



Regional Plans on Aging

Department for Aging and Independent Living

Fiscal Years 2023-2025

Revised Feb 20, 2024

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In accordance with the Older Americans Act of 1965, as amended, Section 307(a)(1), the Department for Aging and Independent Living prepared a Kentucky Comprehensive Aging Area Plan format with input from Area Agencies on Aging and Independent Living. This format is to be used by area agencies on aging and independent living in developing an area plan for the administration and provision of specified adult and aging services in each planning area. The Area Plan required for FY 2023-2025 will be three-year plan cycle.

Area plans are prepared and developed by the Area Agencies on Aging and Independent Living. Each agency is responsible for the plan for the multi-county planning and service area (PSA) in which the agency is located. The area plan should reflect the efforts of the AAAIL in:

- **Determining the needs of the older population within its service jurisdiction;**
- **Arranging through a variety of linkages for the provision of services to meet those needs; and**
- **Evaluating how well the needs were met by the resources applied to them.**

In addition to those services mandated under Title III-B (supportive services), Title III-C (congregate and home-based nutrition), Title III-D (disease prevention), Title III-E (caregiver), Title VII (elder abuse, ombudsman), plans provide for Homecare, Adult Day Care and Alzheimer's Respite, Personal Care Attendant, SHIP, LTC Ombudsman, Kentucky Family Caregiver, Consumer Directed Options, Community Preparedness Planning and a range of other programs, many of which are planning and service area specific.

Due Date: Completed area plans are due March 31, 2022.

Number of Copies: Submit a copy of this area plan electronically to DAILAging@ky.gov

The disaster plan and Senior Community Service Employment Program are separate plans and not included in this plan. Separate instructions will be sent for those plans by the program coordinator.

Area Agency on Aging and Independent Living

I. Mission and Vision

Some things to consider when developing your mission and vision:

- Why do we exist? Who do we serve? and Why? What values govern our decision-making?
- What do we ultimately see as our vision for older Kentuckians and their caregivers in our AAA region?

1. How do you describe the purpose of your agency and what you are trying to achieve?

The purpose of the Barren River Area Development District Area Agency on Aging and Independent Living (BRADD/AAAIL) is to provide leadership in responding to issues that relate to older and disabled individuals throughout the BRADD. The BRADD/AAAIL coordinates with other agencies to ensure the efficient and effective integration of needs services and resources for the aging and disabled population, as well as develop comprehensive, coordinated, and cost-effective programs for a Continuum of Care System that helps older and disabled individuals to maintain their dignity and quality of life in their homes and communities. It is the goal of BRADD/AAAIL to be the recognized leader dedicated to providing a single point of entry to access a wide array of comprehensive community-based services and resources for older persons, disabled individuals, and their caregivers. The services will enable them to maintain independence, dignity, and quality of life while living in their homes and communities.

2. Please provide a short narrative or introduction which includes basic information about the agency and the area it serves.

The BRADD/AAAIL has been in existence for approximately 50 years. The BRADD/AAAIL has been providing a comprehensive community-based service delivery system of care targeting economically disadvantaged and socially isolated elderly and disabled individuals and their caregivers throughout the Barren River Area Development District. The BRADD/AAAIL is located at 177 Graham Ave. Bowling Green, KY. The counties served include Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, and Warren.

3. Provide examples of how your agency is working to meet the CHFS Mission: to be a diverse and inclusive organization providing programs, services and supports that protect and promote the health and well-being of all Kentuckians and their communities include examples of

1. Equity
2. Health and well-being
3. Resilient individuals and communities
4. Structural Economic Support

It has and continues to be the mission of BRADD/AAAIL to ensure that all Kentuckians have equal access to the programs and services offered within our agency.

1. The BRADD/AAAIL delivers fair and impartial service delivery by continually educating our staff and volunteers on how to be most equitable. This is done through several methods, including an active involvement in community activities, councils, and coalitions that focus on the disadvantaged, as well as through multiple training opportunities to highlight the importance of equity amongst all citizens in our region.

2. Promoting the health and well-being of the people we serve is a cornerstone of our agency. Whether it be through providing a nutritional meal, hosting an exercise class, or sharing resources and providing referrals for health-related services, the BRADD/AAAIL has always focused on the importance of promoting a healthy community.

3. Resiliency has been on the forefront of most agency agendas since March of 2020, when we all experienced an unprecedented pandemic. Prior to the pandemic, our agency was prepared for all manner of natural disasters and other events that may disrupt services. As with most everyone else, the pandemic caused much more significant disruptions, and forced us to look at service delivery from a vastly different perspective. Through it all, services continued. Our staff and volunteers demonstrated the best examples of resiliency, and we overcame multiple obstacles while redefining our methods of service delivery. These include outreaching for new volunteer opportunities, creating new partnerships, and adapting to meet the needs of the community. The clients we serve also overcame and adapted to the new reality and have continually proved their resiliency as we all navigate the challenges and trials we are faced with. With recent funding changes, we are exploring new innovative ideas and working to form partnerships with new locations and agencies to expand our services throughout the region.

4. The BRADD/AAAIL works closely with providers and contractors to ensure that all funds are used in a structured, efficient, and effective manner. The finance department within BRADD closely monitors all funds associated with the agency and ensures that program goals are met to the best of our ability. Support, technical assistance, and communication are constant in order to maintain the high standard of quality here at BRADD/AAAIL.

II. Service Area

4. How do you define the geographic boundaries of your service area region? Please be sure to indicate which counties you serve. Insert a map of your region as well.



BRADD/AAAIL encompasses ten (10) counties in the south-central region of Kentucky. Counties served include: Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, and Warren.

*Attach Map (Only utilize the following file types: *.bmp, *.jpg, *.gif, *.png, *.tif)*

III. Profile of Your Region

4. Please complete a demographic profile of your region by answering the questions below.

(Much of this data is available through the University of Louisville website; data are available by KYAAAIL areas.)

www.ksdc.louisville.edu/

Year for which data is current:

2022

	Information Not Available	
a. Percent of persons 60 and older in your region		71,007
b. Percent of region's total population over 60	<input type="checkbox"/>	24.76%
c. Percent 60+ who are low income (poverty rates as provided by HHS)	<input type="checkbox"/>	13.6%
d. Percent 60+ who are minority	<input type="checkbox"/>	15.79%
e. Percent 60+ who live in rural areas	<input type="checkbox"/>	64%
f. Percent 60+ with severe disability (3 or more ADL/IADL impairments)*	<input type="checkbox"/>	28.53%
g. Percent 60+ with limited English proficiency	<input checked="" type="checkbox"/>	N/A
h. Percent 60+ with Alzheimer's Disease or related dementia	<input checked="" type="checkbox"/>	N/A
i. Percent 60+ isolated or living alone	<input type="checkbox"/>	12.07%
j. Percent of grandparents or older relative raising a child under 18	<input type="checkbox"/>	0.013%

*ADLs (Activities of Daily Living): feeding, getting in/out of bed, dressing, bathing, toileting. IADLs (Instrumental Activities of Daily Living): Meal preparation, light housework, heavy housework, laundry, shopping, taking medicine

IV. Funding Sources for Your AAAIL

5. In your last fiscal year, what percent of your revenue was from...	%
a. Federal grants/contracts	
b. State government grants/contracts	
c. Local government grants/contracts	14.12
d. Contracts obtained via a Network Lead Entity*	83.36
e. Foundation grants/contracts	1.24
f. Corporate grants/contracts	
g. Direct mail fundraising	
h. Fundraising events	
i. Individual contributions	0.15
j. Fees for services	0.04
k. Other (Specify: <u>in-kind</u>)	1.09
Total.....	100%

*Network Lead Entity means an organization who has formal partnerships with health care and other relevant sectors to address health and social needs in a coordinated way. NLEs function as a one-stop-shop for contracting with health care entities, and often deploy a multi-payer strategy to ensure individuals have access to needed programs and services; beyond contractual arrangements with health care entities, other sources of financing that networks may draw upon are federal grants (e.g. Older Americans Act and discretionary) or other publicly-funded resources at the state or local levels, philanthropic support, private pay arrangements, and civic/community investment (e.g. local businesses, United Way, etc.). An important part of any robust

community integrated health network is the inclusion of evidence-based health promotion and disease prevention programs.

6. List below all sources of program and staff revenues for your agency.

	Name of Source	Value (\$ amount) for current fiscal year
A	Federal Funds	\$3,215,924
B	State Funds	\$18,108,780
C	Local Funds	\$282,266
D	Individual Contributions	\$21,960
E	Fees for Services	\$ 5,400
F	In-Kind Contributions	\$201,406
G		\$.
H		\$.
I		\$.
J		\$.
K		\$.
L		\$.
M		\$.
N		\$.
O		\$.
P		\$.
Q		\$.
R		\$.

S		\$.
T		\$.
U		\$.
V		\$.
W		\$.
X		\$.
Y		\$.
Z		\$.
AA		\$.
BB		\$.
GRAND TOTAL		\$ 21,835,736.

