

San Bernardino County Area Agency on Aging

Planning and Service Area 20

2021 – 2022 Area Plan Update

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AREA PLAN UPDATE (APU) CHECKLIST **PSA 20**
Check one: **FY21-22** **FY 22-23** **FY 23-24**
Use for APUs only

AP Guidance Section	APU Components (To be attached to the APU)	Check if Included	
	➤ <i>Update/Submit A) through I) ANNUALLY:</i>		
n/a	A) Transmittal Letter- (requires <i>hard copy with original ink signatures or official signature stamp-no photocopies</i>)	<input checked="" type="checkbox"/>	
n/a	B) APU- (submit entire APU electronically only)	<input checked="" type="checkbox"/>	
2, 3, or 4	C) Estimate- of the number of lower income minority older individuals in the PSA for the coming year	<input checked="" type="checkbox"/>	
7	D) Public Hearings- that will be conducted	<input checked="" type="checkbox"/>	
n/a	E) Annual Budget	<input checked="" type="checkbox"/>	
10	F) Service Unit Plan (SUP) Objectives and LTC Ombudsman Program Outcomes	<input checked="" type="checkbox"/>	
18	G) Legal Assistance	<input checked="" type="checkbox"/>	
	<i>Update/Submit the following only if there has been a CHANGE or the section was not included in the 2020-2024 Area Plan:</i>	Mark Changed/Not Changed (C or N/C) C N/C	
5	Minimum Percentage/Adequate Proportion	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5	Needs Assessment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	AP Narrative Objectives:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• System-Building and Administration	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIIB-Funded Programs	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9	• Title IIIB-Transportation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIIB-Funded Program Development/Coordination (PD	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIIC-1	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIIC-2	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIID	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20	• Title IIIE-Family Caregiver Support Program	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• HICAP Program	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12	Disaster Preparedness	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14	Notice of Intent-to Provide Direct Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15	Request for Approval-to Provide Direct Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16	Governing Board	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17	Advisory Council	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21	Organizational Chart(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

AAA Name: San Bernardino County Department of Aging and Adult Services **PSA:** 20

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

1. Curt Hagman

 Signature: Governing Board Chair¹

 Date

2. Linda Titus

 Signature: Advisory Council Chair

 Date

3. Sharon Nevins

 Signature: Area Agency Director

 Date

¹ Original signatures or official signature stamps are required.

SECTION 2. DEMOGRAPHIC DATA

The demographic information detailed below comes from a variety of sources including the US Census and the State of California. Detailed information on the Elder Economic Security Index is provided by UCLA Center for Health Policy Research.

2020 California Department of Aging Population Demographic Projections for San Bernardino County

The latest available data from California Department of Aging was prepared in 2019 as part of the Intrastate Funding Formula (IFF).

	Population 60+	Non-Minority 60+	Minority 60+	Low Income 60+	Medi-Cal Eligible 60+
Number of Persons	403,844	198,964	204,880	52,450	88,649
Percent of California 60+ Population	4.56%				
Percent of SB County Population 60+	N/A	49.27%	50.73%	12.99%	21.95%

Total California population 60 + = 8,822,132

	Geo. Isolation 60+	SSI/SSP 65+	Population 75+	Lives Alone 60+	Non-English 60+
Number Of Persons	21,182	25,395	107,928	58,260	18,790
Percent of SB County Population 60+	5.25%	6.29%	26.73%	14.43%	4.65%

Source: California Aging Population Demographic Projections for Interstate Funding Formula
http://www.aging.ca.gov/Data_and_Statistics/

From 2016 to 2019, the 60+ population for the IFF for the County has increased by 15.8%. Based on the projections of the United States Census Bureau, as of July 1, 2019, 11.6 % of the population in San Bernardino consisted of adults 65 and older. This increase in

population does not include the growth in the 60 to 64 age group.

SECTION 7. PUBLIC HEARINGS

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

Fiscal Year	Date	Location	Number of Attendees	Presented in languages other than English?² Yes or No	Was hearing held at a Long-Term Care Facility?³ Yes or No
2020-2021	March 12, 2020	784 E. Hospitality Ln. San Bernardino, CA	13	No	No
2021-2022	March 17, 2021	784 E. Hospitality Ln. San Bernardino, CA via WebEx	42	No	No
2022-2023					
2023-2024					

1. A translator is not required unless the AAA determines a significant number of attendees require translation services.
2. AAAs are encouraged to include individuals in LTC facilities in the planning process, but hearings are not required to be held in LTC facilities.

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

1. Summarize the outreach efforts used in seeking input into the Area Plan from institutionalized, homebound, and/or disabled older individuals.

A Public Hearing was scheduled for March 17, 2021 and advertised in the San Bernardino Sun 30 days prior in accordance with California Code of Regulations, 22 CA Section 7308. The Hearing was conducted via WebEx due to safety concerns in response to COVID-19

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

Yes. Go to question #3

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

3. Summarize the comments received concerning proposed expenditures for PD and/or C
4. Attendees were provided the opportunity to testify regarding setting minimum percentages of Title III B program funds to meet the adequate proportion of funding for Priority Services.

Yes. Go to question #5

No, Explain:

During the public hearing for the 2020-2024 Area Plan, the Area Agency on Aging described the priority services, what services were included in each category, and the minimum percentage of funds proposed. The public did not comment on the subject.

5. Summarize the comments received concerning minimum percentages of Title IIIB funds to meet the adequate proportion of funding for priority services.
 - See number 4.
6. List any other issues discussed or raised at the public hearing.
 - Minutes from the Public Hearing held during the Senior Affairs Commission general session are attached.
7. Note any changes to the Area Plan which were a result of input by attendees.
 - From the development of the 2021-2022 Area Plan Update
 - Added clarifying language throughout the document. No other resulted from input received.

