2. Complete the following table (*The table should include Federal IIIB/State Homemaker In-home service funds only*):

	<b>FY 2021</b>	<b>FY 2022 – Projected (Served/Units)</b>	<b>FY 2023 – Projected (Served/Units)</b>
<b>Federal Title</b>	\$58,527	\$116,640	\$115,000

<b>IIIB/State Homemaker In-home services Allocation Amount</b>			
<b># Served</b>	88	175	165
<b>Units of Service</b>	3,387	6,750	5,990

3. Describe the methodology for the projections listed above.  
 The AAAD was able to clear the waitlist during FY 22 with the assistance of the COVID-19 funding. COVID-19 funding also allowed the AAAD to free up additional Title IIIB and Options funding. With the addition of ARP funding in FY 23 we believe we will be able to sustain the higher number in our regular Title IIIB homemaker program.

4. Complete the following table:

<b>Number of Individuals on OPTIONS Category A Waiting List</b>	0
<b>Number of Individuals on OPTIONS Category B Waiting List</b>	0
<b>Number of Individual on Title IIIB Waiting List</b>	0

5. Describe your plan for addressing the individuals on the waiting list.

The AAAD will continue to monitor the waiting list monthly. Persons will be removed from the list as soon as a slot becomes available. It is the responsibility of the AAAD Assistant Director to perform this function.

6. Include strategies or plans that your AAAD will make to ensure that funds for both OPTIONS and IIIB in-home services are maximized to ensure that funds are expended within the fiscal year for OPTIONS or 92% of IIIB funds by the end of FY 2023.

The AAAD has recently removed all of the Title IIIB Homemaker consumers from the waitlist. Annual calls are continuing. Priority consumers will remain between 90-100.

**Title IIIC Nutrition Services**

1. Provide a description/flow chart of how the nutrition program is administered for the AAAD, including a list and coverage area of all nutrition providers and where admin, food preparation, and delivery duties are assigned.

As of July 2019, the nutrition program for SWAAAD is administered in house. All consumers who are eligible receive an in-home assessment and nutrition screening. A

service authorization is developed based on the action plan. The authorization is forwarded to the AAAD’s Nutrition Director who then adds the consumer to the daily food order. The food vendor, currently the Southwest Human Resource Agency, prepares the meals at their kitchen, which is located within the region. As the food vendor, the SWHRA is responsible for ensuring meals and menus are developed by a registered dietician. They also provide material to the AAAD to be used in nutrition education. SWHRA delivers meals daily to all nutrition sites within the region. The program is under the direction/supervision of the AAAD Director.

2. Complete the following table:

<b>Provider</b>	<b>IIC Allocation</b>	<b>NSIP Allocation</b>	<b>Total Amount of Contract</b>	<b># Congregate Meal Sites</b>	<b># Projected Congregate Meals Served in FY 2023</b>	<b>#Projected Home Delivered Meals Served in FY 2023</b>
SWHRA	\$470,800	\$118,000	\$588,800	13	61,000	49,000
ARP Funds	\$187,500	0	\$187,500	13	7,000	36,000

3. Complete the following table:

<b>Service</b>	<b>Amount IIC Allocated</b>
Nutrition Counseling	\$0
Nutrition Education	\$0
Other Services (Describe): _____	\$0

4. Describe your plan for delivering the highest possible quality of service at the most efficient cost.

The AAAD issued an RFP to ensure the highest quality meal for the lowest cost. The Agency also brought nutrition administration in-house in order to operate a more efficient system at a lower overhead cost. This move, along with additional funding throughout the pandemic, enabled the AAAD to double the number of meals served.



5. Describe both your fiscal and programming approach to Congregate funding and the use of congregate meal sites considering the changes due to the COVID-19 pandemic. (i.e., Are most of your sites open/closed, will you be transferring funds to C-2, etc.)

Congregate meal sites are all open and serving a daily hot meal (though pre-plated) to participants who feel safe enough to come in. Pick-up meals are offered to participants who do not feel safe yet, due to the continuing pandemic. Those meals (pick-up) are counted as home delivered. Congregate sites all submitted a contingency plan to ensure that adequate preparations had been completed prior to re-opening. The AAAD Director visited all sites during the re-opening period to ensure adequate PPE, cleaning and sanitation.

6. Describe how participant feedback is solicited and the results are used to improve service quality. Specifically describe what actions were taken in 2022.

All nutrition participants are given the opportunity to provide feedback at least annually. The AAAD utilizes satisfaction surveys to solicit this feedback. Information received back from those surveys is reviewed and utilized in the meal planning process. Congregate participants receive the survey from the Nutrition Site Manager. The Manager then forwards the results to the AAAD's Nutrition Director. Home-Delivered meal participants are surveyed by a different process. The AAAD Administrative Assistant is responsible for selecting a random sampling of consumers to survey monthly. The surveys are mailed directly to the participant with a SASE that returns directly to the AAAD Director. Results are entered into a spreadsheet. Any concerns listed are communicated to the Nutrition Director. The AAAD Director also forwards concerns to the participant's Case Manager for follow-up. All results are compiled into an Annual QA Summary.

Specific actions taken during FY 21 include continuing change the menu to include a different variety of foods and increasing the number of shelf stable (emergency) meals in each home.

7. Describe how your agency and its providers target congregate nutrition services to reach the greatest social and economic need (low income, rural, minority, language barriers). As you compare your current reach to these populations, do you plan to change any congregate site locations in order to better serve them?

Each Site completes outreach activities annually to target persons in the greatest social and economic need. Activities include newspaper ads, social media posts, and presentations to faith-based / civic groups. In FY 22, the AAAD added a position titled Administrative Asst. II to serve as a liaison to Senior Centers, provide training and technical assistance, and to complete quality assurance activities. As a result, the AAAD now communicates weekly with Centers (Nutrition Sites) to provide program updates, challenges, and useful resources.

The AAAD also invested in a robo-call system to provide updates to meal consumers during any period of inclement weather or holiday-related service delivery changes. There are no plans to change any congregate locations in FY 22.

- Describe your plan to ensure that services will not be disrupted in an emergency or in the event of the loss of a food provider.

The AAAD has worked diligently during the COVID-19 pandemic to fully implement emergency procedures for the continuation of services. On the whole, the Agency is better equipped to handle any disruption due to disaster, public health emergency, or weather related event. During an emergency, the food provider (SWHRA) has demonstrated its capacity to switch to frozen meals, increase deliveries, and provide additional shelf-stable meals are requested. In the event the food provider is lost, the AAAD would either purchase food boxes, shelf-stable meals, or fund Nutrition sites to prepare meals until a new food vendor could be obtained.

**Guardianship:**

- Complete the following table:

	<b>2021 Calendar Year</b>	<b>2022 Calendar Year – Projected</b>	<b>2023 Calendar Year – Projected</b>
<b>Active Caseload</b>	32 *	38*	45*

\* Number of clients served during the Fiscal Year according to SAMS

- Describe the agency’s plan to maintain or increase the number of volunteers.

The Agency’s PG program develops its own Outreach and Education plan to provide interested parties the opportunity to learn about the program and its volunteer opportunities. Quarterly training is scheduled for potential volunteers to come on-site, see how the program operates, and to learn the responsibilities of the volunteer. The AAAD will continue to utilize social media, the Development District’s E-News Blast, Conference booths, and presentations to professional/civic groups in order to increase the number of volunteers.

**National Family Caregiver Support Program (NFCSP) – Title IIIE**

- Complete the following table:

	<b>FY 2021</b>	<b>FY 2022 – Projected</b>	<b>FY 2023 – Projected</b>

		(Served/Units)	(Served/Units)
# Served (Excluding Case Management, Information Services, and Information & Assistance)	55	70	70
Units of Service (Excluding Case Management, Information Services, and Information & Assistance)	9,004	11,000	11,000

- Describe innovative concepts that you plan to implement to address the top caregiver needs with limited financial resources.