↑ Use these letters to indicate program funding sources in Section V.

V. Services Offered as Part of Your Plan

	Is this type of service offered?		Is service directly provided by AAAAIL?		Is service provided under contract?		Number of people served in FY23	Amount spent in FY23 (round to nearest hundred)	Funding source(s) (use letters from Section IV)
	Yes	No	Yes	No	Yes	No			
a. Advocacy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x		
b. Information and Referral	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	720	49,600	A,B,F
c. Legal Assistance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	437	58,400	A,B,C
d. Transportation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25	12,600	A,C,D,F
e. Home Delivered Meals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	502	1,154,100	A,B,C,D,F
f. Congregate Dining	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	597	521,000	A,B,C,D,F
g. Senior Center	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x		
h. Mental Health Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	x		
i. Dementia Care or Support Group	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	x		
j. Caregiver Support Group	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6	261,200	A,B,C,F
k. Caregiver Training or Education	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6	1,200	A,B,C,F
l. Training or Education for Older Adults	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x		
m. Training or Education for Service Providers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x		
n. Training or Education for Volunteers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x		
o. Case Management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	735	459,800	A,B,C
p. Housing or Shelter Assistance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x		
q. Personal Care or Home Health Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	141	162,600	A,B,C,D
r. Homemaker Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	313	397,100	A,B,C,D
s. SHIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	184	26,400	A,C
t. Elder Abuse Prevention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	97	5,700	A,C
u. Disease Prevention Health Promotion (III-B)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x		
v. Disease Prevention Health Promotion (III-D)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	63	23,600	[A,F
w. Adult Day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x		
x. Consumer Directed Option	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	584	15,893,500	B,E
y. Ombudsman	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1648	131,200	A,B,C
z. Telephone Reassurance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6	300	A,B,C,D,F
aa. Friendly Visitors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x		
ab. Personal Care Attendant Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	x		

ac. Senior Community Service Employment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X		
	Is this type of service offered?		Is service directly provided by AAAIL?		Is service provided under contract?		Number of people served in FY23	Amount spent in FY23 round to nearest hundred	Funding source(s) (use letters from Section IV)
	Yes	No	Yes	No	Yes	No			
ad. Other – Specify: HC/TIII Assessment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	680	209,000	A,B,C
ae. Other – Specify: Outreach	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	277	10,300	A,B,C
af. Other – Specify: Public Education	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2107	2,100	A,B,C,D,F
ag. Other – Specify: Escort	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	38	12,700	A,B,C,D
ah. Other – Specify: Respite	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	13	36,900	B,C,D
ai. Other – Specify: MIPPA	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	17	41,200	A,C
ak. Other – Specify: Medicaid ADRC, HC ADRC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1149	188,400	A,B,C
al. Other – Specify: Supplies	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	203	115,000	A,B,C
am. Other-Specify: Chore	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	29	10,000	B
an. Other-Specify: Home Repair	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	67	38,100	B

In regards to Older Americans Act Programs, please answer the questions below.

What percent of your service population is minority?	6%
What percent of your service population is low income?	68%
What percent of your service population is limited English proficiency?	0%
What percent of your service population is rural?	63%

In regards to state funded Homecare Program, please answer the questions below.

What percent of your service population is minority?	9%
What percent of your service population is low income?	60%
What percent of your service population is limited English proficiency?	0%
What percent of your service population is rural?	56%

In regards to the Medicaid Waiver Program, please answer the questions below.

What percent of your service population is minority?	23%
What percent of your service population is low income?	80%
What percent of your service population is limited English proficiency?	15%
What percent of your service population is rural?	53%

VI. Program Explanation

Detailed program-specific policies and procedures will be reviewed during the yearly on-site monitoring. Please ensure that each program listed in the previous question has policies and procedures and that these are available for review during onsite monitoring. Assurances will also be verified during monitoring.

VII. Partnerships and Collaborations

7. Do you engage in partnerships or collaborations with other programs or agencies in your service area?

- Yes
- No

8. If yes, please identify key partners and collaborators, what activities you collaborate on, and when this partnership or collaboration began (year). Attach additional sheets as necessary to list all partnerships and collaborations.

	Collaboration Partner	Activity or Focus of Collaboration	Approx. Year Began
1	Barren River Mental Health and Aging Coalition	The Barren River Mental Health and Aging Coalition reviews and analyzes issues related to access and the actual provision of mental health services to older persons within our communities. The Coalition works to eliminate any barriers to access mental health treatment. The Barren River Mental Health and Aging Coalition members hold a conference annually to raise awareness of mental health and aging issues. This coalition also partners with BRADD and the Barren River Elder Abuse Prevention Council to hold additional events. Further expansion of the Council includes support and attendance at other various trainings related to mental health and aging topics.	2000
2	Barren River Elder Abuse Prevention Council	The Barren River Elder Abuse Prevention Council is comprised of local agencies throughout the district. The purpose of the council is to provide local communities with an entity to systematically address elder abuse and related issues. The council developed a website that assists us with our goal of raising awareness and increasing prevention of elder abuse. The council has developed brochures on elder abuse awareness through funding from the State Elder Abuse Council and continues to distribute those to various agencies and individuals throughout the year. The Elder Abuse Prevention Council will continue to center its activities on the prevention of elder abuse and neglect and	2003

		exploitation. This council focuses on Elder Abuse awareness day and distribution of materials to bring awareness to Elder Abuse.	
3	Veterans Programs	BRADD/AAAIL has developed a partnership with the VA to provide services through the Veteran's Directed Program for Home and Community Based Services. It is our goal to expand this program and increase the amount of participants served. BRADD/AAAIL has also continued to strengthen partnerships with other Veteran's programs, including the SOKY Veteran's Council.	2016
4	SOKY Senior Providers	The Southern Kentucky Senior Providers Network consists of multiple agencies and businesses who work with seniors, both in the public and private sector. Meetings include discussions of available resources for seniors in our area, and presentations from members on the services their business or agency offers to the senior population.	2016
5	Area businesses and agencies	For the past several years, BRADD/AAAIL has worked with several area agencies and businesses to assist in our personal care items and food drives. These businesses have donated items in order to assist our elderly clients. The BRADD/AAAIL holds at least one drive annually to collect needed items for our seniors. Most recently, BRADD/AAAIL worked with Wheeldon's Pest Control and Home Depot to assist with food drives.	2021
6	Mom's Meals	The BRADD/AAAIL began an agreement with Mom's Meals during the pandemic to provide home delivered meals to those seniors identified as sheltering in place. Our relationship in this capacity has ended, but a new partnership and pilot program with Mom's Meals continues to provide additional meals to homebound seniors in our region through additional meal funding.	2023
7	Barren County YMCA	BRADD/AAAIL successfully partnered with the Barren County YMCA to provide meals to seniors 5 days per week. This location is also offering Silver Sneakers and Bingocize classes to seniors weekly through Title IID funding.	2023
8	Park City	BRADD/AAAIL successfully partnered with the City of Park City to open the Park City senior center 3 days per week for congregate meals.	2023

9	Bowling Green Parks & Recreation	BRADD/AAAIL began this project through Title III-D Silver Sneakers classes. They continue to offer weekly classes to seniors in Warren County. After the formulation of this project, BRADD/AAAIL worked with BGPR staff to also offer one congregate meal per month to the seniors at this location.	2023
10	Warren County Parks & Recreation	BRADD/AAAIL staff started a partnership with WCPR to offer a congregate meal to seniors at their senior center one day per week. This site also has plans to offer Title III D Drums Alive classes to seniors in the future.	2023
11	Pieces of Hope	Pieces of Hope is a location organization offering fitness and assistance to individuals needing one-on-one instruction for Parkinson's Disease and other related conditions. The owner and operator of Pieces of Hope has plans to offer On the Move classes through Title III D funding to seniors in our area.	2023
13	Bowling Green Towers	BRADD/AAAIL began this project in January 2024 for seniors residing in and around The Bowling Green Towers, which is a low-income senior apartment complex in Bowling Green, KY. Seniors at this location have congregate meals available Tuesdays and Thursdays weekly.	2024
14			

VIII. Capacity Assessment

9. Do you collect information from seniors, caregivers, service providers, elected officials, committee members, and/or interested citizens about needs or gaps in services for older adults in your service area?

- Yes
 No

10. If yes: How do you collect this information?

Formally, the BRADD/AAAIL conducts a Needs Assessment every three years, or whenever the Area Plan is due for renewal. The Needs Assessment is distributed to a wide variety of agencies, businesses, and individuals, as well as made available on our website.

In addition, this information is collected daily from clients, senior centers, caregivers, service providers, and interested citizens through various forms of communication, expressing their needs for older adults and disabled individuals in our community. BRADD Board members meet monthly, and AAAIL staff are present to discuss gaps in services or other needs within our community with the Board. The Aging Advisory Council meets quarterly, and all members are given opportunities to advocate for the elderly population in their community with AAAIL staff. Annual satisfaction surveys conducted by service providers and the AAAIL also help to capture this information.