SECTION 9. AREA PLAN NARRATIVE GOALS AND OBJECTIVES

Goal #1: Focused Outreach to disseminate information and educate older adults, adults with disabilities and caregivers on available resources within PSA 20.			
Rationale: There is a need for information and outreach particularly in rural and geographically isolated areas. The non-use of available services and resources is due to a lack of knowledge and awareness that they exist. Collaboration with other public entities and service providers will increase awareness of resources available to improve the quality of life for older adults, adults with disabilities, and caregivers.			
List Objective Number(s) and Objective(s) [Refer to CCR Article 3, Section 7300 (c)]	Project ed Start and End Dates	Title IIIB Funded PD or C²	Update Status³
Objective #1: Participate and present information in quarterly meetings with the Senior Affairs Commission, Regional Councils on Aging and service providers to increase awareness of OAA resources for older adults, adults with disabilities, and caregivers throughout San Bernardino County.	07/01/20 – 06/30/24		Continued
Objective #2: Senior Information and Assistance staff will provide outreach to targeted populations which include the following categories: minority 60 plus, low income 60 plus, geo-isolation 60 plus, and the Lesbian, Gay, Bisexual and Transgender (LGBT) community.	07/01/20 – 06/30/24		Continued
Objective #3: Senior Information and Assistance staff will strengthen the awareness of PSA 20 programs and services by distributing comprehensive outreach materials at senior centers, senior housing complexes, health fairs, senior expos, and various senior related community events.	07/01/20 – 06/30/24		Continued
Objective #4: Program Analyst will partner with providers to expand information about OAA programs to their clients. This will include distribution of informational flyers at congregate meal sites as well as delivery to C-2 clients at least annually.	07/01/20 – 06/30/24		Continued
Objective #5: Quarterly presentations by DAAS staff on the number of Area Plan service units for direct and indirect services at the Senior Affairs Commission Meetings.	07/01/20 – 06/30/24		Continued
Objective #6: During the COVID-19 pandemic, DAAS staff will increase client phone calls to provide socially-distant outreach to targeted populations.	07/01/20 – 06/30/24		Continued

² Indicate if Program Development (PD) or Coordination (C) is the objective (cannot be both). If a PD objective is not completed in the timeline required and is continuing in the following year, any objective revision must state additional tasks.

³ Use for the Area Plan Updates only to indicate if the objective is New, Continued, Revised, Completed, or Deleted

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Goal #2: PSA 20 will evaluate and strengthen current services under the Family Caregiver Support Program (FCSP) for caregivers in order to ensure older adults, adults with disabilities, their families or informal caregivers receive information that will assist with their care and conditions.

Rationale: A need for information regarding caregiving services was identified. In order to improve the quality and quantity of informal care, it is essential for caregivers to be aware of available support services and programs available through PSA 20.

List Objective Number(s) and Objective(s) [Refer to CCR Article 3, Section 7300 (c)]	Projected Start and End Dates	Title IIIB Funded PD or C ²	Update Status ³
Objective #1: Increase awareness of programs and services to informal caregivers through focused outreach efforts by Senior Information and Assistance staff by providing community education on caregiving, and caregiving information and assistance at senior centers.	07/01/20 - 06/30/24		Continued
Objective #2: Senior Information and Assistance staff will attend and distribute Family Caregiver Support Program information at senior centers, senior housing complexes, health fairs, Senior Expos, and all age related community events.	07/01/20 - 06/30/24		Continued
Objective #3: Collaborate with providers of service to evaluate and monitor the effectiveness of caregiving outreach, public information, community education, caregiver training, and care giver information and assistance.	07/01/20 - 06/30/24		Continued
Objective #4: Work with providers to ensure that caregivers are receiving current and pertinent information on topics related to caregiving.	07/01/20 - 06/30/24		Continued
Objective #5: Work with providers to ensure that outreach efforts are conveying the availability of all Title E service categories.	07/01/20 - 06/30/24		Continued

² Indicate if Program Development (PD) or Coordination (C) is the objective (cannot be both). If a PD objective is not completed in the timeline required and is continuing in the following year, any objective revision must state additional tasks.

³ Use for the Area Plan Updates only to indicate if the objective is New, Continued, Revised, Completed, or Deleted.

Goal #3: Certifying quality of services of contractors.			
Rationale: The quality of services and delivery of services by contractors will be improved through the use of quality assurance protocols and consistent performance monitoring in order to address the needs of program clients.			
List Objective Number(s) and Objective(s) [Refer to CCR Article 3, Section 7300 (c)]	Project d Start and End Dates	Title IIIB Funded PD or C²	Update Status³
Objective #1: Program Analysts will collect and review summaries of customer satisfaction surveys distributed by service providers. The results will be analyzed and provide discussed with the service providers. Feedback may include, but not be limited to positive comments, areas of improvement, and recommendations for additional services not currently offered. The Analyst will also provide technical assistance and suggestions to the service providers on survey results and development of survey questions.	07/01/20 - 06/30/24		Continued
Objective #2: Survey results will be analyzed and the delivery of services will be discussed in the quarterly provider meetings to ensure concerns are being addressed and plans of correction are developed if necessary.	07/01/20 - 06/30/24		Continued
Objective #3: Provider service unit targets will be monitored monthly by the assigned Analyst, and discussed in the monthly Provider Service Unit Report meetings to monitor performance targets of providers.	07/01/20 - 06/30/24		Continued
Objective #4: Program monitoring will be conducted at least annually and more frequently if indicated by the Program Analyst to measure performance on established contract service unit targets as well as all elements of the required provider work plan.	07/01/20 - 06/30/24		Continued
Objective #5: Fiscal monitoring will be conducted at least annually and more frequently if indicated to ensure that all program funding is expended as required by regulations and to ensure services are being provide in the most cost effective manner.	07/01/20 - 06/30/24		Continued

<p>Objective #6: Improve data collection and integrity to better measure activity, performance and quality by training at least 3 more staff on the Wellsky software program so that data can be accessed efficiently to monitor Title III programs.</p>	<p>07/01/20 - 06/30/24</p>		<p>Continued</p>
<p>Objective #7: Identify gaps in services by incorporating applicable questions to our service providers' customer satisfaction surveys. Survey results will provide a more concrete list of services needed by older adults in the PSA. The Office on Aging can use the identified gaps in services to leverage additional funding for the older population of San Bernardino County.</p>	<p>07/01/20 - 06/30/24</p>		<p>Continued</p>

² Indicate if Program Development (PD) or Coordination (C) is the objective (cannot be both). If a PD objective is not completed in the timeline required and is continuing in the following year, any objective revision must state additional tasks.