The AAAD is currently utilizing CARES funds to provide training to caregivers of persons with Alzheimer’s. This initiative is in partnership with Alzheimer’s TN and includes eight (8) day-long workshops, fidget and music kits for each Senior Center, a robotic pet for each Center, Silver Alert safety kits, and Helping Hands kits for the five largest churches in each county. The AAAD would like to continue this method of reaching caregivers in FY 23 (funding yet to be determined). The AAAD will also research online caregiver training during FY 23 and survey support group participants to determine the feasibility and need of such a program.

The Agency partners with the West TN Healthcare Foundation and other aging service providers to hold the annual Facing Future Choices Conference (for caregivers) each fall. This event provides free training on topics relevant to caregivers such as planning for long-term care, legal considerations as you age, stress management, and coping strategies. Vendor fees for this conference go into the Agency’s Future Choices Emergency Fund to provide older adults who are experiencing and situation with needed items.

- Describe plans for outreach that the AAAD will implement to ensure that caregivers are aware of the NFCSP and services it provides in an effort to increase the enrollment in the program.

The Outreach and Education plan developed by the Agency includes events that are specifically targeted to caregivers. Specifically, the AAAD provides NFCSP program information as part of its Mobile ADRC initiative, the Annual Alzheimer’s Conference, the Annual Facing Future Choices Conference, social media posts, and caregiver articles in the Development District’s E-News blast. The AAAD also provides information annually to the Executive Committee (elected officials) of the SWTDD and provides information quarterly to its Advisory Council, service providers, Nutrition Site Managers, and Senior Center

Directors. Additionally, information is provided to the Southwest Inter-Agency Council monthly.

4. Include strategies or plans that your AAAD will make to ensure that IIIIE funds are maximized to ensure that funds are expended by 92% of IIIIE funds by the end of FY 2023.

The AAAD does not currently have a waiting list for Caregiver services. Consumers will be added to Caregiver services as they call. The AAAD also uses approximately \$60,000 for case management funds annually.

### **Legal Assistance**

1. What legal priority case is the most served in the area? Legal priorities are defined as Income, Healthcare/Long term care, Nutrition, Protective Services, Housing, Utilities, Guardianship Defense, Abuse/Neglect and Age Discrimination.

To date, the greatest legal needs have been Nutrition and Protective Services.

2. Does the legal priority with the greatest number of cases represent the greatest need or is there another legal priority with fewer cases that should be addressed through education efforts?

Access to nutrition and SNAP have been especially important for older adults during the pandemic due to the increased cost of food. West Tennessee Legal Services (WTLS) services provided included ensuring older adults were aware of increased SNAP benefits available during the pandemic. Protective services are also a great need within the Southwest service area. Some protective services provided by WTLS were funded by other, older adult specific, funding. However, with the end of those funding sources, WTLS anticipates an increase in Southwest-funded protective service cases in 2023.

Healthcare/long term care continues to require additional education and is always a hot topic at legal education events. WTLS provides assistance when health cases are presented and will continue outreach in the Southwest service area about the priority services provided by WTLS.

3. What economically or socially needy population, defined as Clients in Poverty, Minority in Poverty, Rural and, Frail/Disabled, represent less than 50 percent of those served through legal assistance. What targeting and outreach efforts can be done to increase those numbers served?

To date, WTLS has served 41 clients in poverty (41%), 22 minority in poverty (22%) and 45 rural (45%). These are all less than 50% of the YTD total of 101 individuals served. WTLS total minorities served in 2022 is 52 (51%) of the total.

WTLS will focus older adult outreach efforts on rural communities with heavier focus on Haywood and Hardeman Counties, which have a higher percentage of rural minority older adults.

4. How will the AAAD and legal provider increase service to those identified economically or socially needy populations? How will the AAAD and legal provider address the identified legal priority needs in the PSA?

With Senior Centers meeting in-person again, WTLS has already resumed in-person presentations and recently scheduled a presentation at a rural church to discuss priority older adult services. These presentations are vitally important to raising awareness of pressing legal issues, especially since some older adults may not even realize they have a legal issue.

WTLS launched a new website in the summer of 2021. The new website is more user friendly and includes an online application portal. The online application is shorter than the previous application. WTLS staff will include instructions for applying for legal help at presentations. With Tennessee Senior Law Alliance funding ending in April of 2022, WTLS will begin utilizing its Pro Bono Initiative to meet the legal needs of older adults in Southwest TN with non-priority Title III legal needs.

**Senior Centers**

1. Complete the following table: \* Projected FY 23 numbers

<b>Senior Center</b>	<b>#Participants</b>	<b>#Low-Income</b>	<b>#Minority</b>	<b>#Rural</b>	<b># English Limitation</b>
Brownsville	75	13	50	75	0
Chester	175	40	20	175	0
Decatur	125	13	8	125	0
Hardin	100	30	3	100	0
Henderson	175	35	18	175	0
McNairy	200	100	5	200	0
Sardis	175	24	10	175	0
Scotts Hill	210	40	10	210	0
Selmer	400	80	25	400	0
West Madison	40	27	40	19	0

2. Describe your agency’s approach to working with those senior centers that need to improve their reach to the target populations.

As previously mentioned, the AAAD has implemented a new position titled Administrative Asst. II. The primary responsibilities of the position is to be a liaison between Senior Center Directors and AAAD staff. This position provides training, technical assistance, reporting, and quality assurance activities. Further, the AAAD meets quarterly with all Senior Center Directors to provide education, resources, planning, and support. This position as worked to re-build relationships after the period of intense COVID burnout and re-establish best practices for serving those within the targeted population. Some Centers experienced a large loss of membership (either through COVID related deaths or members moving into a healthcare facility) and are currently working to re-build, re-brand, and develop innovative new programming to attract new members.

**Emergency Preparedness**

1. Name of Staff Person on the local emergency management team Jordan Wilson, LPN.
2. How is the agency’s emergency plan communicated to staff?

AAAD staff receive training annually on the Agency’s emergency plan (see Training Plan). This presentation includes roles, responsibilities, and resources.

**SHIP**

1. Complete the following table:

	<b>Grant Year 2021 (April – March)</b>	<b>Grant Year 2022 (April – March)</b>	<b>Grant Year 2023 (April – March)</b>
<b># Client Contacts</b>	N/A	N/A	4,771
<b># of Consumers Reached Through Outreach Events</b>			4,771
<b># of Client Contacts Under Age 65</b>			1,000
<b># of Hard to Reach Client Contacts</b>			5,112
<b># Of Enrollment Contacts</b>			4,771
<b># of Low Income/Medicare Savings Enrollment Assistance Contacts</b>			2,176

2. Describe your efforts to increase the number in each column in the table above.

- **Client Contacts**: The AAAD will increase client contacts by holding outreach events held throughout the service area. As previously mentioned, the Mobile ADRC van will be utilized at these events.
  - **Outreach**: The AAAD will strive to increase the number of outreach events held and reach out to additional aging services providers through the Southwest InterAgency Council. Social media posts, the Development District’s E-News blast, and flyers will be used to advertise upcoming events.
  - **Client Contacts Under age 65**: The Agency will work with low-income housing for the disabled population and provide education and outreach events on-site.
  - **Hard to Reach Client Contacts**: The Agency will reach out to the rural, faith-based communities and local physicians’ offices to reach this population.
  - **Enrollment Contacts**: The AAAD anticipates the number of enrollments to increase as partnerships, outreach events, education, and social media presence increases.
  - **Low Income/Medicare Savings Enrollment Assistance Contacts**: As mentioned above the AAAD will utilize outreach events (including the Mobile ADRC) social media, flyers, etc. to reach this population. Specific events and will be scheduled in counties with the highest percentage of low-income beneficiaries.
3. Describe your agency’s approach to reaching Medicare beneficiaries who are hard to reach due to ethnicity; limited English proficiency; those with disabilities and those eligible for low-income subsidies.

SWAAAD will utilize social media, along with mail-outs to rural communities. Plans include establishing partnerships with faith-based organizations, physicians’ offices, and agencies with the eight (8) county service region.

## Targeting Status Report

Report on activities during the preceding year.  
 (This information is used for the Title VI Plan)

Provide information on the extent to which the Area Agency met its Targeting objectives related to rural, minority, ESL, and poverty populations **for all programs** in the 2019 - 2022 Area Plan.