BRADD's Economic Development department conducts Steering Committee meetings to develop their Comprehensive Economic Development Strategies and Hazard Mitigation Plans in each county of our service area. From these meetings, vital information concerning community needs have been constructed into goals for the committees to achieve. Many of these goals pertain to our community's senior and disabled populations. More information can be found on these meetings on our website. AAAIL staff have been incorporated into these meetings and will work with steering committees in the future to help achieve goals and meet needs expressed.

11. How often do you collect this information?

- Monthly
- Quarterly
- Semi-annually
- Annually
- Other:

12. When did you conduct your most recent capacity assessment? December 2021
(month and year)

13. When is the next capacity assessment scheduled? December 2025
(month and year)

14. How will you use this information to coordinate planning and delivery of services for older adults and persons with disabilities?

The information gathered from the Needs Assessment will be used to provide information about gaps in services and to discover what the greatest needs are for our elderly and disabled population. The data collected will assist us in determining where our service dollars need to be allocated to meet the needs of the elderly and disabled population in our region.

IX. Capacity Building Plan

15. Identify your top three overall agency goals for this planning cycle.

1. Streamlining and updating processes to lessen barriers to services.
2. Develop and expand new partnerships to further our reach into the community.
3. Collaborating with county steering committees to achieve goals for strategic planning.

16. What is your plan for achieving these goals in the coming planning cycle? Please include how you will gauge your progress throughout the planning cycle.

1. BRADD/AAAIL staff continue to see the impact that the programs Mains'l and Docuware have had on the HCB Waiver program and staff assistance. Find Help also continues to be a helpful tool for the ADRC Department in assisting with the beginning of meals applications for seniors. Lastly, BRADD/AAAIL staff have begun working on digitizing the Homecare and Title III programs through the use of iPads. These tablets will assist in cutting down on the use of paper for all documentation. BRADD/AAAIL also added the File Attachment ability into SAMS to assist with adding necessary paperwork directly into SAMS.

2. BRADD/AAAIL will continue working with the Kentucky Council of Area Development Districts and various community partners in order to explore new avenues to serve our community. Building new relationships within the community will help us to discover the needs and unmet populations that can be assisted through our programs. These partnerships will serve as a tool to collaborate and pool resources to produce service outcomes more efficiently and effectively. BRADD/AAAIL staff have been working diligently to implement new projects and partnerships in our region. **The above mentioned projects continue to reach and expand into new senior populations that were previously unmet. We hope to continue fostering these partnerships into the future and potentially adding new partnerships as funds and availability arise.**

3. BRADD/AAAIL's involvement with the county steering committees for the comprehensive economic development strategy will help to bridge gaps in services and strengthen our presence in the community. Growing those relationships with community leaders and local officials can bridge the gaps in service delivery and demonstrate the importance of the services provided by the AAAIL. We would like to focus on growing relationships with community leaders by also ensuring they are aware and understanding of the services provided by the AAAIL and the Aging Council. **AAAIL staff have been involved in events led and conducted by the Community and Economic Development department including a recent CEDS summit targeted to county officials.**

17. Were the goals from the last plan period completed?

Yes

No

If not, why?

BRADD/AAAIL staff have made great progress on streamlining and updating internal processes through the aforementioned methods. Additionally, many new successful projects are ongoing and are reaching new populations previously unmet. We believe that although these goals are successful at this time, we always strive to make further improvements in any way we can.

Regarding the third goal related to involvement with the county steering committees, we strive to further this goal in the future. Involvement with county steering committees and with local officials will ensure a continuing relationship between AAAILs and reach our communities.

18. What were your goals from the previous planning cycle that were not achieved and why?

BRADD/AAAIL staff focus has remained on expanding meals into new populations and beginning new projects. This has made involvement with county steering committees difficult to maintain. However, our goal is to ensure an open and continuing relationship between local officials and AAAIL staff to ensure that each community in our region is aware of and accessing our services.

19. Total number of program managers/supervisors 12 Number

20. Total number of program staff 33 Number

21. Total number of program volunteers (in house & contract) 115 Number

22. Do all supervisors (in house & contract) have access to computers with internet access?

Yes, all

Half or more

- Less than half
- No, none

23. Do all direct service (in house & contract) staff have access to computers with internet access?

- Yes, all
- Half or more
- Less than half
- No, none

24. Do volunteers (in house & contract) have access to computers with internet access?

- Yes, all
- Half or more
- Less than half
- No, none

25. How many new volunteers were recruited in the past 12 months? 22 Number
Which programs? | SHIP, Senior Center services, **Ombudsman** |

26. How many new staff were hired by the AAAIL in the past 12 months? 10 Number
Which programs? | Homecare/Title III, **ESMP** |

27. Are there written job descriptions for all positions in your agency?

Staff? Yes
 No

Volunteers? Yes
 No

28. Do you conduct annual performance reviews for all staff?

- Yes
- No

If no, please explain?

29. Do you have any plans to help staff members increase knowledge or skills during the next year?

- Yes
- No

30. If yes, please describe your plans and the specific sources for these trainings.

The BRADD/AAAIL conducts training for staff, Aging Council members, service providers, and ADD Board members when the need arises and encourages all AAAIL and provider staff to attend any training events pertaining to them. Training methods include in-person options, virtual webinars, conference calls, or recorded training sessions. Information on these trainings is shared to our network, including staff and providers. The trainings include a wide variety of topics related to the field of Aging and Disability Services. The BRADD/AAAIL provides funding for recommended training events, and monitors staff training logs on a quarterly basis to ensure all staff complete the required amount of training annually.

31. Do you have a plan to promote volunteer opportunities across programs? Be sure to specifically include SHIP, Senior Center Services and Ombudsman

- Yes
 No

32. If yes, please describe your plans. If no, why not?

BRADD/AAAIL requires our SHIP provider, Kentucky Legal Aid (KLA), to recruit and maintain at least one SHIP volunteer/counselor per 2000 Medicare beneficiaries in each county with no less than one volunteer/counselor per county in areas with a population less than 2000. KLA will continue to place volunteer opportunities on the KLA website. KLA has launched an updated website which features a benefits page. This page lists volunteer opportunities as well as all services provided by KLA's Benefits Program. KLA will continue to promote volunteer opportunities on <http://www.shiphelp.org/volunteers>, KLA's Facebook page, and announce volunteer opportunities at various outreach events and meetings. As the SHIP counselors travel within our region, information on volunteering will be left at various locations/counties. In addition, SHIP will recruit paralegal students from the WKU Administrative Law class and the RSVP (Retired Senior Volunteer Program), as well as other various community partners.

The Ombudsman Program seeks to promote volunteer opportunities across all ten counties. Recruitment efforts include social media outreach and community education and engagement. We advertise through social media outlets, as well as through community mailings/community networking groups. The District Ombudsman also provides volunteer information during health fairs, Senior Center visits, conferences, and community partnership meetings. In addition, the District Ombudsman meets with numerous civic organizations, faith-based organizations, and community agencies promoting volunteerism. The Ombudsman Program also partners with Community Education to teach classes on long term care services and promote program volunteerism. Ombudsman volunteers are recognized annually during the Volunteer Recognition Banquet and their accomplishments are published in various newsletters.

The Senior Center Program posts volunteer opportunities at the Senior Centers as well as through the RSVP (Retired Senior Volunteer Program). Volunteer opportunities are also posted on the CASOKY website and social media outlets.

The BRADD/AAAIL promotes volunteer opportunities with the WKU and Campbellsville Social Work program and other schools to utilize student interns as volunteers. During our monitoring process, which is conducted bi-annually, BRADD/AAAIL staff monitors the Senior Center program, the Ombudsman program, and the SHIP program to ensure that adequate efforts to recruit and retain volunteers are being made throughout all programs. BRADD/AAAIL has been reaching out to HOSA programs from each county high school to get volunteers and training students on how to work with the geriatric populations. BRADD/AAAIL will continue to work on these types of partnerships to increase volunteer opportunities.

33. How will you measure your progress toward achieving your overall agency goals?

BRADD/AAAIL will conduct a monitoring of our programs to ensure that volunteer goals are being met, or that sufficient efforts are being made by our service providers to attain these goals. The number of volunteers per program will be monitored to ensure that an adequate number of volunteers are being recruited.

X. Public Hearing

34. Area Plan Public Hearing

Date	Time	Location/Method	# of participants participating	# of staff participating	# of others participating
3/16/2022	11:00	BRADD Conference Center	8	5	4

Date plan available for review	Place(s) available for review	Dates advertised	Ad appeared in newspaper
2/23/2022	BRADD Website		
2/23/2022	Emailed to: BRADD Board, Aging Council Members, Service Providers		
2/23/2022	Notice sent to BG Daily News, Jobe Publishing	2/23/2022	2/23/2022

35. Participation in Public Hearing was actively sought from:

Minority, rural elderly, those with greatest economic need, Alzheimer’s or related disorders, disabled individuals, and Native Americans.