³ Use for the Area Plan Updates only to indicate if the objective is New, Continued, Revised, Completed, or Deleted.

SECTION 10. SERVICE UNIT PLAN (SUP) OBJECTIVES

**TITLE III/VIIA SERVICE UNIT PLAN
OBJECTIVES
CCR Article 3, Section 7300(d)**

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

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

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

Personal Care (In-Home) Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	150	3	1, 2, 3
2021-2022	150	3	1, 2, 3
2022-2023			
2023-2024			

Homemaker (In-Home) Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	1,200	3	1, 2, 3
2021-2022	1,200	3	1, 2, 3
2022-2023			
2023-2024			

Chore (In-Home) Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	1,000	3	1, 2, 3
2021-2022	1,200	3	1, 2, 3
2022-2023			
2023-2024			

Home-Delivered Meal Unit of Service = 1 meal

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	360,000	3	1, 2, 3
2021-2022	360,000	3	1, 2, 3
2022-2023			
2023-2024			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	150	3	1, 2, 3
2021-2022	0	0	0
2022-2023			
2023-2024			

Case Management (Access) Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021			
2021-2022			
2022-2023			
2023-2024			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	11,000	3	1, 2, 3
2021-2022	11,000	3	1, 2, 3
2022-2023			
2023-2024			

Congregate Meals Unit of Service = 1 meal

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	312,600	3	1, 2, 3
2021-2022	312,600	3	1, 2, 3
2022-2023			
2023-2024			

Nutrition Counseling Unit of Service = 1 session per participant

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021			
2021-2022			
2022-2023			
2023-2024			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	80,000	3	1, 2, 3
2021-2022	80,000	3	1, 2, 3
2022-2023			
2023-2024			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	5,000	3	1, 2, 3
2021-2022	5,000	3	1, 2, 3
2022-2023			
2023-2024			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	10,000	3	1, 2, 3
2021-2022	10,000	3	1, 2, 3
2022-2023			
2023-2024			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	30,000	1	1, 2, 3
2021-2022	30,000	1	1, 2, 3
2022-2023			
2023-2024			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	14,000	1	1 - 5
2021-2022	14,000	1	1 - 5
2022-2023			
2023-2024			

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

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

Title IIIB, Other Priority and Non-Priority Supportive Services

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

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

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

Other Supportive Service Category

Unit of Service

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2020-2021			
2021-2022			
2022-2023			
2023-2024			

Title IIIB, Other Supportive Services Category**Residential Repairs /Modifications Unit of Service = 1 Modification**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2020-2021	100	3	1, 2, 3
2021-2022	100	3	1, 2, 3
2022-2023			
2023-2024			

Senior Center Activities Unit of Service = 1 Hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2020-2021	6,750	3	1, 2, 3
2021-2022	6,750	3	1,2,3
2022-2023			
2023-2024			

Cash/Material Aid Unit of Service = 1 Assistance

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2020-2021	350	3	
2021-2022	350	3	
2022-2023			
2023-2024			

Community Education Unit of Service = 1 Activity

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2020-2021	400	1	
2021-2022	400	1	
2022-2023			
2023-2024			

Housing**Unit of Service = 1 Hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2020-2021	250	3	
2021-2022	250	3	
2022-2023			
2023-2024			

Interpretation/Translation**Unit of Service = 1 Contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2020-2021	3,000	3	
2021-2022	3,000	3	
2022-2023			
2023-2024			

Mobility Management Activities**Unit of Service = 1 Hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2020-2021	600	3	
2021-2022	600	3	
2022-2023			
2023-2024			

Personal Affairs Assistance**Unit of Service = 1 Contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2020-2021	1,550	3	
2021-2022	1,550	3	
2022-2023			
2023-2024			

Title IIID / Disease Prevention and Health Promotion

Unit of Service = 1 contact

Service Activities: The “Walk with Ease” evidence-based program will be at a minimum of two sites throughout the County. Each class is six weeks and 3 times per week.

The “Walk with Ease” program is listed on the National Council on Aging website as a Title III-D Highest Tier Evidence-Based Health Promotion/Disease Prevention Program as referenced in Program Memo 15-10. According to the Arthritis Foundation, participants in the “Walk with Ease” program experienced decreased disability; improvements in levels of pain, fatigue, stiffness and self-confidence; and better perceived control over arthritis, balance, strength and walking pace.

Service Activities: The Chronic Disease Self-Management Education and Tai Chi For Arthritis evidence-based programs will be offered at a minimum of two sites throughout the County.

Both courses are listed on the National Council on Aging website as a Title III-D Highest Tier Evidence-Based Health Promotion/Disease Prevention Program as referenced in Program Memo 15-10.