2022* OBJECTIVE	ACTUAL ACCOMPLISHMENT
Ensure older adults and persons with disabilities receive timely, relevant information regarding available services and supports	The Agency provided 3,605 units of information and assistance to 1,265 persons over the last twelve (12) months. 1,550 chats were initiated online and the Mobile ADRC reached over 300 consumers.
Ensure Senior Centers remain a focal point for information and resources within their community	All ten funded Senior Centers reopened from COVID-19 closures and were able to begin rebuilding on-site programming.
Increase access to services through the use of the AAAD's website chat feature and mobile ADRC	The Mobile ADRC reached over 300 consumers to date. 1,550 chats were initiated online.
Increase food security by providing information and facilitation of application for persons who qualify for SNAP benefits.	150,870 persons received SNAP information, and 30 instances of application assistance have been completed to date.

\* Last complete 12-month period.



## Targeting Plan, Title VI

### Civil Rights Act of 1964, Title VI, and Targeting Activities Area Agency Title VI Implementation Plan FY 2023 – 2026

1. Organization of the Civil Rights Office – Describe the organization and staffing of your agency’s Civil Rights/Title VI unit. Outline the duties and responsibilities of the Title VI Coordinator.

The SWTDD Civil Rights/Title VI unit is composed of only one Coordinator, Andrea McDermott. Ms. McDermott presents training (Power Point presentation, videos, signature sheet) to all District employees in October. Her responsibilities include handling complaints, training staff /providers, and ensuring appropriate signage at the District and in the offices of all providers.

2. Complete the following table:

	FY 21	FY 22 - Projected	FY 23 - Projected
Total Individuals Served	4280	4500	4500
Total Minority Individuals Served	1242	1300	1300

3. Describe the manner in which persons with limited English proficiency are served by the agency.

Avanza (the AAAD’s contracted interpreter service provider) is contacted for individuals who speak English as a second language/ or with limited English proficiency who are in need of an interpreter or materials.

4. Complaint Procedures
  - a. Describe the Title VI Complaint procedures followed by your agency.
  - b. Describe agency policies related to investigations, report of findings, hearings and appeals, if applicable.
  - c. Include a copy of the agency’s complaint log, if applicable.  
All complaints must be filed with the Title VI Coordinator unless complaints are filed with external entities first. The Title VI Coordinator will notify the respective Departmental director.

A complaint alleging discrimination against a program or service may be filed at the (1) AAAD or other grantee agency level; (2) Tennessee Commission on Aging & Disability; or (3) the federal level. The first two avenues for complaint filing are internal and the third is external to the aging services network. Complaints must be

filed in writing, preferably on AAAD Form \_01. The form can be filled out by the complainant or by his/her representative, or by the Title VI coordinator. A copy of the complaint must be sent to the Title VI coordinator at the Area Agency on Aging. A copy should also be retained for the agency files. If the complainant is unwilling to complete form, he/she may write, or have written, a letter stating the circumstances of the complaint.

The form, AAAD \_03\_, must then be filled out by the Title VI coordinator and should be attached to the complainant's letter. The coordinator has the primary responsibility for receiving, acknowledging, and investigating complaints and for reporting the findings.

The coordinator must notify the Title VI coordinator at SWTDD/ AAAD office. An appeal by a complainant regarding a finding may be filed.

When an appeal is filed, the Title VI Coordinator shall review an appealed case and make recommendation to the Southwest TN Development District/Area Agency on Aging & Disability Executive Director and Aging Programs Director. When an appeal is concluded, a copy of the findings will be sent to the grantee agency coordinator where the complaint originated. The complainant will then be informed of the findings.

According to federal regulations, a federal complaint must be filed no larger than 180 calendar days after alleged discrimination occurred. A complaint should be filed at the area agency or other grantee agency level no later than 30 calendar days after the alleged discrimination occurred. If it is filed beyond the 30 calendar day period, the grantee agency shall investigate and process the complaint at that level if the filing is prompt enough to allow proceedings to be concluded and leave sufficient time for the complainant to file externally. If a complainant wishes to appeal a finding or the proposed remedial action by the agency, he/she should do so within the next 30 calendar days following receipt of the findings. If the appeal is filed beyond the 30 calendar day period it may still proceed if the proceedings can be concluded and leave sufficient time for the complainant to file externally.

When a complaint is received, that coordinator will conduct and complete a fact-finding investigation within thirty (30) calendar days of receipt of the complaint and report the findings to the agency director. If the report includes a finding of violation of Title VI, the agency shall include any proposed remedial action in the report. (Form AAAD 04). Within five (5) calendar days after this report. Complainant's rights to appeal (including instructions for filing) will also be provided.

When a finding is appealed to the Title VI coordinator, a copy of the complaint, the findings, the proposed action, and the request for appeal must be forwarded to the Title VI Coordinator within ten (10) calendar days after the date of the appeal. Any coordinator handling complaints must maintain a Title VI complaint log to show identifying information, type, and status of each complaint filed.

The Aging Title VI coordinator must conduct and complete fact-finding within thirty (30) calendar days after receipt of the appeal and convey the findings in writing, to the concerned parties. At this point, a complainant who wishes to pursue the complaint may choose to appeal the charges to the federal level. Thus, these appeal rights should be explained to the complainant at this time.

There are no current complaints or complaints within this fiscal year.

5. List the total number of all contractors and provide the number and percentage of minority contractors, and the dollar amount and percentage expended with minority contractors.

The AAAD has sixteen (16) total contractors, four (4) of which are minority (2.5%). The dollar amount expended with minority contractors is \$92,950, which is 7% of the total spent.

6. Title VI requires agencies and sub-recipients to monitor contractors regarding the dissemination of the following information to the public: non-discriminatory policy, programs and services, complaint procedures, and minority participation on planning boards and advisory bodies. Describe the procedures taken to assure that this information is presented.

The Southwest TN Development District/Area Agency on Aging reaffirms its policies to afford all individuals the opportunity to participate in federal financially assisted programs and adopts the following provision:

"No person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

This policy applies to all services and programs operated by, or through contracts or subcontracts from the Southwest TN Development District Area Agency on Aging & Disability. In the Southwest Tennessee planning & service area, each grantee agency of federal funding shall insure compliance with provisions of Title VI. Whenever a planning or advisory body, such as a board or a committee is an integral part of the grantee's program, the agency will take such steps as are necessary to insure that minorities are notified of the existence of such bodies and are provided equal opportunity to participate as members. Where members of a board or committee are appointed by the Area Agency on Aging or a

grantee agency, minorities shall be represented at least in proportion to their presence in the general population of the service area.

It is the policy and intention of the Area Agency on Aging to comply fully with Title VI the Civil Rights of 1964 and to require similar compliance from all Title III contractors.

Any grantee agency found out of compliance with the provisions of Title VI shall be given a written notice. Failure to eliminate further discrimination within thirty (30) days of receipt of notice will be considered as a violation of the terms of the contract and a basis for contract suspension, termination, or rejection.

7. There is a need for a clear understanding of the demographic diversity of a region and methods to provide information and education to the underserved populations even when there are waiting lists, there are other opportunities/resources unknown to these groups. List the strategies to achieve this outreach within those identified communities.
  - a. Describe how the Area Agency plans and coordinates activities to disseminate information about services and programs to minority populations in the planning and service area?

The AAAD performs multiple outreach events every fiscal year. The events are targeted to reach a maximum amount of this underserved population. The Agency's information and materials are distributed at the annual outreach events, and periodically to grantee agencies located in the eight county service region. Many of these grantee agencies serve this underserved population.

- b. How is diversity reflected in all aspects of area planning—programming, participants, personnel, service providers, governing/advisory entities?

The Advisory Council of the Agency is comprised of 17 females, 8 males, 17 whites, 14 African Americans, 13 white females, 5 black females, 3 black males and 4 white males. The AAAD staff consists of 3 African American females, 21 white females, and 1 white male.

The minority population in Southwest TN is 74,578, which is 28.5 % of the total population. The Agency has served a total of 29% minority clients over the last fiscal year.

- c. What documentation or process is used by the Area Agency to document activities focused on increasing the representation and/or participation of minority populations in programs and services?