36. Indicate means used in soliciting views:

The Public Hearing was advertised via BRADD’s social media outlets. Information pertaining to the Public Hearing and the Area Plan was emailed to Aging Council members, Board members, and Service Providers.

37. Summary of public comments:

None

38. Summary of changes as a result of public comments:

N/A

XI. Service Usage

39. What are the three most frequently identified needs or gaps in older adult services in your service area?

1. | **Information and Assistance** |
2. | **In-Home Services** |
3. | **Emergency Preparedness** |

40. Describe the strengths in your area's service delivery.

Each service provider contract with the AAAIL has their own unique strengths that make them successful in their efforts to meet the needs of the clients. The most vital strength in our service delivery is the effective communication between the AAAIL and the service providers. The Service Providers work in coordination and collaboration with the AAAIL to stay informed of new regulations, communications, and updates on their programs, and strive to provide the best possible services possible to our clients. All service providers are encouraged to be involved in activities of the AAAIL, and meeting quarterly, or more often as needed with AAAIL staff to ensure the effective delivery of services. BRADD/AAAIL Director of Aging and Aging Planner also emails and calls service provider staff weekly and/or daily which also aids in delivering highly effective Long Term Care Services and Supports. Another important strength is the Barren River ADRC due to its “no wrong door” and a “single point of entry” approach. The Barren River ADRC and AAAIL staff serves as a trusted source and presence for the elderly and disabled in the BRADD ten counties.

41. Describe the weaknesses in your area's service delivery and has this changed since the last plan period?

With continuing staffing issues for both the AAAIL and for our service providers continuing past the pandemic, our ability to eliminate our waiting list for services has been a challenge. Our current staff continues to work diligently to assess and open as many individuals for services as our providers are able to serve.

42. What has the AAAIL determined to be the three most utilized services in your service area?

1. | **Medicaid Waiver Program** |

1a. Why is this service used more than others?

Considering this program allows participants to hire an employee of their choosing, this makes this a more desirable program to many. Although a waiting list has been introduced at the state level, we continue to see a large demand for this program.

2. | **Home Delivered Meals** |

2a. Why is this service used more than others?

Home delivered meals continue to be highly sought-after service for our region. Many seniors lack the ability to purchase and cook healthy meals on a daily basis. The Home Delivered Meal program offers an opportunity for seniors to get a daily meal that meets 1/3 of their dietary requirements.

3. Congregate Meals

3a. Why is this service used more than others?

With ESMP funding, we have been able to serve more populations and seniors than before. Through our partnership with the Barren County YMCA, we have really seen how meeting seniors in new locations outside of senior centers can open the doors to new congregate locations.

43. What has the AAAIL determined to be the three least utilized services in your service area?

1. Telephone Reassurance

1a. Why is this service used less than others?

Community Action is our contracted provider for this service. Telephone reassurance requirements have made a barrier to providing this service. We find that most who qualify are already receiving other forms of contact that meet this need.

2. Caregiver Training

2a. Why is this service used less than others?

Caregivers have voiced that they find it difficult to find time away from their person receiving care due to their responsibilities and finding someone else to cover for them while they are out.

3. Public Education

3a. Why is this service used less than others?

Community Action is our contracted provider for this service. The BRADD/AAAIL attends health fairs and other public events, promotes our programs through various social media and news media platforms, and publicizes to the public through every available opportunity. These actions are not always captured through a Public Education unit if completed through our ADRC instead of through our contractor.

XII. Participant Feedback and Satisfaction

44. Do you obtain regular feedback from clients about their satisfaction with services?

- Yes
 No

45. If yes, how is feedback obtained? (Check yes or no for each)

	Yes	No
a. Client surveys or interviews	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Caregiver surveys or interviews	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Provider logs	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Provider surveys or interviews	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Client focus groups	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Other, Specify: participant communication to administrative staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>

46. How often is feedback collected?

- Monthly
 Quarterly
 Semi-annually

- Annually**
- Other, Specify:** | |

47. What do you do with this information? How is it used?

BRADD/AAAIL staff will monitor all feedback and provide a plan of action concerning negative feedback. All reasonable efforts will be made between BRADD/AAAIL staff and service providers to ensure that we provide the best possible services to our clients and correct any ongoing issues that may be present. BRADD/AAAIL staff also reviews the positive feedback in order to gain additional insight on how to better serve our clients, and to provide recognition to a staff member or service provider who provided exceptional service to our clients.

48. Is there a formal process to investigate complaints?

- Yes**
- No**

49. Is there a formal process to respond to complaints?

- Yes**
- No**

XIII. Coordination and Collaboration

50. What are your procedures and methods for ensuring that services for older adults are delivered in a coordinated and efficient way?

BRADD/AAAIL staff, Case Management/Service Advisor team, Family Caregiver Coordinator and other service provider agencies providing essential services under the auspices of the ADD, cooperates to work for the best outcome for individual clients. The AAAIL contracts with qualified agencies that are required to have policies and procedures to ensure services are provided in a coordinated and efficient way. The BRADD/AAAIL utilizes the SAMS system to collect required data for programs. BRADD Case Managers utilize a computerized assessment and service plan to document the services needed, provided, and received. This system will assist the BRADD/AAAIL to ensure unnecessary service duplications. Services are reviewed monthly and quarterly to assure that they are provided in an effective and cost-efficient manner. Formal monthly contacts between AAAIL staff, case management team, and the service providers ensure ongoing contact and coordination for clients regarding needs for the programs. All in-home participants are assessed, and case managed by the Barren River Case Managers. At the point of intake, ADRC staff is responsible for directing clients to the appropriate agencies and resources.

AAAIL staff works cooperatively with other agencies in the community. Community agencies provide training to aging staff, service providers and case managers throughout the fiscal year. AAAIL staff will provide speaking engagements concerning Aging Services and Resources for any service agency that requests assistance. The case managers coordinate with service providers and the various community agencies in the area to link the client with the appropriate agency to meet their needs. The case managers coordinate services based on the needs of the client and direct the clients to the available resources.

The AAAIL staff serve on many councils and committees and have many partnerships within the Barren River area, such as; WKU Social Work Departmental Advisory Council, Mental Health and Aging Coalition, Coalition for a Healthy Kentucky, Local Coordinating Council on Elder Abuse, Barren River Transportation Council, HEART Coalition, Barren River Healthy and Safe Aging

Coalition, BRIGHT Coalition, and SOKY Senior Providers Network. BRADD/AAAIL staff also serves as volunteers for the SHIP program, as well as for Senior Medicare Patrol (SMP).

51. Do you have plans to improve service coordination?

- Yes
 No

52. If yes, please describe your plans. If no, why not?

Currently, BRADD/AAAIL is confident that our current methods of service coordination are successful and do not require a major change. However, BRADD/AAAIL staff is always striving to improve our service coordination methods, so we remain open to new ideas and partnerships that will help us with our goals. We make efforts to educate our staff and service providers on the importance of coordinating client services and verifying that no services are duplicated. Good communication amongst staff and service providers help to ensure efficient service coordination for our clients. BRADD/AAAIL staff looks for and review new grant opportunities, community resources, and trainings and provides those opportunities to service providers as well in order to improve service coordination and delivery. BRADD/AAAIL hosts and provides training on the services offered by our programs as well. This educational event helps to educate and bring awareness to improve service coordination.

BRADD/AAAIL will look for new avenues and resources to specifically target various ethnic groups within our district, who may find difficulty accessing resources due to limited English proficiency. We would like to maintain and strengthen relationships with agencies and businesses that work with these populations.

53. How will you measure the effectiveness of your service coordination?

The effectiveness of our service coordination is evident through our coordinated and efficient means of carrying out our programs. BRADD/AAAIL staff also monitor services to help ensure effective service coordination including an annual satisfaction survey for ADRC Services and other services. BRADD/AAAIL staff monitors client service deliveries to ensure that services are provided according to client's plans of care. Services not needed and requests for more needed services are reviewed to ensure the effectiveness of service coordination.

XIV. Outreach & Expansion

54. Do you have plans to conduct outreach to those with “greatest economic and social needs” (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, older persons with disabilities, older persons with limited English, and older individuals residing in rural areas) as specified in the Older Americans Act?

- Yes
 No

55. If yes, please describe your plans. If no, why not?

BRADD/AAAIL ADRC will provide information to individuals within the community by reaching out to local radio stations, news stations, billboards, social media, and other media platforms. Since COVID, BRADD staff advertised using billboards and had great success. ADRC staff are now back to attending events including health fairs, conferences, training, and other events. **BRADD/AAAIL staff successfully created a video advertising for meals in our region in the current fiscal year. Additionally, staff have been working on several projects and community partnerships to increase our outreach.**

When BRADD Staff attend outreach events, Spanish brochures are available for those with limited English proficiency. BRADD Staff also target older persons with disabilities at every event we attend, and are always sure to participate in outreach events that are hosted in our more rural counties. During Black History Month, BRADD Staff recently targeted outreach towards minority populations.

56. How will you measure your progress?

Progress will be measured within SAMS by notes indicating where the individual heard about the services. This information will also be captured through annual satisfaction surveys.