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (Required)
2020-2021	850	1	3
2021-2022	850	1	3
2022-2023			
2023-2024			

PSA 20
TITLE III B and Title VII A:
LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES

2020-2024 Four-Year Planning Cycle

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

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

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

Complete all Measures and Targets for Outcomes 1-3;

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

Measures and Targets:

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

<p>1. FY 2018-2019 Baseline Resolution Rate: Number of complaints resolved 951 + number of partially resolved complaints 132 divided by the total number of complaints received 1678 = Baseline Resolution Rate 65% FY 2020-2021 Target Resolution Rate 70%</p>
<p>2. FY 2019-2020 Baseline Resolution Rate: Number of complaints partially or fully resolved <u>811</u> divided by the total number of complaints received <u>1,325</u> = Baseline Resolution Rate <u>61</u> % FY 2021-2022 Target Resolution Rate <u>70</u> %</p>
<p>3. FY 2020 - 2021 Baseline Resolution Rate: Number of complaints partially or fully resolved _____ divided by the total number of complaints received _____ = Baseline Resolution Rate _____ % FY 2022-2023 Target Resolution Rate _____ %</p>

<p>4. FY 2021-2022 Baseline Resolution Rate: Number of complaints partially or fully resolved _____ divided by the total number of complaints received _____ = Baseline Resolution Rate _____ % FY 2023-2024 Target Resolution Rate _____</p>
<p>Program Goals and Objective Numbers: __</p>

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

<p>1. FY 2018-2019 Baseline: Number of Resident Council meetings attended 23 FY 2020-2021 Target: 15</p>
<p>2. FY 2019-2020 Baseline: Number of Resident Council meetings attended 6 FY 2021-2022 Target: 15</p>
<p>3. FY 2020-2021 Baseline: Number of Resident Council meetings attended _____ FY 2022-2023 Target: _____</p>
<p>4. FY 2021-2022 Baseline: Number of Resident Council meetings attended _____ FY 2023-2024 Target: _____</p>
<p>Program Goals and Objective Numbers: __</p>

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

<p>1. FY 2018-2019 Baseline: Number of Family Council meetings attended 20 FY 2020-2021 Target: 5</p>
<p>2. FY 2019-2020 Baseline: Number of Family Council meetings attended 11 FY 2021-2022 Target: 15</p>
<p>3. FY 2020-2021 Baseline: Number of Family Council meetings attended _____ FY 2022-2023 Target: _____</p>
<p>4. FY 2021-2022 Baseline: Number of Family Council meetings attended _____ FY 2023-2024 Target: _____</p>
<p>Program Goals and Objective Numbers: __</p>

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

<p>1. FY 2018-2019 Baseline: Number of Instances 287 FY 2020-2021 Target: 500</p>
<p>2. FY 2019-2020 Baseline: Number of Instances 419 FY 2021-2022 Target: 450</p>
<p>3. FY 2020-2021 Baseline: Number of Instances _____ FY 2022-2023 Target: _____</p>
<p>4. FY 2021-2022 Baseline: Number of Instances _____ FY 2023-2024 Target: _____</p>
<p>Program Goals and Objective Numbers: __</p>

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

1. FY 2018-2019 Baseline: Number of Instances 993 FY 2020-2021 Target: 1,200
2. FY 2019-2020 Baseline: Number of Instances 702 FY 2021-2022 Target: 850
3. FY 2020-2021 Baseline: Number of Instances _____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Instances _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: ____

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

1. FY 2018-2019 Baseline: Number of Sessions 10 FY 2020-2021 Target: 10
2. FY 2019-2020 Baseline: Number of Sessions 0 FY 2021-2022 Target: 10
3. FY 2020-2021 Baseline: Number of Sessions _____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Sessions _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: ____

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

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

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

improve LTC residents' quality of care and quality of life, participation in disaster preparedness planning, participation in legislative advocacy efforts related to LTC issues, etc.) Be specific about the actions planned by the local LTC Ombudsman Program.

FY 2020-2021
<p>FY 2020-2021 Systems Advocacy Effort(s): The LTC Ombudsman Program will work with the Terracina Post Acute facility to improve LTC residents' quality of care and quality of life. Responsibility will include identifying most common complains and/or care issues affecting the residents and work to improve those issues for the benefit of residents.</p>
FY 2021-2022
<p>Outcome of FY 2020-2021 Efforts: The Field Coordinator worked directly with the Terracina Post Acute Administrator and Director of Nursing to improve the quality of care for the residents. Ombudsman was made available for tele conference and or virtual meetings with all residents during COVID safety restrictions and met with a number of residents to discuss better and more effective ways of communication between facility staff and residents. The Ombudsman reminded the facility to continue using registry as a resource when regular staff are not available, this allowed for full facility coverage.</p> <p>FY 2021-2022 Systems Advocacy Effort(s): The Ombudsman Program will collaborate with various San Bernardino partners for disaster preparedness training for the Ombudsman Volunteers. Emphasis will be on actions specific to facilities during a disaster event and how the volunteers can assist in that environment.</p>
FY 2022-2023
<p>Outcome of FY 2021-2022 Efforts:</p> <p>FY 2022-2023 Systems Advocacy Effort(s): (Provide one or more new systems advocacy efforts)</p>
FY 2023-2024
<p>Outcome of 2022-2023 Efforts:</p> <p>FY 2023-2024 Systems Advocacy Effort(s): (Provide one or more new systems advocacy efforts)</p>

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

Measures and Targets:

A. Routine Access: Nursing Facilities (NORS Element S-58) Percentage of nursing facilities within the PSA that were visited by an Ombudsman representative at least once each quarter **not** in response to a complaint. The percentage is determined by dividing the number of

nursing facilities in the PSA that were visited at least once each quarter not in response to a complaint by the total number of nursing facilities in the PSA. NOTE: This is not a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no nursing facility can be counted more than once.