The annual Outreach and Education Plan is developed after analyzing three (3) years' worth of events. The Agency chooses which counties to focus outreach efforts on based on which populations and areas have not been adequately reached.

Senior Centers outreach events are monitored annually by the Agency to ensure that minority populations/communities are targeted.

**Older Americans Act Required Targeting Activities**

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; including 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 propose methods to achieve the objectives.

NOTE: Objectives and Tasks/Activities should cover Older Americans Act programs and may cover **all statewide programs** such as Single Point of Entry Marketing or SHIP.

OBJECTIVE	TASK / ACTIVITY	AREA AGENCY STAFF RESPONSIBLE
Provide timely information on all statewide programs to older adults and family caregivers	Utilize the AAAD’s Mobile ADRC in communities with a high percentage of targeted individuals	AAAD Director
Provide outreach and education on AAAD programs and services to older adults with low-income	Complete at least one (1) event quarterly at low-income senior housing within the service region	AAAD Director
Ensure all Agency partners receive information on services targeted towards hard to serve populations	Provide training annually to the Southwest InterAgency Council	SHIP Coordinator
Provide timely information through multiple sources to reach consumers	Utilize the AAAD’s robo call quarterly, social media posts weekly, and E-News blast monthly	AAAD Director

## AAAD STAFFING

1. Include an Organizational Chart for the Area Agency with staff names, position/title, and funding source.
2. List all new hires not included in the FY 2021 Area Plan Update. Include the following information:
  - Name and Position
    - Kichisa McGoughy, Asst. Public Guardian
    - Olivia Thompson, CHOICES Intake Nurse
    - Bethany Payne, MyRide Coordinator Henderson Co.
    - Allison Hurst, CREVAA Advocate
  - Full/Part time status (If the individual will have multiple roles, indicate each responsibility separately and the percent of time to be dedicated to each role)
    - Kichisa: 100 % PG
    - Olivia: 100% CHOICES
    - Bethany: 100% MyRide
    - Allison: 100% CREVAA
  - Required Qualifications (List the individual's qualifications)
    - Kichisa: BS in Business Administration, CNA, 27 yrs. LTC experience
    - Olivia: LPN, 4 yrs. LTC experience
    - Bethany: 2 years Senior Center Director/Assist. Director
    - Allison: MSW, 8 yrs. LTC experience
3. What is the name of the individual who directly supervises the Director of the Area Agency on Aging and Disability? Joe Barker
4. The total number of staff at the AAAD is: 26. Of the total number of AAAD staff the following are:
  - Age 60+: 8
  - Female: 25
  - Minority: 6
  - Disabled: 0
5. Provide the total number of FTE Options Counselors that manage an active caseload for OPTIONS, III-B In-home Services, III-C, and/or III-E.

Three (3)

6. What is the average caseload for Options Counselors managing cases for OPTIONS, III-B In-home Services, III-C, and/or III-E?

300

7. What is your plan for increasing capacity in programs with regards to Options Counselor’s caseloads as funding for programs increase?

The AAAD would have to hire an additional Option’s Counselor as current staff is over capacity.

Exhibit D-2

### Training and Staff Development Plan FY2022 (to be up-dated annually)

*\*Indicate if training is out-of-state in order to obtain pre-approval status. No additional TCAD approval will be required if listed here.*

Title & Subject of Training	Category & Number of Persons to be Trained			Estimated Date of Training
	AAAD Staff	Providers or Partners	Volunteers	
*American Society on Aging	2	0	0	April 2022
Elder Justice Conference	3	0	0	May 2022
Disaster Preparedness	26	13	0	July 2022
Civility Training	26	10	0	August 2022
Medicare Update	26	10	0	September 2022
*SE4A	3	0	0	September 2022
Alzheimer’s Conference	15	0	0	September 2022
Title VI/Civil Rights	26	18	5	October 2022
*NGA Conference	2	0	0	October 2022
TFA Conference	6	0	0	October 2022
Facing Future Choices Conference	15	0	0	November 2022
Staying Active (Healthy Aging)	26	0	0	November 2022
Food Insecurity	26	0	0	December 2022
Companion Care	26	0	0	January 2023
Aging & Isolation	26	0	0	February 2023
Memory Care/Early Signs of	26	10	0	March 2023



Dementia				
Person-Centered Planning	26	0	0	April 2023
PG/CAT Conference	2	0	0	April 2023
HIPAA/ Privacy Policy	26	0	0	May 2023
Cultural Competency	26	0	0	June 2023
Monthly Staff Meetings	26	0	0	Monthly
Qtrly. TCAD/AAAD Mtgs.	2	0	0	Quarterly
Qtrly. TennCare/AAAD Mtgs.	2	0	0	Quarterly
Monthly TennCare Conf. Call	6	0	0	Monthly
PG Monthly Conf. Call	2	0	0	Monthly
TCAD/AAAD Weekly Conf. Call	2	0	0	Weekly

Exhibit E-1

### Advisory Council

#### A. MEMBERSHIP and REPRESENTATION

Composition of Council: Choose among the following options to specify which category each Advisory Council member represents on the table below.

- a. Age 60+ (50% Older persons)
- b. Minority age 60+
- c. Minority age <60
- d. Resides in a Rural Area
- e. Family Caregiver
- f. Advocate for Older Persons
- g. Service Provider for Older Persons
- h. Advocate for Individuals with Disabilities
- i. Service Provider for Individuals with Disabilities
- j. Business Community
- k. Local Elected Official
- l. Provider of Veterans’ Health Care
- m. General Public (County Representative)
- n. Has a Disability

Members	Represents
James Bright	A,D,F
Gloria Holiday	A,B,D,F
Barry Smith	A,D,F
Gail Stanfill	A,B,D,F
Helen Porter	A,B,D,F
Gail Story	A,B,D,F

Eva Reynolds	A,B,D,F
Jessie Williams	A,B,D,F
Muriel Smith	A,B,D,F
Rose Morris	A,B,D,F
Edward Shirley	A,B,D,F
Bennie Waller	A,B,D,F
Richard Holland	A,D,F
Harry Scott	A,D,F
Levester Pritchard	A, B,D,F
Jean Jones	A,B,D,F
Joan Newman	A,B,F
Faye Bledsoe	A,B,F
Amanda Leitch	F,G
Regina Smith	F,G
Tena Fields	F,G
Ashley Holliday	F,G
Pam Newble	F,G
Sherion Currie	F,G
Rachel Horton	F,G

**B. SCHEDULE OF ADVISORY COUNCIL MEETINGS for FY 2019  
(Up-dated annually)**

Give Dates and Times of Scheduled Meetings

4<sup>th</sup> Wednesday of July, October, January, March

All meetings are held at the Southwest TN Development District and begin at 10:00 a.m. CST.

**C. OFFICERS & OFFICE**

<u>Name of Officer</u>	<u>Office</u>	<u>Date Term Expires</u>
Helen Porter	Chair	January 2023
Gail Stanfill	Treasurer	January 2023

**D. ADVISORY COUNCIL BYLAWS**

Attach Bylaws that show date of last review.

## Public Hearings on Area Plan

### A. PUBLIC HEARING INFORMATION

<b>Date(s)</b> of Public Hearing	3.23.2022
<b>Time(s)</b> when hearing was held	10:00 a.m.
<b>Place(s)</b> where hearing was held	Southwest Tennessee Development District, 102 E. College St., Jackson TN 38301
<b>Was Place Accessible?</b>	Yes, ramp in lobby
<b>Type of Notice(s) or Announcement(s)</b>	Legal Notice in the only regional newspaper (The Jackson Sun), multiple announcements on Facebook, SWTDD E-News Blast, letters to Advisory Council Members
<b>Date(s) of Notices or Announcements</b> (attach copy)	Jackson Sun: 3.6.2022 Facebook: 3.2.2022 & 3.22.2022 E-News: 3.11.2022

### B. ATTENDANCE\*

County	# of Advisory Council Members from County	Total from County**
Madison	4	8
Decatur	3	3
Henderson	2	5
Chester	1	3
Hardeman	2	2
McNairy	2	3
Hardin	0	1
Haywood	2	3
<b>Total # Advisory Council Members in column 2</b>	<b>16</b>	
<b>Total Attendance*</b>		<b>28</b>

\* Do not include AAAD staff in Public Hearing attendance

\*\* Include Advisory Council Members in column 3 so that the Total Attendance reflects everyone in attendance.