57. Do you have plans to increase the visibility of your AAAIL's services?

- Yes
 No

58. If yes, please describe your plans. If no, why not?

BRADD/AAAIL will continue to focus on various forms of media, including social media, print, radio, and billboards, as our preferred outreach tool to the community. ADRC staff will continue to outreach to the community, including doctor's offices, libraries, and other places of business to help provide information on the services offered at our agency.

59. How will you measure your progress?

Efforts will be measurable through information gathered during the intake process in SAMS, as well as through satisfaction surveys. Data will be collected to discover the most effective and successful means of outreach.

XV. Community Opportunities

60. How many of the counties in your service area currently have at least one focal point?¹⁰

61. What services do focal points/multi-purpose centers typically offer in your region?

Information and Assistance, Transportation, Outreach, **Congregate Nutrition**, Home Delivered Meals, Nutrition Education, Public Information, and Title III-D Evidence-Based Health Promotion.

62. Do you have plans to improve or expand senior center/focal point services?

- Yes
 No

63. If yes, please describe your plans. If no, why not?

BRADD/AAAIL plans to improve senior center services by completely revamping and adapting to changing population needs. New partnerships have been formed and continue to be formed and innovative approaches have been introduced to continue providing services and meeting the needs of the seniors in our communities. BRADD/AAAIL will continue to adapt as necessary to meet the needs of the programs, without jeopardizing the health and safety of seniors.

64. How will you measure your progress?

Progress will be measured through client satisfaction as well as continued participation in the programs and services offered.

65. Do you have a community education plan to increase long-term care planning among older adults and individuals with disabilities to remain in their home?

- Yes
 No

66. If yes, please describe your plans. If no, why not?

BRADD/AAAIL staff will continue to educate agencies that provide services to older as well as disabled individuals about our services through various meetings and events. These agencies include but are not limited to; adult day cares, senior services providers, waiver providers, Ombudsman Program, SHIP/Legal Services program, hospice agencies, and long-term care facilities. As a community focal and a single point of entry for Aging and Disability resources and services, the AAAIL provides information and assistance to all clients and persons regarding services based upon their needs, which may include assistance with long-term care planning.

67. Do you have a plan to improve or expand training for your AAAIL staff or other contracted providers?

- Yes
 No

68. If yes, describe your plans. If no, why not? Please describe the current training plan for each program.

The BRADD/AAAIL has outlined specific training that must be conducted by all providers and staff. The BRADD/AAAIL requires training plans to be completed and submitted from each provider annually. The BRADD/AAAIL will monitor the providers and staff to ensure that adequate training is being conducted throughout the year. Furthermore, the BRADD/AAAIL always encourages and promotes training activities and will pass information on trainings along at every opportunity. In addition to providing information on training opportunities available to providers and staff, the AAAIL will also conduct trainings as the need arises. Service Providers are required to utilize training logs, which are monitored by BRADD/AAAIL staff to ensure that required training is conducted.

69. How will you measure your progress?

Progress can be measured through the monitoring process that occurs on a biannual basis for all providers, and a quarterly basis for all AAAIL staff, which is done to ensure that all training requirements are being met. The number of training events and hours attended by staff and providers will also be a good indicator of how well our efforts are being achieved. BRADD also monitors to ensure training plans are followed.

XVI. Information and Referral

70. Does your agency maintain and staff a separate information and referral line?

- Yes
 No

71. How does your agency advertise and/or market your information and referral system.

BRADD/AAAIL will continue to advertise through news media, including television and local radio stations. ADRC has and will continue to advertise using local newspapers, local magazines, and other forms of media. BRADD has made efforts to rebrand and increase social media presence, which has become an important tool for outreach and dissemination of information.

72. If yes: On average, how many intake calls do you handle in a typical month? # 120

73. Do you assess client satisfaction of the information and referral process?

- Yes
 No

74. Do you have a plan for improving the information and referral process?

- Yes
 No

75. If yes, please describe your plans.

The BRADD/AAAIL staff will focus on quality of the ADRC services during intake and calls through satisfaction surveys. BRADD ADRC will through outreach continue to look for new resources in the community that assist with client's needs and maintain an updated resource guide. The BRADD/AAAIL will look for ways to prevent duplication of services and better connect our callers to the best resources to access needed services.

XVII. Financial Management and Fund Development

76. Do you have adequate funding to meet your community's needs?

- Yes
 No

77. What needs are difficult to meet with current funding levels?

Internally at BRADD and through our service providers we continue to have difficulty with staff retention, which affects how services are delivered. The additional funding for meals has been an excellent supplement to the continued demands of the aging and disabled population in our region. Long-term funding is still needed to finance services such as transportation, home repair, in-home services, and home delivered meals. Additionally with the large increase in meals funding in our area, further discussions will need to take place to continue providing the increased capacity of meals to seniors in our region.

78. Provide an explanation of how program income, fees, donations as well as other resources (i.e. local fund grants) will be collected and used to expand services.

All subcontractors will collect program income, fees, or donations according to policies and procedures established by the State, Federal and BRADD agencies. The Barren River Aging Director and the Finance Officer monitor service providers' monthly program income, fees, and donations through financial and contracted unit's reports. The finance officer compares and checks monthly to ensure an adequate match was provided for all programs. All service providers are monitored biannually regarding agency's policies and procedures for program income, fees, and donations collected.

BRADD/AAAIL case managers determine for all programs (Homecare In home Services), at the time of initial assessment and at each reassessment if the client is to be charged a fee for services. This

assessment is based on the client's income and medical expenses. The Homecare In-Home Services sliding fee scale is used to determine the fee amount. The case manager will inform the client at the initial assessment and inform them in writing (Notification to Client) if the client will be required to pay a fee for services. The case manager will send a work order to the appropriate service provider indicating if the client will be a fee-paying client. BRADD/AAAIL case managers explain to all clients about donating to the programs. The case managers inform clients that all donations will be confidential, and the funds will be used for the expansion of additional services throughout the current fiscal year. Donations will be requested from all Congregate, Home Delivered Meals and Transportation participants; however, no fees will be collected.

The service provider will send an invoice to those clients that are determined by the case manager to be in fee-paying status no later than the 10th of each month. Accompanying each invoice will be a pre-posted self-addressed envelope for submission of their fee. The Program Directors will account for all fees and contributions by documenting daily and on a monthly record. All fees collected shall be utilized for the specific programmatic component from which they derive, and all fees will be accounted for and submitted quarterly to the BRADD with financial reports.

All service providers will follow the procedures as outlined in the Kentucky Administrative Regulations pertaining to program income and donations. All program donations are collected through the utilization of envelopes provided to clients receiving in-home services and meals. Moneys collected in centers are collected in solid, closed containers to ensure participant privacy. Two people will count all funds collected for each specific program. After the money is counted and recorded, designated program staff deposit funds into a local bank. Service provider finance staff will write checks to withdraw local donations. Participant donations are used to match funds as required by program policy for Homecare. Title III participant donations will not be used to match funds under Title III program but will be used to purchase additional services. Total amounts of donations collected are submitted to the BRADD quarterly with the financial reports. BRADD/AAAIL staff have developed flyers to help explain the need for donations. These flyers are distributed by AAAIL staff and service providers to help encourage additional donations for services.

79. Do you have a plan for increasing the financial resources available to your agency?

- Yes
 No

80. If yes, please describe your plans.

The BRADD/AAAIL continually works with DAIL to seek available grants that would increase the services available through our agency. We also strongly encourage our providers to seek additional grants as well. BRADD/AAAIL is currently working with VA to case manage the Veteran's Directed Care Program. BRADD/AAAIL actively seeks opportunities and partnerships through the Kentucky Council of ADDs currently and will work to gain programs through the Medicare Advantage and the Medicaid Managed Care Transitions and Commercial programs. BRADD/AAAIL will work to increase financial resources for our agency as opportunities arise.

81. Are financial reports shared with the aging council and board members?

- Yes
 No

82. How do you provide for equitable allocations of funds for programs and services within the planning and services area? Summary must include the AAAIL allocation process approved

by the regional Council on Aging and ADD Board. The most recent census data available must be used for determining the distribution of funds.

Equitable allocation of funds for programs and services is determined by utilizing the Aging Needs Assessment, past service levels, expected increases in service needs, severity of needs, demographic evaluation, county census data, service requests, service gaps, waiting lists/priority rating, and unmet needs. The Barren River Aging Review Committee, Barren River Advisory Aging Council, and the Executive Council and the BRADD Board of Directors review services by utilizing input from local seniors, interested parties, and other agencies. The BRADD/AAAIL attempts to let service needs mandate funding rather than allowing funding to mandate services provided. The BRADD/AAAIL allocates funds on a regional basis rather than county-by-county. This method has been very successful in meeting the overall needs of all seniors in the BRADD rather than targeting funds by county and restricting individual service levels. All services are reviewed according to proposed service units and cost. Reallocations are reviewed and made by the Aging Council, BRADD Board of Directors and DAIL to assure drastic changes do not occur and the elderly needs are met within the limitation of available funding

83. How does your agency assure that all funds are expended?

Throughout the fiscal year, we continuously monitor expenditures for each provider/county/program. We also monitor waitlists for programs. Our goal is for the funds allocated per county/program to be expended in that county. If we find there is no way to expend the funds in a particular county/program, we will adjust the budgets and move funds to other counties with waitlists who have the ability to expend the funds. When new funding is received, it is crucial that the AAAIL receive guidance and parameters on the spending and is given a feasible amount of time in which to expend funds effectively and efficiently.