<p>1. FY 2018-2019 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 47 divided by the total number of Nursing Facilities 54 = Baseline 87% FY 2020-2021 Target: 87%</p>
<p>2. FY 2019-2020 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 0 divided by the total number of Nursing Facilities 56 = Baseline 0% FY 2021-2022 Target: 60%</p>
<p>3. FY 2020-2021 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint divided by the total number of Nursing Facilities = Baseline _____ % FY 2022-2023 Target: _____ %</p>
<p>4. FY 2021-2022 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint divided by the total number of Nursing Facilities = Baseline _____ % FY 2023-2024 Target: _____ %</p>
<p>Program Goals and Objective Numbers: _____</p>

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

<p>1. FY 2018-2019 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint 110 divided by the total number of RCFEs 246 = Baseline 45% FY 2020-2021 Target: 65%</p>
<p>2. FY 2019-2020 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint 0 divided by the total number of RCFEs 251 = Baseline 0% FY 2021-2022 Target: 65%</p>
<p>3. FY 2020-2021 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint _____ divided by the total number of RCFEs _____ = Baseline _____ % FY 2022-2023 Target: _____ %</p>

<p>4. FY 2021-2022 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint _____ divided by the total number of RCFEs _____ = Baseline _____ % FY 2023-2024 Target: _____ %</p>
<p>Program Goals and Objective Numbers: _____</p>

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

<p>1. FY 2018-2019 Baseline: <u>6.55</u> FTEs FY 2020-2021 Target: <u>6.55</u> FTEs</p>
<p>2. FY 2019-2020 Baseline: <u>6.33</u> FTEs FY 2021-2022 Target: <u>6.33</u></p>
<p>3. FY 2020-2021 Baseline: _____ FTEs FY 2022-2023 Target: _____ FTEs</p>
<p>4. FY 2021-2022 Baseline: _____ FTEs FY 2023-2024 Target: _____ FTEs</p>
<p>Program Goals and Objective Numbers: _____</p>

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

<p>1. FY 2018-2019 Baseline: Number of certified LTC Ombudsman volunteers: <u>28</u> FY 2020-2021 Projected Number of certified LTC Ombudsman volunteers: <u>25</u></p>
<p>2. FY 2019-2020 Baseline: Number of certified LTC Ombudsman volunteers: <u>11</u> FY 2021-2022 Projected Number of certified LTC Ombudsman volunteers: <u>11</u></p>
<p>3. FY 2020-2021 Baseline: Number of certified LTC Ombudsman volunteers: _____ FY 2022-2023 Projected Number of certified LTC Ombudsman volunteers: _____</p>
<p>4. FY 2021-2022 Baseline: Number of certified LTC Ombudsman volunteers: _____ FY 2023-2024 Projected Number of certified LTC Ombudsman volunteers: _____</p>
<p>Program Goals and Objective Numbers: _____</p>

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

Measures and Targets:

In the box below, in narrative format, describe one or more specific efforts your program will undertake in the upcoming year to increase the accuracy, consistency, and timeliness of

your National Ombudsman Reporting System (NORS) data reporting.

Some examples could include:

- Hiring additional staff to enter data
- Updating computer equipment to make data entry easier
- Initiating a case review process to ensure case entry is completed in a timely manner

- Additional staff will be trained to enter data into the NORS.
 - PSA 20 will ensure training and reference resources are readily available.
- Program Coordinator will conduct case reviews throughout each month to ensure accuracy and completeness of records and data collected.
 - Error trends will be identified and addressed through additional training, improvements in procedures, etc.

TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

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

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

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

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

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

- **Public Education Sessions** –Indicate the total number of projected education sessions for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Training Sessions for Professionals** –Indicate the total number of projected training sessions for professionals (service providers, nurses, social workers) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Training Sessions for Caregivers Served by Title III E** –Indicate the total number of projected training sessions for unpaid family caregivers who are receiving services under Title III E of the Older Americans Act (OAA) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation. Older Americans Act Reauthorization Act of 2016, Section 302(3) 'Family caregiver' means an adult family member, or another

individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.

- **Hours Spent Developing a Coordinated System to Respond to Elder Abuse** –Indicate the number of hours to be spent developing a coordinated system to respond to elder abuse. This category includes time spent coordinating services provided by the AAA or its contracted service provider with services provided by Adult Protective Services, local law enforcement agencies, legal services providers, and other agencies involved in the protection of elder and dependent adults from abuse, neglect, and exploitation.

Educational Materials Distributed –Indicate the type and number of educational materials to be distributed to the general public, professionals, and caregivers (this may include materials that have been developed by others) to help in the identification, prevention, and treatment of elder abuse, neglect, and exploitation.

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

TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

The agency receiving Title VIIA Elder Abuse Prevention funding is:

Long Term Care Ombudsman Program
 Department of Aging and Adult Services
 San Bernardino County

Fiscal Year	Total # of Public Education Sessions
2020-2021	45
2021-2022	35
2022-2023	
2023-2024	

Fiscal Year	Total # of Training Sessions for Professionals
2020-2021	45
2021-2022	35
2022-2023	
2023-2024	

Fiscal Year	Total # of Training Sessions for Caregivers served by Title III E
2020-2021	
2021-2022	
2022-2023	
2023-2024	

Fiscal Year	Total # of Hours Spent Developing a Coordinated System
2020-2021	40
2021-2022	40
2022-2023	
2023-2024	

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2020-2021	1,850	Brochures for the elder abuse prevention program
2021-2022	1,730	Brochures for the elder abuse prevention program

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2022-2023		
2023-2024		

Fiscal Year	Total Number of Individuals Served
2020-2021	1,000
2021-2022	900
2022-2023	
2023-2024	

TITLE IIIE SERVICE UNIT PLAN OBJECTIVES

CCR Article 3, Section 7300(d) 2020-2024 Four-Year Planning Period

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

Direct and/or Contracted IIIE Services

CATEGORIES	1	2	3
Family Caregiver Services Caring for Elderly	<i>Proposed Units of Service</i>	<i>Required Goal #(s)</i>	<i>Optional Objective #(s)</i>
Information Services	# of activities and Total est. audience for above		
2020-2021	# of activities: 300 Total est. audience: 3,000	2	
2021-2022	# of activities: 300 Total est. audience: 3,000	2	
2022-2023	# of activities: Total est. audience:		
2023-2024	# of activities: Total est. audience:		
Access Assistance	Total contacts		
2020-2021	15,075	2	
2021-2022	15,075	2	
2022-2023			
2023-2024			