### C. AGENDA & ANNOUNCEMENTS

Attach a copy of the agenda. See P&P manual for required agenda topics. Attach one example of each type of notice sent out and describe who notices were sent to. If the AAAD is requesting a waiver for any reason, the agenda and announcement must include a statement that a waiver is being requested. Document efforts to outreach to rural, minority and low-income populations for their participation in this planning effort.

See attached. The only regional newspaper, The Jackson Sun, was utilized to reach targeted populations. Each county had a copy of the plan (at the local Senior Center) and comments were accepted through April 3<sup>rd</sup>. All Center Directors were notified of the Public Hearing and encouraged to invite their members. Announcements were also provided to providers and personal invitations extended to the Salvation Army and Rural Health.

**D. DESCRIPTION**

Include any other information about the Public Hearing. Mention any extenuating circumstances that affected attendance (weather, high proportion of sickness, etc.).

Rainy, dreary weather

**E. SUMMARY of PUBLIC COMMENTS**

Opportunity must be provided for comments on goals, budgets, and waivers.

See attached

**F. SUMMARY of CHANGES**

List changes made in this plan as a result of comments made at public hearing(s).

No changes made.

## **Advisory Council Participation in the Area Plan Process**

Describe how the Area Agency Advisory Council was involved in the development of the Area Plan.

1. Date(s) when the Area Plan was reviewed by the Advisory Council.

3.23.2022

2. Attach an agenda of the Area Plan review meeting or describe the review process including any alternative measures that were taken to review the Area Plan due to COVID-19.

Plan was sent to members on 3.14.2022; see attached notice.

3. List of Advisory Council members in attendance at the review meeting or who were actively involved in the review process. If the plans were emailed to Advisory Council Members due to COVID-19 include those members who reviewed and process for accepting and reviewing comments received.

See attached Roll.

4. Provide a summary of comments made by advisory council members about the completed plan.

Only comment made was by Ms. Jean Jones (McNairy County) who stated that she had never seen a Plan so completely and thoroughly presented and congratulated the AAAD staff.

5. Summary of Changes. List changes made in the plan as a result of comments made at Advisory Council review.

No changes made.

**Request for Waiver for FY2023-2026**

Southwest AAAD

**DIRECT PROVISION OF SERVICES PROVIDED BY OLDER AMERICANS ACT  
FUNDING**

**Please check the service(s) for which the AAAD is requesting waiver(s) to provide the service(s) directly instead of through contracts with area service providers. Then, answer the related questions under each service checked.**

X **Case Management** (also known as Service Coordination or Options Counseling)

1. List all agencies in the PSA that provide this service to elderly persons.

Wesley Housing, LIFT Disease Management, Pathways Behavioral Center, Quinco Behavioral Center, Humana, Amerigroup, Blue Cross, Americhoice, Jackson-Madison County General Hospital (during a hospitalization only)

2. Explain how the current level of service in the PSA is inadequate to meet the need.

Each of the entities above only provide service to their own consumers. For example, in order to receive case management service at Wesley Housing, the consumer must live in one of Wesley's facilities. To receive case management with an MCO, the consumer must be on Medicaid and enrolled with that MCO.

3. Explain how this service is directly related to the AAAD's administrative function.

The AAAD provides in-home services that require a face-to-face assessment. Case Management is necessitated by the in-home services provided and by the need for consumers to have an action plan that lists person-centered goals and needs.

4. Explain why it is more cost effective for the AAAD to provide this service than contracting it out on a unit cost contract. Include the AAAD cost per client for Case Management Services.

It is more cost effective based on rates within the service area. Based on the AAAD's research, the average rate for case management in the region is \$80-\$150 per hour. The AAAD cost per client is \$70.

**X Nutrition Services Administration**

(Note: Nutrition Site Waivers are no longer required because 2015 State Law now requires a minimum of 10 participants at each site. This State Law cannot be waived; sites with fewer participants must be closed.)

1. List all agencies in the PSA that provide this service to elderly persons.

Seven (7) hospitals within the PSA administer nutrition services to persons who are elderly and are being served within their facility. Also, the region has twenty (20) licensed nursing homes who administer nutrition within their own facilities. Twelve (12) assisted living facilities operate within the PSA and also provide nutrition administration. The Southwest Human Resource Agency also provides this service.

2. Explain how the current level of service in the PSA is inadequate to meet the need.

Hospitals, nursing homes, and assisted living facilities within the region only provide nutrition administration to persons who are in their care. Diversification funding opportunities were offered approximately twelve (12) years ago (through Medicaid), but no interest was shown. The Southwest Human Resource Agency used to provide this service for the AAAD, however the cost was higher than the cost of the AAAD administering directly.

3. Explain how this service is directly related to the AAAD's administrative function.

The AAAD already determines the eligibility of the participants and provides screening, assessment, and case management. Direct administration of the nutrition service is a natural extension of what the AAAD already does.

4. Explain why it is more cost effective and efficient for the AAAD to provide this service instead of contracting it out.

The AAAD is able to control the cost of operating individual nutrition sites in regards to supplies, salaries, etc. The Agency is also able to negotiate for lower meal rates directly instead of through a separate administrative agency. This ability allowed the AAAD to substantially increase the number of meals served previously.

**X Ombudsman**

1. List all agencies in the PSA that provide this service to elderly persons.

The AAAD is the only agency within the region that provides Ombudsman services to the elderly in Southwest TN. We provide LTCO and CLS Ombudsman services.



2. Explain how the current level of service in the PSA is inadequate to meet the need.

There is no other provider within the region.

3. Explain why it is a best practice for the AAAD to provide this service directly.

The AAAD already provides information and assistance to consumers on long-term care and residents rights. The Agency has many years of experience in educating consumers who have reached the point of no longer being able to live independently in their own homes and communities. The AAAD is trained to work with culturally diverse clients living in low-income situations and works directly with Medicaid long-term services and supports.

### X **National Family Caregiver Support Program**

(Note: NFCSP provides supportive services such as information and assistance, case management, outreach, individual counseling, support groups, caregiver training, and respite care and supplemental services. AAADs that provide information and assistance, case management, outreach, individual counseling, support groups, and caregiver training directly must complete a waiver.)

1. List all agencies in the PSA that provide this service to elderly persons.

Carl Perkins Center for Child Abuse

2. Explain how the current level of service in the PSA is inadequate to meet the need.

The only service provided by the Carl Perkins Center is for grandparents raising grandchildren. The AAAD does not provide that service. There are no other entities within the region serving caregivers of persons age sixty (60) and older.

3. Explain how this service is directly related to the AAAD's administrative function.

The AAAD already provides nutrition, in-home services, case management, counseling, and support to individuals who are sixty (60) and older and persons with a disability. These services are provided under state and federal programs.

4. Explain why it is more cost effective and efficient for the AAAD to provide this service instead of contracting it out.

The AAAD is the only entity providing the service within the region. The closest organization to the region that could provide the service is located in Memphis. The cost for the administration and services would outweigh what the current cost is to the AAAD.

**Legal Assistance**

1. List all agencies in the PSA that provide this service to elderly persons.
2. Explain how the service capacity in the PSA is inadequate to meet the need.
3. Explain why the Legal Services Corporation funded agency serving the region does not have the capacity to meet the need.

**Senior Center/Office on Aging**

1. List all agencies in the PSA that provide this service to elderly persons.
2. Explain how the current level of service in the PSA is inadequate to meet the need.
3. Explain why it is more cost effective and efficient for the AAAD to provide this service instead of contracting it out.