84. How does your agency assure the operation of a program in the absence of funding due to over-expending of program dollars or inadequate budgeting during the program year?

BRADD/AAAIL monitors expenditures, units and people served through desktop monitoring for each program monthly to ensure goals are met and over and under expenditures threshold is minor. BRADD/AAAIL utilizes projection of services spreadsheets for many of our service expenditures to ensure funding is not exceeded. If funding does go over, the BRADD/AAAIL will utilize local funds to assist with overages.

85. If funds are not expended, what does your agency do with the remaining funds?

Historically we do not end the year with unexpended funds. If funds do remain unexpended, we will carry them over to next year for services. It is always our goal to expend funds to serve as many individuals as possible. We have regular conversations with the Department for Aging and Independent Living if there are concerns with expending funds, so that other arrangements can be made to ensure that funds are spent.

XVIII. PROGRAM SITE MONITORING

86. Please describe your in-house evaluation, desktop and on-site monitoring process of all direct and contract programs for compliance with state and federal guidelines. (Copies shall be made available during onsite monitoring)

The BRADD/AAAIL monitors all in-house and contracted services biannually. The monitoring tools used during the monitoring process are based upon the regulations and policies established for each program, as well as requirements outlined in the contracts between BRADD/AAAIL and the provider agencies. The agency/staff being monitored will submit a response and provide a corrective action plan to the BRADD/AAAIL if any findings occur during the monitoring. Additional follow-up will be conducted as necessary to ensure that staff/providers remain in compliance with all requirements. A monitoring report will be completed and available for DAIL, providing a summary of the findings and corrections made. All service providers of the BRADD/AAAIL are required to conduct internal monitoring of their program in addition to the monitoring provided by the BRADD/AAAIL.

87. Please describe any other methods to your evaluation and monitoring process.

Satisfaction surveys are conducted by all service providers annually. BRADD/AAAIL also conducts annual client satisfaction surveys to ensure services are provided effectively and efficiently.

BRADD/AAAIL case managers monitor services in a variety of ways. Case manager's follow-up on services ordered through home visits and telephone contact with clients. Case managers monitor monthly computer allocation data, which indicates units of service for each month. This ensures that clients are receiving services as outlined in their plan of care. When necessary, AAAIL staff meets with service providers monthly to ensure the quality of services and goals are being met.

AAAIL staff requires each service provider to have internal monitoring procedures. AAAIL staff also requires service providers to make available for review their monthly internal monitoring reports. Aging staff and service providers monitor monthly client reports for any problems and corrections, which include meal tickets and client narratives. This type of quick action assists in providing quality services. If problems occur during internal monitoring, service provider staff will take the necessary steps to correct the problem in a timely manner.

Expenditure monitoring is completed monthly by BRADD/AAAIL staff by desktop reviews. Finance and Aging staff reviews expenditure reports to ensure all numbers match and that there are no inconsistencies.

XIX. GOALS

Goals are visionary statements that describes the strategic direction in which the region is moving while objectives are the attainable, specific and measurable steps the region will achieve its goal. A well-written goal summary can aid the region in educating the public, lawmakers and other agencies of the operation of programs and services of the agency. Please provide a narrative for how the region will meet the goals listed below

Goal 1. Provide long-term services and supports that enable older Kentuckians, their families, caregivers, and persons with disabilities to fully engage and participate in their communities.

BRADD/AAAIL continues to serve as a pillar for services to older Kentuckians, their families, caregivers, and persons with disabilities. It is our mission to provide services and supports to individuals in need to allow them to remain safe in their homes and active in their communities. We actively advertise the services available by attending outreach events, advertising on various media platforms, and connecting with community partners. The ADRC has a toll free 1-800 number that is

advertised on all publications to encourage those to call and learn more about services and supports available.

Goal 2. Ensure older Kentuckians, persons with disabilities, caregivers and families have access to person-centered planning and options counseling for their long-term services and supports.

Person-centered planning is vital for the success of the programs offered through our agency. The individuals we serve are always at the forefront of the planning process, and services are developed based on their feedback and suggestions. Our staff and service providers are trained to focus on person-centered planning methods. We gather data from clients through means such as satisfaction surveys and needs assessments in order to ensure that the individuals always remain at the center of the work that we do.

Goal 3. Increase the development and implementation of business-related strategies that promote innovation, collaboration, and sustainability of aging and disability network partners.

Innovation, collaboration, and sustainability have been key terms used in development and implementation of business-related strategies over the past several years, especially since the pandemic. Our agency continues to adapt and adjust based on the needs of the community. This Fiscal Year, the BRADD/AAAIL has made an effort to create new and innovative partnerships and collaborate with organizations to serve more seniors and provide more meals.

Goal 4. Prevent abuse, neglect, and exploitation while protecting the rights of older Kentuckians and persons with disabilities.

The BRADD/AAAIL actively works to prevent abuse, neglect, and exploitation of older Kentuckians in the following ways: The BRADD/AAAIL staff facilitates a Local Coordinating Council on Elder Abuse to provide community awareness of the prevention of Adult Abuse especially elder abuse, neglect, and exploitation. The Barren River District Ombudsman Program provides information about individual's rights in Long Term Care Homes and Personal Care Homes. The Barren River District Ombudsman also provides education to staff in facilities and the community about the prevention of Elder Abuse under the Title VII Elder Abuse Prevention Funding. BRADD/AAAIL staff are trained to identify potential signs of abuse or neglect, and will report as necessary to the local police or APS.

Goal 5. Ensure continuous quality improvement principles to ensure the Area Agency on Aging and Independent Living operates efficiently and effectively.

Methods of measuring quality include client feedback and suggestions, satisfaction surveys, and monitoring of program compliance through administrative staff. Quality improvement principles will continue to be utilized to measure effectiveness and efficiency of agency services.

Goal 6. Ensure that all Kentucky elders and individuals with disabilities have equitable access to services regardless of any social, cultural or geographic barriers.

It is at the core of our agency to serve those who are low income, minority, and rural. We target those that do not have access to other resources or who have barriers to accessing services, including the populations listed previously.

XX. Kentucky's Outcome and Performance Measures 2023-2025

Instructions: Develop objectives for each goal listed below. Do not limit yourself to the space provided. Provide the strategies for meeting the objectives as well.

GOAL 1: Provide long-term services and supports that enable older Kentuckians, their families, caregivers, and person with disabilities to fully engage and participate in their communities.	
Objective The BRADD/AAAIL Aging and Disability Resource Center serves as a “no wrong door” to provide information, referrals, and assistance for long term services and supports for older adults, people with disabilities, caregivers, veterans, and families.	
Objective BRADD/AAAIL will continue to increase visibility regarding the services available through our agency through outreach events, public media, and networking with other community partners.	
Strategies Training of our agency and provider staff will be ongoing. New methods of delivering outreach will be explored.	
Person and entity responsible for completion Mikayla Patterson, ADRC Coordinator Alecia Johnson, Associate Director of Aging Services	Date Ongoing throughout fiscal year

GOAL 2: Ensure older Kentuckians, persons with disabilities, caregivers and families have access to person-centered planning and options counseling for their long-term services and supports.	
Objective Train agency staff and provider staff to continue to remain person-centered when developing and providing services.	
Objective Training of our case management staff will be scheduled for the fiscal year on this topic.	
Strategies	
Person and entity responsible for completion BRADD/AAAIL staff and service provider staff	Date Ongoing throughout fiscal year

GOAL 3: Increase the development and implementation of business-related strategies that promote innovation, collaboration, and sustainability of aging and disability network partners.	
Objective Continue developing partnerships with community partners to improve effectiveness and efficiency of service delivery. Continued development of current special projects.	
Objective Seek new programs, grants, and opportunities to expand current services.	
Strategies	

Person and entity responsible for completion Alecia Johnson, Associate Director of Aging Services	Date FY 2023
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GOAL 4: Prevent abuse, neglect, and exploitation while protecting the rights of older Kentuckians and persons with disabilities.	
Objective Continue to collaborate with other agencies on the Barren River Elder Abuse Prevention Council to raise awareness and help prevent elder abuse.	
Objective The Long-Term Care Ombudsman Program will assist in ensuring the rights of the elderly and disabled population in order to prevent abuse, neglect, and exploitation.	
Strategies The Elder Abuse Prevention Council develops informational materials, as well as hosts various training events throughout the year to educate others on elder abuse prevention. Federal Title VII Ombudsman and Elder Abuse Prevention programs are used to provide education to long term care facility staff and members of the community regarding awareness and prevention of elder abuse.	
Person and entity responsible for completion BRADD/AAAIL Staff Barren River LTC Ombudsman Staff	Date FY 2023