Access Assistance	Total contacts		
Support Services	Total hours		
2020-2021	4,200	2	
2021-2022	4,200	2	
2022-2023			
2023-2024			
Respite Care	Total hours		
2020-2021	3,000	2	
2021-2022	3,000	2	
2022-2023			
2023-2024			
Supplemental Services	Total occurrences		
2020-2021	150	2	
2021-2022	150	2	
2022-2023			
2023-2024			

Direct and/or Contracted III E Services

Grandparent Services Caring for Children	Proposed Units of Service	Required Goal #(s)	Optional Objective #(s)
Information Services	# of activities and Total est. audience for above		
2020-2021	# of activities: 60 Total est. audience: 300	2	
2021-2022	# of activities: 60 Total est. audience: 300	2	
2022-2023	# of activities: Total est. audience:		
2023-2024	# of activities: Total est. audience:		

Grandparent Services Caring for Children	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Access Assistance	Total contacts		
2020-2021	1,050	2	
2021-2022	1,050	2	
2022-2023			
2023-2024			
Support Services	Total hours		
2020-2021			
2021-2022			
2022-2023			
2023-2024			
Respite Care	Total hours		
2020-2021			
2021-2022			
2022-2023			
2023-2024			
Supplemental Services	Total occurrences		
2020-2021			
2021-2022			
2022-2023			
2023-2024			

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

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

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

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

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

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

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

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

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

HICAP Legal Services Units of Service (if applicable) ⁶

Fiscal Year (FY)	3.1 Estimated Number of Clients Represented Per FY (Unit of Service)	Goal Numbers
2020-2021		
2021-2022		
2022-2023		
2023-2024		

Fiscal Year (FY)	3.2 Estimated Number of Legal Representation Hours Per FY (Unit of Service)	Goal Numbers
2020-2021		
2021-2022		
2022-2023		
2023-2024		

Fiscal Year (FY)	3.3 Estimated Number of Program Consultation Hours Per FY (Unit of Service)	Goal Numbers
2020-2021		
2021-2022		
2022-2023		
2023-2024		

⁶ Requires a contract for using HICAP funds to pay for HICAP Legal Services.

SECTION 12. DISASTER PREPAREDNESS

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

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

The AAA is a department within San Bernardino County Human Services System, and is included in the County's comprehensive disaster preparation planning. San Bernardino County Fire Office of Emergency Services, as the Operational Area for the County, coordinates the development and implementation of the disaster plan. DAAS Emergency Operations Plan describes the roles, responsibilities and relationships of the Department consistent with the Standardized Emergency Management systems (SEMS) and the National Incident Management System (NIMS), as they relate to disaster response. SEMS incorporates the use of the Incident Command System (ICS), the Master Mutual Aid Agreement, existing mutual aid systems, the operational area concept, and multiagency or inter-agency coordination. Local governments must use SEMS to be eligible for funding of their personnel related costs under state disaster assistance programs. At the field (incident) level, the use of SEMS standardizes the response to emergencies involving multiple jurisdictions or multiple agencies. The Incident Command System (ICS) is the basic emergency management system. ICS provides a common organizational framework within which agencies can work collectively at the scene of an emergency. ICS is also an effective emergency management system for either single or multiple agency use. DAAS will activate the Department Emergency Operation Center (DOC) in the event of a disaster. The DOC will establish a system to receive and process task assignments, establish an outline of steps to secure the safety of department personnel, establish a system to provide the necessary resources as needed, ensure the continuing performance of the department's essential operations/functions, and establish a plan of action for restoring normal day-to-day operations. Emergency response sections will be established in the DOC as described in the Emergency Operations Plan. In alignment with SEMS and NIMS, DOC staff has been designated to one of the following sections: Management, Operations, Planning, Logistics, and Finance. Critical functions have been identified below. Essential Disaster Response functions include:

- a. Ensure all records, documents, critical supplies, and other items needed to perform critical functions are available offsite and/or can be readily obtained if the facility is lost.
- b. Check on the most vulnerable clients from all programs.
- c. Coordinate assistance to vulnerable clients with OES and first responders.
- d. Provide disaster information in alternative languages as necessary.

e. Investigate APS reports.

A decision making process in disaster settings has been put in place to ensure that there is continuity of operations (COOP). If the disaster is regional, the disaster plan will be implemented at the regional level. Communication may be from the bottom up. For a countywide disaster, the disaster plan will be implemented by the Director or successor, based on the lines of succession established in the plan. The Director will oversee the relief efforts conducted by the department. The Deputy Directors and District Managers will provide information to the Director about each Region and financial concerns. The Deputy Directors will supervise and coordinate relief efforts in their respective regions as well as specific activities based on their assignments. The District Manager will coordinate the establishment of emergency sites for provision of food/nutrition along with the assignment of Senior Information and Assistance staff to Senior Centers and nutrition sites. The other Deputy Directors will coordinate efforts in their regions and maintain contact with regional supervisors. Authority for DAAS operations will be the responsibility of the highest-level employee.

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

Name	Title	Telephone	E-mail
Daniel Munoz	Emergency Services Manager	Office: 909-356-3943 Cell: 909-855-6234	Daniel.Munoz@oes.sbcounty.gov

3. Identify the Disaster Response Coordinator within the AAA:

Name	Title	Telephone	E-mail
Christopher Tarr	Deputy Director	Office: 760-243-8489 Cell: 760-401-1353	ctarr@hss.sbcounty.gov

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

Critical Services	Method of Delivery
Check on most vulnerable clients	Program staff has disaster contact sheets used to document if the client has a live-in care provider or not, is on oxygen, is bed bound, etc. The most dependent clients are contacted during a disaster
Coordinate with first responders	Department Disaster Coordinators assigned to each facility will conduct a self-assessment of the staff, visitors, and facility and report back to DOC.
Investigate Adult Protective Services reports	Deputy Directors will supervise and coordinate relief efforts in their respective regions as well

	as specific activities based on their assignments.
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5. List any agencies with which the AAA has formal emergency preparation or response agreements.