**X Other Transportation**

1. List all agencies in the PSA that provide this service to elderly persons.

Non-Emergency Transportation providers:

MyRide West TN- currently only in Madison and Henderson Counties

Southwest HRA- Medicaid medical trips, and other rural pick up and delivery

Madison Transport- Medicaid medical trips

Jackson Transit Authority- only in the city of Jackson, also offers LIFT (disability) transportation

United Coachways- medical shuttle service

PrimeCare Transport Services

Medic-long distance transportation

2. Explain how the current level of service in the PSA is inadequate to meet the need.

Current programs do not provide assisted transportation for older adults who require more help getting out of their homes, into vehicles, and into and out of the destination. The AAAD receives numerous calls weekly from consumers who have been refused by the rural transportation provider due to not enough drivers or not enough people going to the destination. The rural transportation provider under contract with the AAAD to provide transportation under Title III has not billed for any service provided in over two years.

3. Explain how this service is directly related to the AAAD's administrative function.

The AAAD currently administers the Senior Volunteer Transportation Network which has developed twenty-two programs across the state over the past three years. Eight new

programs will be developed in 2022. Transportation is directly related to function of the AAAD to provide services to consumers in rural and low-income areas.

4. Explain why it is more cost effective for the AAAD to provide this service than contracting it out.

The MyRide program will provide the transportation service utilizing Title III dollars. This is a volunteer-based transportation program, hence there will be no cost-per-ride charged to the AAAD. Monies will be utilized for the program coordinator, background checks for volunteers, and liability insurance for the drivers.

SIGNATURES:

Shelley Hale  
AAAD Director

3.22.2022  
Date

J. M. Burk  
Chief Administrative Officer of Grantee Agency

3/22/2022  
Date

Melan Porter  
Advisory Council Chairperson

3-28-22  
Date

Exhibit D-3.2

**Request for Waiver for FY \_\_\_\_\_**

\_\_\_\_\_ **AAAD**

**FIVE DAY REQUIREMENT**

Background: The Older Americans Act requires that nutrition projects provide at least one meal per day for five or more days per week. TCAD, as State Unit on Aging, may authorize a lesser frequency under certain circumstances (42 USC 3030e; 42 USC 3030f). TCAD’s implementation of this requirement is as follows:

- Sites located in counties containing only rural-designated areas (see Table 1 below) may serve meals less than five days per week by requesting a waiver from the site.
- Sites located in counties containing urban-designated areas (see Table 2 below) may serve meals less than five days per week provided that meals are served five days per week by the combined operations of all sites within the county.

If an AAAD wishes to request a waiver of the five day requirement for any of its sites per the criteria outlined above, please note in Column A: *Requesting Five Day Waiver for Site* of the Area Plan Nutrition Site Listing spreadsheet.

SIGNATURES:

\_\_\_\_\_  
AAAD Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief Administrative Officer of Grantee Agency

\_\_\_\_\_  
Date

\_\_\_\_\_  
Advisory Council Chairperson

\_\_\_\_\_  
Date



**Request for Waiver for FY \_\_\_\_  
REQUIRED MINIMUM EXPENDITURES FOR PRIORITY SERVICE**

*Required minimums:*

- a. *Services associated with access to other services: including but not limited to information and referral, case management, transportation, and outreach (35%)*
- b. *In-home services - (10%)*
- c. *Legal assistance (2%).*

1. AAAD: \_\_\_\_\_
2. Service Category: \_\_\_\_\_
3. Required minimum expenditure for this priority service using the required minimum percentage: \$ \_\_\_\_\_
4. Actual expenditure of Title III (federal funds only) for this service during the past fiscal year
5. Expenditure amount requested under this waiver
6. Justify the request for waiver by explaining the:
  - a. Projected impact on other services, using documented facts and figures (attach documentation);
  - b. Projected impact on this service, using documented fact and figures (attach documentation), and
  - c. Projected impact on level of service needs and availability throughout the PSA.
7. Outline AAAD plan and timeframe for achieving the required minimum funding level.

**SIGNATURES**

\_\_\_\_\_  
AAAD Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief Administrative Officer of Grantee Agency

\_\_\_\_\_  
Date

\_\_\_\_\_  
Advisory Council Chairperson

\_\_\_\_\_  
Date

**Request for Waiver FY \_\_\_\_  
COST SHARE REQUIREMENT**

1. List Service(s) for which cost share waiver is requested.
2. Check below the basis for waiver request.  
  
\_\_\_ a. A significant proportion of persons receiving the Older Americans Act services listed above have incomes below 200% of the Federal Benefit Rate.  
  
\_\_\_ b. Cost sharing would be an unreasonable administrative or financial burden on the area agency.
3. Justify the request for waiver based on the proportion of low-income individuals participating in services affected by cost share.
4. Justify the request for waiver explaining the negative impact of cost share on area agency administration or financial responsibilities.
5. Attachments: At the end of Request for Waiver(s) attach the following items:
  - a. List all agencies, providers, and individuals that received personal notice of public hearings (attach copy of letter sent).
  - b. List all publications which carried public notice of public hearings and indicate circulation of each. (Attach a copy of notice.)
  - c. Record of public hearings. The record shall detail all written and oral testimony regarding the area agency's intention to request the waiver specified above.

**SIGNATURES**

\_\_\_\_\_  
AAAD Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief Administrative Officer of Grantee Agency

\_\_\_\_\_  
Date

\_\_\_\_\_  
Advisory Council Chairperson

\_\_\_\_\_  
Date

**Request for Waiver for FY \_\_\_\_\_  
TCAD POLICY REQUIREMENT**

1. AAAD: \_\_\_\_\_
2. TCAD Policy for which waiver is requested:
  
3. Reference location of specific TCAD policy for which waiver is requested:
  
4. Give full justification for this waiver request by documenting all efforts of the AAAD to meet the requirement and specific barriers to meeting the requirements.
  
5. Outline steps the AAAD will take to meet the requirements, giving specific dates of accomplishment for each step.

**SIGNATURES:**

\_\_\_\_\_  
AAAD Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief Administrative Officer of Grantee Agency

\_\_\_\_\_  
Date

\_\_\_\_\_  
Advisory Council Chairperson

\_\_\_\_\_  
Date



## ASSURANCES

### Older Americans Act (2020) Assurances of Compliance

#### AREA PLANS

SEC. 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). Each such plan shall—

(1) provide, through a comprehensive and coordinated system, for supportive services, nutrition services, and, where appropriate, for the establishment, maintenance, modernization, or construction of multipurpose senior centers (including a plan to use the skills and services of older individuals in paid and unpaid work, including multigenerational and older individual

to older individual work), within the planning and service area covered by the plan, including determining the extent of need for supportive services, nutrition services, and multipurpose senior centers in such area (taking into consideration, among other things, the number of older individuals with low incomes residing in such area, the number of older individuals who have greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals who have greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals at risk for institutional placement residing in such area, and the number of older individuals who are Indians residing in such area, and the efforts of voluntary organizations in the community), evaluating the effectiveness of the use of resources in meeting such need, and entering into agreements with providers of supportive services, nutrition services, or multipurpose senior centers in such area, for the provision of such services or centers to meet such need;

(2) 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—

(A) services associated with access to services (transportation, health services (including mental and behavioral health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services);

(B) in-home services, including supportive services for families of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance;

and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded;

(3)(A) designate, where feasible, a focal point for comprehensive service delivery in each community, giving special consideration to designating multipurpose senior centers (including multipurpose senior centers operated by organizations referred to in paragraph (6)(C)) as such focal point; and

(B) specify, in grants, contracts, and agreements implementing the plan, the identity of each focal point so designated;

(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);

(iii) 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

(iii) with respect to the fiscal year preceding the fiscal year for which such plan is prepared—

(I) identify the number of low-income minority older individuals in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the area agency on aging met the objectives described in clause (i);

(B) provide assurances that the area agency on aging will use outreach efforts that will—

(i) identify individuals eligible for assistance under this Act, with special emphasis on—

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

(VI) older individuals with Alzheimer's disease and related disorders with neurological and organic

brain dysfunction (and the caretakers of such individuals); and

(VII) older individuals at risk for institutional placement, specifically including survivors of the Holocaust; and

(ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance; and

(C) contain an assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas;

(5) provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities;

(6) provide that the area agency on aging will—

(A) take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan;