GOAL 5: Ensure continuous quality improvement principles to ensure the Area Agency on Aging and Independent Living operates efficiently and effectively.	
Objective BRADD/AAAIL staff to complete satisfaction surveys for all services provided through our agency.	
Objective BRADD/AAAIL to collect feedback and comments from clients regarding service delivery and suggestions for improvements, and implement those changes as needed.	
Strategies BRADD/AAAIL staff to monitor all services annually to ensure quality improvement principles are in place.	
Person and entity responsible for completion BRADD/AAAIL staff Service Provider staff	Date FY 2023

GOAL 6: Ensure that all Kentucky elders and individuals with disabilities have equitable access to services regardless of any social, cultural, or geographic barriers.	
Objective BRADD/AAAIL and service provider staff will be trained to serve those in the most need and to access resources to prevent barriers to service delivery.	
Objective Translator services to be used as needed to prevent language barriers.	
Strategies Training of BRADD/AAAIL and provider staff will ensure that social, cultural, or geographic barriers will not limit services provided, and that resources and methods will be made available to prevent those barriers to care.	
Person and entity responsible for completion BRADD/AAAIL staff Service Provider staff	Date FY 2023

XXI. PERFORMANCE PLAN FORMS

These are the Performance Plan Forms that are referenced in the instructions. Please find them in the attachment marked forms. They are as follows:

- Form A – Area Agency on Aging and Independent Living Advisory Council Membership**
- Form B – Area Agency on Aging Independent Living Administration Staffing Plan**
- Form C – Area Agency on Aging Independent Living Direct Staffing Plan**
- Form D – Provider Direct Staffing Plan**
- Form E – Case Managers**
- Form F – SHIP Counselor Locations**
- Form G – SHIP Counselor Details**
- Form H– Ombudsman Advisory Council Membership**
- Form I – Provider Site List**

XXII. WAIVER & SPECIAL PROGRAM APPROVALS

A. DIRECT SERVICE WAIVER REQUEST FOR THE PERIOD OF THE PLAN

Instructions: In accordance with Section 316 of the Older Americans Act (Chapter 35, 42 U.S.C. 3030c-3) Area Agencies on Aging will submit all of the required items listed below to the Department for Aging and Independent Living when initially requesting to provide a service directly. Contact the appropriate Programs Field Representative for more information.

Statement of Request – One request for each service.

Title IIID services were sent out for bid for FY24. The full bid cycle was completed, but no bids were received by the due date. The current service provider, Community Action of Southern Kentucky has had difficulty in expending these funds and providing classes in our area. BRADD/AAAIL staff have requested to provide these services in-house on a pilot basis and reassess these services next fiscal year 2024 and 2025. It is the goal of BRADD/AAAIL staff to expand these services and create partnerships with other agencies and businesses in our region who are interested in providing IIID health promotion classes to seniors.

Actions taken prior to determination of direct service provisions

- **Names of potential providers contacted, their responses, and**
- **Names of newspapers and documentation of announcement of the availability of funds.**

A full Request for Proposals process was completed for Title IIID services. The schedule for this process is listed below. No bids were received by the due date of December 16th.

Release of RFP	November 1, 2022
Written Questions due by: 4:30 p.m.	November 16, 2022
Anticipated BRADD/ AAAIL Response to Written Questions on BRADD Website	November 18, 2022
Offeror's Conference: 2:00pm	November 22, 2022
BRADD/AAAIL Response to Offeror's Conference on BRADD Website	November 23, 2022
Proposals Due by: 2:00 p.m.	December 16, 2022
BRADD/AAAIL Technical Review	December 16 - January 11

BRADD/AAAIL Aging Services Review Committee Meeting: 10:00 a.m.	January 11, 2023
BRADD Council on Aging Meeting: 10:00 a.m.	January 18, 2023
BRADD Board of Directors Meeting /Anticipated Date of Award: 1:00 p.m.	January 25, 2023
Anticipated Contract Effective Date	July 1, 2023

Scope of Work – One scope of work completed for each service.

**Scope of work must be detailed further in the Area Plan, service section. Budgets must be detailed in plan budget section.
Note: Additional information and/or documentation may be required by the State Agency.*

1. BRADD/AAAIL staff will ensure compliance with all requirements mandated by a particular funding source. The applicant shall ensure that all services provided under this contract are provided in accordance with any applicable state or federal statutes or regulations; any commitments and assurances set forth in grant awards with respect to goals, strategies, funding, and outcomes.
2. Ensure compliance to all requirements of the DAIL Standard Operating Procedures (SOPs) applicable to all services provided.
3. Ensure that all services made available under this Contract are provided and maintained on a continuing basis throughout the fiscal year, subject to availability of funds provided by DAIL. Upon award of contract, the second party shall develop a policy and procedure that addresses how interruption of services shall be managed.
4. Ensure that client eligibility has been determined, according to each program regulation, prior to the provision of services and that required client information including eligibility, is entered into the appropriate program database
5. Ensure that clients meeting program eligibility requirements are only removed or denied services if said client meets the requirements of 910 KAR 1:220 Section 7(4)(b).
6. Ensure client records are transferred appropriately, when necessary. Upon termination of this contract, copies of all appropriate records of all active clients and/or participant data shall be provided to the new service provider in accordance with policy.
7. Maintain written personnel policies and procedures, including salary, conditions of employment, and job descriptions relative to all personnel, including those who provide services other than on a full-time basis and/or secured by processes other than direct employment.
8. Assure the retention of client-specific clinical records, in a secured location, for five (5) years after the last date of service and ensure their subsequent destruction by shredding or burning.
9. BRADD/AAAIL will provide all data concerning all activities performed pursuant to this requirement, including but not limited to, periodic data reporting and data system input concerning program activities or any data that is required by applicable state or federal law.
10. Ensure volunteers working with the programs are trained and those working as required staff meet all qualifications and maintain volunteer records including training, total number of volunteers, and the training hours provided. Assure that staff and volunteers will maintain a training log on a form required by DAIL.
11. Ensure that a training plan will be developed and implemented for FY 2024, which will include who is to be trained, who will provide training, subject of training, and possible dates. Plan shall include procedures for staff orientation, in-service, and training and must be applicable to programs. Training must comply with DAIL requirements.
12. Report all incidences or suspected incidences of abuse, neglect, and exploitation to the appropriate agencies, within twenty-four (24) hours of learning of such incidences.
13. Ensure back-up documentation will be submitted as required by DAIL for any and all expenditures and revenue claimed on all invoices including but not limited to detailed payroll reports, invoices, financial system generated reports, and any additional requested documentation.
14. Ensure that all reports required are submitted correctly and within a timely manner. Reports shall be submitted accurately on the appropriate dates specified in the contract. Failure to comply with these requirements may result in immediate termination of the contract.

15. BRADD/AAAIL shall make all records available for inspection as well as permit staff of DAIL, Federal Officials, to monitor and evaluate services provided.
16. Participate in two (2) or more Disease Prevention and Health Promotion programs.
17. Participate in Disease Prevention & Health Promotion conference calls with DAIL as scheduled.
18. Implement evidence-based programs throughout the fiscal year.
19. Conduct all necessary data as outlined by the Centers for Disease Control (CDC) and Prevention.
20. Complete and submit correct forms per program and submit to BRADD/AAAIL and DAIL by required deadlines.
21. Submit all data within two (2) weeks of class completion as outlined by BRADD/AAAIL and DAIL.
22. Notify DAIL of all scheduled classes on a quarterly basis. **Notification should be prior to implementation of scheduled class.**
23. Ensure ninety-nine percent (99%) of federal funds shall be expended by June 30th.

Budget Justification – One budget justification for each service. Explain how AAAIL determined final unit cost.

It is the intention of BRADD/AAAIL staff to form new partnerships with other agencies and businesses in our region in a pilot capacity to expand the offerings of IIID services to seniors in our area. **Partnerships have been started with several local agencies to provide IIID classes to seniors. Such partnerships include the City of Auburn, Bowling Green Parks & Recreation, Pieces of Hope, Warren County Parks & Recreation, and Barren County YMCA.**

**Scope of work must be detailed further in the Area Plan, service section. Budgets must be detailed in plan budget section.*

Note: Additional information and/or documentation may be required by the State Agency.

B. PROGRAM APPROVAL/EXCEPTION REQUESTS FOR THE PERIOD OF THE PLAN

Special Program Approval

A request is required that includes justification for special program approval.

The BRADD/AAAIL is requesting approval to provide the Non-Traditional Frozen Meals Program within the BRADD ten county area for clients assessed to have a need for the frozen meals. Frozen Meals will only be utilized in the following circumstances:

- The participant has expressed a preference for frozen or shelf stable meals; or
- The participant lives off an established route, which would also include the rural and isolated area within the BRADD; and
- Proper storage and heating facilities are available in the home; and
- The participant can prepare and consume the meal alone or with available assistance.