California Fire Service and Rescue Emergency Mutual Aid System/Plan 4/2019; Operations Bulletin #1 Closest Resource Concept-Requesting Mutual Aid from Adjoining Operational Areas and Regions; California Disaster and Civil Defense Master Mutual Aid Agreement; Immediate Need Procedures AH-330 3-3 STL_TFL Response 2018; Multi-Agency Coordination System Publication Procedures Guide MACS 410-1 7/2018; Multi-Agency Coordination System Resource Designation System MACS 410-2 5/2013; California Fire Service and Rescue Emergency Mutual Aid System Orientation for the new Operational Area Coordinator 4/2019; ST-TF AH-330 3-3-3 Code of Conduct 7/2017.

6. Describe how the AAA will:

- Identify vulnerable populations.

Each program identifies vulnerable service populations by keeping disaster contact sheets numbered according to their needs assessment and whether there is a live-in care provider or not. The highest priority clients are those who do not have live-in help and who are dependent on oxygen or other durable medical equipment. Social Workers keep in touch with these high priority clients during any disaster.

- Follow-up with these vulnerable populations after a disaster event. Follow-up will be performed via phone calls and in-home visits.

The DAAS social workers keep in touch with high priority clients after any disaster.

SECTION 16. GOVERNING BOARD**GOVERNING BOARD MEMBERSHIP
2020-2024 Four-Year Area Plan Cycle**

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

Total Number of Board Members: 5

Name and Title of All Members:	Office Term Expires:
Curt Hagman, Fourth District Supervisor	2022
Janice Rutherford, Second District Supervisor	2022
Col. Paul Cook (Ret.), First District Supervisor	2024
Dawn Rowe, Third District Supervisor	2024
Joe Baca, Jr., Fifth District Supervisor	2024

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

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

Total Council Membership (include vacancies) 21Number of Council Members over age 60 15

Race/Ethnic Composition	<u>% of PSA's 60+Population</u>	<u>% on Advisory Council</u>
White	<u>71.3</u>	<u>66.7</u>
Hispanic	<u>30.2</u>	<u>6.7</u>
Black	<u>7.5</u>	<u>20.0</u>
Asian/Pacific Islander	<u>8.5</u>	<u>0.0</u>
Native American/Alaskan Native	<u>0.1</u>	<u>6.7</u>
Other	<u>9.5</u>	<u>6.7</u>

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

Linda J. Titus, Chair, Executive Committee Chair, First District Appointee	12/31/2021
David Wilder, Vice-Chair, Access Committee Chair, East Valley Regional Council on Aging, and California Senior Senator	12/31/2021
Suzanne Yoakum, Secretary, and California Senior Assembly Member	12/31/2021

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

Gwen Alber, West Valley Regional Council on Aging	RCA
Maricela S. Ferguson, Legislative Committee Chair, Fifth District Appointee	12/07/2022
Heather Lopez, Victor Valley Regional Council on Aging	RCA
Deborah Nattress, PhD, Third District Appointee	12/31/2021
Denise K. Benton, Intergenerational Committee Chair, Professional Appointee	12/4/2023
Priscilla Benadom, North Desert Regional Council on Aging	RCA
Lisbeth Koenig, Nutrition Committee Chair, Third District Appointee	12/6/2021
Penny Shubnell, Mountain Regional Council on Aging, Healthy Aging Committee Chair	RCA

Joanne L. Iavello, Fourth District Appointee	12/4/2023
James S. Welte, First District Appointee	12/4/2023
Larry Grable, Second District Appointee	12/5/2022
Toni Stepetz, Morongo Basin Regional Council on Aging	RCA
Daniel Burke, At Large Appointee	1/5/2023
Ben Jauregui, Professional Appointee	12/4/2023
Linda Frost, Second District Appointee	12/4/2023
Terry Conaway, Colorado River Regional Council on Aging	RCA
Arlington C. Rodgers, Jr., Fifth District Appointee	12/4/2023

Member(s) represent each of the “Other Representation” categories listed below.

Yes No

- Low Income
- Representative

Disabled

- Representative
- Supportive Services
- Provider Representative
- Health Care Provider
- Representative
- Family Caregiver
- Representative Local
- Elected Officials
- Individuals with Leadership Experience in Private and Voluntary Sectors

Explain any "No" answer(s): N/A

Individual SAC member information is on file with the Department of Aging and Adult Services.

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

APPOINTED MEMBERS: 12 Members are appointed by the Board of Supervisors: 2 members from each supervisorial district and 2 members appointed at –large. The term of office of the appointed members shall be coterminous with the appointing supervisor; these shall be 4 years terms, expiring the first

Monday of December in the appropriate year. The term of office of the at-large members shall be coterminous with the appointing Chairman of the Board; these shall be 2 –year terms, expiring at the first Board of Supervisors meeting in January of the appropriate year.

PROFESSIONAL MEMBERS: At the recommendation of the Director of the Department of Aging, the Board of Supervisors may appoint up to 2 commissioners having relevant Professional experience in fields including but not limited to: gerontology, social work, education, banking or financial management. The term of office of the Professional Members shall be for four years.

REPRESENTATIVE MEMBERS: The chairs of the Regional Council on Aging (RCA) or a designated member shall serve on the commission. In the event 1 or more of the chairs of the RCA is already a member of the Commission, he/she may continue to serve in the position of his/her choice. The RCA shall designate a representative in the event the chair elects to serve on the Commission in another position. The term of the office of the chair elects to serve on the Commission in another position. The term of office of the representative members shall be coterminous with the term of office for the chairs of the RCA.

In no circumstances will any member occupy more than one seat on the Commission.