(B) serve as the advocate and focal point for older individuals within the community by (in cooperation with agencies, organizations, and individuals participating in activities under the plan) monitoring, evaluating, and commenting upon all policies, programs, hearings, levies, and community actions which will affect older individuals;

(C)(i) where possible, enter into arrangements with organizations providing day care services for children, assistance to older individuals caring for relatives who are children, and respite for families, so as to provide opportunities for older individuals to aid or assist on a voluntary basis in the delivery of such services to children, adults, and families;

(ii) if possible regarding the provision of services under this title, enter into arrangements and coordinate with organizations that have a proven record of providing services to older individuals, that—

(I) were officially designated as community action agencies or community action programs under section

210 of the Economic Opportunity Act of 1964 (42

U.S.C. 2790) for fiscal year 1981, and did not lose the designation as a result of failure to comply with such Act; or

(II) came into existence during fiscal year 1982 as direct successors in interest to such community action agencies or community action programs;

and that meet the requirements under section 676B of the Community Services Block Grant Act; and

(iii) make use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing such services and, if possible, work in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as

organizations carrying out Federal service programs administered by the Corporation for National and Community Service), in community service settings;

(D) 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 older individuals, service providers, 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;

(E) establish effective and efficient procedures for coordination of—

(i) entities conducting programs that receive assistance under this Act within the planning and service area served by the agency; and

(ii) entities conducting other Federal programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b), within the area;

(F) in coordination with the State agency and with the State agency responsible for mental and behavioral health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental and behavioral health services (including mental health screenings) provided with funds expended by the area agency on aging with mental and behavioral health services provided by community health centers and by other public agencies and nonprofit private organizations;

(G) if there is a significant population of older individuals who are Indians in the planning and service area of the area agency on aging, the area agency on aging shall conduct outreach activities to identify such individuals in such area and shall inform such individuals of the availability of assistance under this Act;

(H) in coordination with the State agency and with the State agency responsible for elder abuse prevention services, increase public awareness of elder abuse, neglect, and exploitation, and remove barriers to education, prevention, investigation, and treatment of elder abuse, neglect, and exploitation, as appropriate; and

(I) <sup>7</sup> to the extent feasible, coordinate with the State agency to disseminate information about the State assistive technology entity and access to assistive technology options for serving older individuals;

(7) provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by—

(A) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care;

(B) conducting analyses and making recommendations with respect to strategies for modifying the local system of long-term care to better—

(i) respond to the needs and preferences of older individuals and family caregivers;

(ii) facilitate the provision, by service providers, of long-term care in home and community-based settings; and

(iii) target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings;

(C) implementing, through the agency or service providers, evidence-based programs to assist older individuals and their family caregivers in learning about and making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals; and

(D) providing for the availability and distribution (through public education campaigns, Aging and Disability Resource Centers, the area agency on aging itself, and other appropriate means) of information relating to—

(i) the need to plan in advance for long-term care; and the full range of available public and private long-term care (including integrated long-term care) programs, options, service providers, and resources;

(8) provide that case management services provided under this title through the area agency on aging will—

(A) not duplicate case management services provided through other Federal and State programs;

(B) be coordinated with services described in subparagraph (A); and

(C) be provided by a public agency or a nonprofit private agency that—

(i) gives each older individual seeking services under this title a list of agencies that provide similar services within the jurisdiction of the area agency on aging;

(ii) gives each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipt by such individual of such statement;

- (iii) has case managers acting as agents for the individuals receiving the services and not as promoters for the agency providing such services; or
  - (iv) is located in a rural area and obtains a waiver of the requirements described in clauses (i) through (iii);
- (9) provide assurances that—
- (A) 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 2019 in carrying out such a program under this title; and
  - (B) funds made available to the area agency on aging pursuant to section 712 shall be used to supplement and not supplant other Federal, State, and local funds expended to support activities described in section 712;
- (10) provide a grievance procedure for older individuals who are dissatisfied with or denied services under this title;
- (11) provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as “older Native Americans”), including—
- (A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;
  - (B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and
  - (C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans; and
- (12) provide that the area agency on aging will establish procedures for coordination of services with entities conducting other Federal or federally assisted programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b) within the planning and service area.
- (13) provide assurances that the area agency on aging will—
- (A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.
  - (B) disclose to the Assistant Secretary and the State agency—
    - (i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
    - (ii) the nature of such contract or such relationship;
  - (C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contract or such relationship;
  - (D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contract or such relationship; and
  - (E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals;
- (14) provide assurances that preference in receiving services under this title will not be given by the area agency on aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title;
- (15) provide assurances that funds received under this title will be used—
- (A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and
  - (B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;
- (16) provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care;
- (17) include information detailing how the area agency on aging will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for disaster relief service delivery;
- (18) provide assurances that the area agency on aging will collect data to determine—
- (A) the services that are needed by older individuals whose needs were the focus of all centers funded under title IV in fiscal year 2019; and
  - (B) the effectiveness of the programs, policies, and services provided by such area agency on aging in assisting such individuals; and

(19) 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 those individuals whose needs were the focus of all centers funded under title IV in fiscal year 2019.

(20) (b)(1) An area agency on aging may include in the area plan an assessment of how prepared the area agency on aging and service providers in the planning and service area are for any anticipated change in the number of older individuals during the 10-year period following the fiscal year for which the plan is submitted.

(2) Such assessment may include—

(A) the projected change in the number of older individuals in the planning and service area;

(B) an analysis of how such change may affect such individuals, including individuals with low incomes, individuals with greatest economic need, minority older individuals, older individuals residing in rural areas, and older individuals with limited English proficiency;

(C) an analysis of how the programs, policies, and services provided by such area agency can be improved, and how resource levels can be adjusted to meet the needs of the changing population of older individuals in the planning and service area; and

(D) an analysis of how the change in the number of individuals age 85 and older in the planning and service area is expected to affect the need for supportive services.

(3) An area agency on aging, in cooperation with government officials, State agencies, tribal organizations, or local entities, may make recommendations to government officials in the planning and service area and the State, on actions determined by the area agency to build the capacity in the planning and service area to meet the needs of older individuals for—

(A) health and human services;

(B) land use;

(C) housing;

(D) transportation;

(E) public safety;

(F) workforce and economic development;

(G) recreation;

(H) education;

(I) civic engagement;

(J) emergency preparedness;

(K) protection from elder abuse, neglect, and exploitation;

(L) assistive technology devices and services; and

(M) any other service as determined by such agency.

(c) Each State, in approving area agency on aging plans under this section, shall waive the requirement described in paragraph

(2) of subsection (a) for any category of services described in such paragraph if the area agency on aging demonstrates to the State agency that services being furnished for such category in the area are sufficient to meet the need for such services in such area and had conducted a timely public hearing upon request.

(d)(1) Subject to regulations prescribed by the Assistant Secretary, an area agency on aging designated under section 305(a)(2)(A) or, in areas of a State where no such agency has been designated, the State agency, may enter into agreement with agencies administering programs under the Rehabilitation Act of 1973, and titles XIX and XX of the Social Security Act for the purpose of developing and implementing plans for meeting the common need for transportation services of individuals receiving benefits under such Acts and older individuals participating in programs authorized by this title.

(2) In accordance with an agreement entered into under paragraph (1), funds appropriated under this title may be used to purchase transportation services for older individuals and may be pooled with funds made available for the provision of transportation services under the Rehabilitation Act of 1973, and titles XIX and XX of the Social Security Act.

(e) An area agency on aging may not require any provider of legal assistance under this title to reveal any information that is protected by the attorney-client privilege.

(f)(1) If the head of a State agency finds that an area agency on aging has failed to comply with Federal or State laws, including the area plan requirements of this section, regulations, or policies, the State may withhold a portion of the funds to the area agency on aging available under this title.

(2)(A) The head of a State agency shall not make a final determination withholding funds under paragraph (1) without first affording the area agency on aging due process in accordance with procedures established by the State agency.

(B) At a minimum, such procedures shall include procedures for—

(i) providing notice of an action to withhold funds;

(ii) providing documentation of the need for such action; and

(iii) at the request of the area agency on aging, conducting a public hearing concerning the action.

(3)(A) If a State agency withholds the funds, the State agency may use the funds withheld to directly administer programs under this title in the planning and service area served by the area agency on aging for a period not to exceed 180 days, except as provided in subparagraph (B).

(B) If the State agency determines that the area agency on aging has not taken corrective action, or if the State agency does not approve the corrective action, during the 180-day period described in subparagraph (A), the State agency may extend the period for not more than 90 days.

**SEC. 374. MAINTENANCE OF EFFORT.**

Funds made available under this part shall supplement, and not supplant, any Federal, State, or local funds expended by a State or unit of general purpose local government (including an area agency on aging) to provide services described in section 373.

**Certification by Authorized Agency Official**

*(Insert name of AAAD)* hereby gives full assurance that every effort will be made to comply with the regulations of the Older Americans Act.

**SIGNATURES**

Shelley Hale  
AAAD Director

Date 3.22.2022

[Signature]  
Grantee Agency Director

Date 3/22/2022

## Availability of Documents

*(Insert name of AAAD)* hereby gives full assurance that the following documents are current and maintained in the administrative office of the AAAD and will be filed in such a manner as to ensure ready access for inspection by TCAD or its designees at any time. The AAAD further understands that these documents are subject to review during quality assurance visits by TCAD.

1. Current policy making board member roster, including officers
2. Applicable current licenses
3. AAAD Advisory Council By-Laws and membership list
4. AAAD staffing plan
  - a. position descriptions (signed by staff member)
  - b. staff resumes and performance evaluations
  - c. documentation that staff meet the educational and experience requirements of the position and that appropriate background checks have been completed
  - d. equal opportunity hiring policies and practices
  - e. organizational chart with employee names
5. Personnel Policy Manual of grantee agency
6. Financial procedures manual in accordance with TCAD policies
7. Program procedures manual
8. Interagency agreements, if applicable
9. Insurance verification (general professional liability such as errors and omissions, officers and directors, etc.)
10. Bonding verification
11. Affirmative Action Plan
12. Civil Rights Compliance Plan, title VI plan
13. Conflict of Interest policy
14. Grievance Procedure and designated staff member

15. Documentation of public forums conducted in the development of the area plan, including attendance records and feedback from providers, consumers, and caregivers, and participation of target groups, low income, minority, rural.
16. Americans with Disabilities Act (ADA) policies, ADA Existing Facility Checklist and report on barrier removal
17. Documentation of match commitments for cash, voluntary contributions and building space, as applicable
18. Financial Reports, or if applicable, copy of audited copy of Financial Report of service providers
19. Emergency Preparedness/Disaster Plan
20. Drug-Free Workplace policies
21. Confidentiality and HIPAA policies
22. Individual background information for newly hired employees and volunteers who provide direct care for, have direct contact with, or have direct responsibility for the safety and care of older persons and adults with disabilities in their homes.

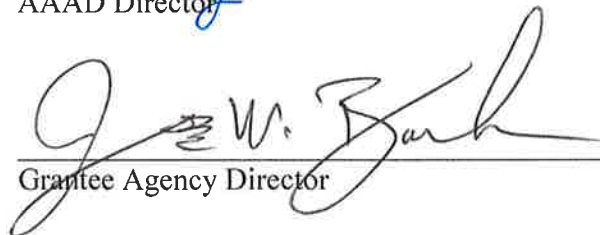
**Certification by Authorized Agency Official**

I hereby certify that the documents identified above currently exist and are properly maintained in the administrative office of the Area Agency on Aging and Disability. Assurance is given that TCAD or its designee will be given immediate access to these documents, upon request.

**SIGNATURES**

  
\_\_\_\_\_  
AAAD Director

Date 3.22.22

  
\_\_\_\_\_  
Grantee Agency Director

Date 3/22/2022



## **Title VI of the Civil Rights Act of 1964 Compliance**

The Southwest Area Agency on Aging and Disability reaffirms its policies to afford all individuals the opportunity to participate in federal financially assisted programs and adopts the following provision:

“No person in the United States, shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.”

This policy applies to all services and programs operated by, or through contracts or subcontracts from the Southwest Area Agency on Aging and Disability.

Prohibited practices include:

1. Denying any individual any services such as: congregate meals, in-home services, and information and assistance; opportunity to serve as a volunteer, advisor, or member of a policy board, positions of leadership, or other benefit for which he/she is otherwise qualified.
2. Providing any individual with any service, or other benefit, which is different or is provided in a different manner from that which is provided to others under the program, such as the selection of menu items, the mode of style of service, or the manner of conveyance in transportation.
3. Subjecting any individual to segregated or separate treatment in any manner related to that individuals receipt of service, including congregate meals in separate sites or facilities, senior center services in separate sites or facilities, or employment services in separate sites or facilities.
4. Restricting an individual in any way in the enjoyment of services, facilities or any other advantage, privilege, or other benefit provided to others under the program.
5. Adopting methods of administration which would limit participation by any group of recipients or subject them to discrimination, including submitting bids for services and receiving contracts or subcontracts; and personnel practices such as hiring, firing, and granting raises.
6. Addressing an individual in a manner that denotes inferiority because of race, color, or national origin.

The Southwest Area Agency on Aging and Disability shall appoint a Title VI coordinator to ensure that the Area Agency on Aging and Disability and all service providers comply with the provision of Title VI. Whenever a planning or advisory body, such as a board or a committee is an integral part of the Area Agency on Aging and Disability or service

provider program, the Area Agency on Aging and Disability will take such steps as are necessary to ensure that minorities are notified of the existence of such bodies and are provided equal opportunity to participate as members. Where members of a board or committee are appointed by the area agency or service provider agency, minorities shall be represented at least in proportion to their presence in the general population of the service area.

**SIGNATURES**

Shelley Hall  
AAAD Director

Date 3.22.22

Joe W. Burch  
Grantee Agency Director

Date 3/22/2022

## Area Plan Revision - OPTIONS 2.0 Funding

1. Complete the following table with current waitlist information:

<b>Number of Individuals on OPTIONS Category A Waiting List</b>	39
<b>Number of Individuals on OPTIONS Category B Waiting List</b>	39

2. Complete the following table with overall OPTIONS 2.0 funding projection:

	<b>FY 2023 – Projected (Served/Units)</b>
<b>State – Options Allocation Amount</b>	\$515,000
<b># Served</b>	115
<b>Units of Service</b>	24,000

Describe the methodology for the projections listed above.

Southwest AAAD will serve 115 consumers with 4 hours per week of PC and/or Homemaker services, according to the need of the consumer.

3. OPTIONS 2.0 funding is intended to serve those currently on the both category A and B waiting lists for services, please describe your plan for addressing the individuals on the waiting list.

Southwest AAAD currently has a total of 78 people on the Options waitlist. All 78 clients will be removed from the waitlist with the Options 2.0 funding.

4. Please outline overall strategies or plans that your AAAD will make to ensure that funds for both OPTIONS and OPTIONS 2.0 are maximized to ensure that funds are expended within the state fiscal year.

In past years, Southwest made the choice as an agency to serve more consumers with minimal services in order to reach the maximum number of consumers. With the new Options 2.0 funding, case managers will assess each client and offer more hours of service to those who will benefit.

After the waitlist has been addressed, we will also review to determine if any current consumers could benefit from additional services.

5. If infrastructure changes need to occur with OPTIONS 1.0 funding, as a result of the additional OPTIONS 2.0 funding, please outline those changes below:

Due to the extra case load of the Options 2.0 funds, southwest will move consumers with greater need over to Options 2.0 funding after the waitlist has been addressed. This will allow Options 1.0 funds to be used on additional case management staffing.

6. If additional types of services will be offered outside of Personal Care, Homemaker, In-home Respite, and Adult Day Care, please list additional services, projected budget and service amounts. Complete the following table:

<b>Type of Service</b>	<b>FY 2023 – Projected (Budget Amount)</b>	<b>FY 2023 – Projected (Persons Served)</b>	<b>FY 2023 – Projected (Units Served)</b>
<b>For Example, Transportation, Home Mods, Assistive Technology</b>			

Describe the methodology for the projections listed above.