SECTION 18. LEGAL ASSISTANCE

2020-2024 Four-Year Area Planning Cycle

This section must be completed and submitted annually. The Older Americans Act Reauthorization Act of 2016 designates legal assistance as a priority service under Title III B [42 USC §3026(a)(2)] ¹² CDA developed *California Statewide Guidelines for Legal Assistance* (Guidelines), which are to be used as best practices by CDA, AAAs and LSPs in the contracting and monitoring processes for legal services, and located at: <https://aging.ca.gov/Providers and Partners/Legal Services/#pp-gg>

1. Specific to Legal Services, what is your AAA’s Mission Statement or Purpose Statement? Statement must include Title IIIB requirements:

PSA 20’s Legal Services Mission Statement:

To ensure justice, dignity, health, security, maximum autonomy, and independence to older residents of San Bernardino County by protecting and enforcing the legal rights of individuals and by promoting social change through broad elder rights advocacy. The purpose of the Legal Services Program is to deliver quality, cost-effective services designed to address the unmet legal needs of vulnerable San Bernardino County seniors.

Inland Counties Legal Services (ICLS) Mission Statement:

Inland Counties Legal Services pursues justice and equality for low income people through counsel, advice, advocacy, and community education, treating all with dignity and respect.

2. Based on your local needs assessment, what percentage of Title IIIB funding is allocated to Legal Services?

A minimum of 10% of IIIB funding is allocated to meet the need for Legal Services in San Bernardino County. This percentage was determined using data from the needs assessment as well as a five-year analysis of service and funding trends.

3. Specific to Legal Services, has there been a change in your local needs in the past four years? If so, please identify the change (include whether the change affected the level of funding and the difference in funding levels in the past four years).

Yes, there has been a change in that more seniors are dealing with landlord/tenant issues, fraud, debt collection, estate planning, bankruptcies, and health care access.

2016/17	\$191,000
2017/18	\$210,000
2018/19	\$303,533
2019/20	\$266,100
2020/21	\$256,500

4. Specific to Legal Services, does the AAA’s contract/agreement with the Legal Services Provider(s) (LSPs) specify that the LSPs are expected to use the California Statewide Guidelines in the provision of OAA legal services?

Yes.

5. Does the AAA collaborate with the Legal Services Provider(s) to jointly establish

specific priorities issues for legal services? If so, what are the top four (4) priority legal issues in your PSA?

No, the goal is to serve every senior with their legal issue. The top four legal issues are:

1. Landlord/Tenant issues
2. Estate Planning/Wills/Trusts/Financial Powers of Attorney
3. Bankruptcy/Debt Collection
4. Health Insurance/Access to Health Care

6. Specific to Legal Services, does the AAA collaborate with the Legal Services Provider(s) to jointly identify the target population? If so, what is the targeted senior population in your PSA **AND** what mechanism is used for reaching the target population?

No, but the Legal Services provider is aware of the targeted population. They respond to all requests for assistance regardless of the individual. Seniors who have low income, live in rural areas, are alone or at risk for victimization are priorities. Regular presence at senior citizen centers and outreach is scheduled; and client intake is done on appointment. Outreach includes urban, rural and desert areas as well as telephone intake for advising on routine legal matters.

7. Specific to Legal Services, what is the targeted senior population and mechanism for reaching targeted groups in your PSA?

See 6.

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

Fiscal Year	# of Legal Assistance Services Providers
2020-2021	1
2021-2022	1
2022-2023	<i>Leave Blank until 2022</i>
2023-2024	<i>Leave Blank until 2023</i>

⁷ For Information related to Legal Services, contact Chisorom Okwuosa at 916 419-7500 or chisorom.okwuosa@aging.ca.gov

9. Does your PSA have a hotline for legal services?

Yes; 1-888-245-4257.

10. What methods of outreach are Legal Services providers using?

SIA promotes the program and refers legal concerns to the provider. The provider schedules regular client intake at senior citizen centers throughout the County. ICLS participates in senior community fairs and disseminates information to seniors. ICLS maintains a telephone listing in the yellow pages and also maintains a website: <http://www.inlandlegal.org>

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

Fiscal Year	Name of Provider	Geographic Region covered
2020-2021	Inland Counties Legal Services	San Bernardino County
2021-2022	Inland Counties Legal Services	San Bernardino County
2022-2023	<i>Leave Blank until 2022</i>	<i>Leave Blank until 2022</i>
2023-2024	<i>Leave Blank until 2023</i>	<i>Leave Blank until 2023</i>

12. Discuss how older adults access Legal Services in your PSA:

Older adults are interviewed concerning their legal problems during outreach activities at senior citizen centers throughout the County. Those activities have been limited due to the current pandemic. Additionally, initial contact can be from the seniors reaching ICLS by telephone at 1-888-245-4257 or through their website at <https://www.inlandlegal.org/>. ICLS recently formed practice groups based on areas of expertise to better serve clients. ICLS has an intake unit that directly receives incoming phone calls. The intake specialist assists with the issue and forwards the call to the appropriate practice group based on the issue. There is no change to the types of cases, as outlined in the contract, that ICLS accepts.

ICLS has three branch offices located in the County of San Bernardino.

- San Bernardino
- Ontario
- Victorville

Appointments are also scheduled at branch offices. ICLS has bilingual staff (Spanish) who can interpret when needed in all three offices. In addition, senior advocates also speak

Spanish.

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

Identified in number 5 above.

- 14.** In the past four years, has there been a change in the types of legal issues handled by the Title IIIB legal provider(s) in your PSA?

Yes, our legal providers have seen an increase in debt collection and health care issues; identified in question #3.

- 15.** What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers.

Barriers include a lack of public transportation in the more rural and remote parts of the County, geographic size of the County, and limited resources for legal assistance. Strategies: ICLS is accessible toll free by telephone and performs regularly scheduled outreach at senior citizen centers throughout the County.

- 16.** What other organizations or groups does your legal service provider coordinate services with?

Department of Aging and Adult Services, Ombudsman, Adult Protective Services, California Advocates for Nursing Home Reform, Health Plans and 2-1-1.

SECTION 21. ORGANIZATION CHART