The Case Management and Assessment Team will assess clients for the frozen meal requirements. Documentation of the assessment will be conducted annually for Homecare and for Title III and more often as needed.

Frozen meals will be maintained in a frozen state during delivery. All policies for handling frozen meals will be followed as stated in the KAR 1:190 Nutrition Program for the Elderly Section 9, (2).

- GA Food Service Inc. (GA Foods) will deliver frozen meals to approximately 320 Homecare and Title III participants in the BRADD region. GA Foods prepares meals in its USDA certified/inspected production facility and delivers them frozen solid to client homes daily. GA Foods utilizes refrigerated trucks capable of keeping the meals frozen during delivery throughout

the region. They employ a registered Kentucky licensed dietitian who develops meal plans, utilizing computer analysis to ensure nutritional requirements are met. Nutrition Education will be provided monthly. A menu and preparation instructions are included in each box of meals. Storage and handling instructions are distributed to each client in the welcome kit and to all clients at least annually. Client satisfaction surveys will be conducted annually. Since meals are kept frozen during delivery, frozen meals add an extra measure of food safety during delivery that is not possible with the hot meal delivery system. Clients who cannot handle frozen meals or lack the facility to store/prepare frozen meals are referred to the Title III C -2 hot home delivered meal program. Additionally, GA Food Service Inc. will provide a five-day supply of shelf-stable meals for emergencies as ordered, at least once annually, by BRADD case managers. Clients will be assessed for daily or weekly contact during each reassessment utilizing the most current assessment form. Frozen Meals Policies have previously been submitted to DAIL. All other policies and frozen meal waiver request letter will remain the same.

Exception Requests (includes meals served less than 5 days per week and non-traditional meals requests)

A request for an exception of service is required. Exceptions are granted only on a temporary basis. Justification along with a plan and timeline for meeting program compliance is required.

Request continued special program approval to serve congregate meals in the Fountain Run Nutrition Site three (3) days per week. Each center receives a budget allocation based on their 60+, minority and rural population. This is not a change request for this meal site, as the location has operated in this manner and has never served congregate meals five (5) days per week. Meals are only served three (3) days per week due to budget limitations, and the location is in a rural community with a small population. There is another meal site located within the same county (Monroe) that operates and serves meals five (5) days per week.

Request continued approval to provide congregate meals at the Auburn Nutrition Site for four (4) days per week. Each center receives a budget allocation based on their 60+, minority, and rural population. Meals will be served four (4) days per week due to budget limitations, with the potential to expand to five (5) days if budget allows and need is determined. There is currently one other meal site located within Logan County that serves meals five (5) days per week.

XXII. PROVIDER APPROVALS

List of Contracts with a Profit Making Organization

Instructions: List of contracts with profit making organizations and approval request - A new approval is required for all contracts with profit making organizations for a new multi-year area plan. Only submit one sample of a CONTRACT unless there are significantly different requirements between contracts.

The form below shall be used to list all of the for-profit contractors with information under each contractor containing:

- Name and address of each for-profit service provider
- Service to be provided by provider
- The unit of service to be provided
- Total amount per unit of service not to exceed a certain amount per contract period

Complete the list of contracts with any Profit Making Organization.

Important Note: Any and all contractual relationships with a Profit Making Organization requires DAIL prior approval not less than thirty (30) days prior to signing of contract by the area agency and service provider. This includes contracts obtained through an NLE. You need to send a facsimile of your contract with a profit-making organization for prior approval for any and all contractual relationships.

List of Contracts with Profit Making Organization(s) & Approval Request			
Name & Address For-Profit Services Provider	Services to be provided	Unit of Service to be provided	Cost/Unit of Service
Five Star Food Service 120 Hunters Court Bowling Green, KY 42103	Title III/Homecare Catered Hot Meals	\$5.72	\$5.72
GA Food Service 12200 32 nd Court North St. Petersburg, FL 33716	Title III/Homecare Frozen/Shelf Stable Meal Preparation and Delivery	\$6.81 – meal preparation and delivery	\$6.81
Comfort Keepers 730 Fairview Ave. Suite A3 Bowling Green, KY 42101	Title IIIB Homemaking, Assisted Transportation and Personal Care. Homecare Homemaking, Personal Care, Respite, and Escort	\$38.50 per hour \$100 – IIIB Assisted Transportation – per one-way trip	\$38.50 per hour \$100 – IIIB Assisted Transportation – per one-way trip

XXIV. ASSURANCES

- 1. Each Area Agency on Aging and Independent Living shall assure that case management services under Title III of the OAA will not duplicate case management services through other federal and state-funded programs and will include in its annual plan the coordination of case management services between programs.**
- 2. Each Area Agency on Aging and Independent Living shall provide for adequate and qualified staff for service provisions.**
- 3. Each Area Agency on Aging and Independent Living assures that the Area Agency on Aging and Independent Living and Independent Living and its services provider staff are trained as required for their job functions.**
- 4. Each Area Agency on Aging and Independent Living and Independent Living shall assure that there is an integrated regional client management data system.**
- 5. Each Area Agency on Aging and Independent Living shall encourage local cities and towns to plan for the growing aging populations and needs.**
- 6. In accordance Sec. 306(a) of the Older Americans Act, each Area Agency on Aging and Independent Living shall assure 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 and 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:**
 - (a) Services associated with access to services transportation, health services (including mental health services)**
 - (b) 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 public supported programs for which the consumer may be eligible**
 - (c) Case management services**
 - (d) In-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and**
 - (e) Legal assistance.**
- 7. Each Area Agency on Aging and Independent Living shall assure that it will establish 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.**
- 8. Each Area Agency on Aging and Independent Living shall assure that it will develop proposed methods to achieve the objectives described in Section 306(1), paragraph (4)(a)(i), clause I as follows:**
 - (a) 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;**
 - (b) 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;**
 - (c) Include the proposed methods to achieve the objectives described in Section 306(a), paragraph (4)(a)(i), clause (I)**
- 9. Each Area Agency on Aging and Independent Living shall provide information to extent to it meets the following objectives:**
 - (a) Establishes 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;**

(b) Includes specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas.

- 10. Each Area Agency on Aging and Independent Living shall assure that it will conduct outreach efforts that identify individuals eligible for assistance under this Act, with special emphasis on-older individuals residing in rural areas and older individuals with greatest social and economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas); older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas); older individuals with severe disabilities; older individuals with limited English proficiency; older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and inform the older individuals referred to above and the caretakers of such individuals, and older individuals at risk for institutional placements of the availability of such assistance.**
- 11. Each Area Agency on Aging and Independent Living shall assure 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.**
- 12. Each Area Agency on Aging and Independent Living shall assure that it 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.**
- 13. Each Area Agency on Aging and Independent Living shall assure that in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), it will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2001 in carrying out such a program under this Title.**
- 14. Each Area Agency on Aging and Independent Living shall provide information and assurances concerning services to older individuals who are older Native Americans including-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 and Independent Living will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title; an assurance that the Area Agency on Aging and Independent Living will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and an assurance that the Area Agency on Aging and Independent Living 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.**
- 15. Each Area Agency on Aging and Independent Living shall provide assurances that the Area Agency on Aging and Independent Living will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.**
- 16. Each Area Agency on Aging and Independent Living shall provide assurances that the Area Agency on Aging and Independent Living will disclose to the Assistant Secretary and the State agency --the identity of each non-governmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and the nature of such contract or such relationship.**
- 17. Each Area Agency on Aging and Independent Living shall provide assurance that the AAAIL will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.**
- 18. Each Area Agency on Aging and Independent Living shall provide assurances that the AAAIL will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.**
- 19. Each Area Agency on Aging and Independent Living shall provide assurances that the AAAIL 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.**
- 20. Each Area Agency on Aging and Independent Living shall provide assurances that preference in receiving services under this Title III of the Older Americans Act will not be given by the Area Agency on Aging and**

Independent Living to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this subchapter.

- 21. Each Area Agency on Aging and Independent Living shall provide assurances that funds received under this Title will be used; to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph Section 306(a)(4)(A)(i); and in compliance with the assurances specified in Section 306(a)(13) and the limitations specified in section 212 of the Older Americans Act.**
- 22. Each Area Agency on Aging and Independent Living shall provide for a legal representation/advise in accordance with Chapter 4, Section 731 of OAA (Chapter 35, 42 U.S.S. 3058j) including a listing of the types of cases that will be accepted through this program.**
- 23. Each Area Agency on Aging and Independent Living shall assure that its legal assistance provider will identify and serve those who are homebound by reason of illness, incapacity, disability or otherwise isolated.**
- 24. Each Area Agency on Aging and Independent Living and independent living shall provide assurances that the legal assistance provider will make referrals and maintain an individual referral list for clients who request services but are not served.**
- 25. Each Area Agency on Aging and Independent Living shall implement and oversee a community Elder Abuse Prevention program in accordance with Chapter 3, Section 721 of OAA (Chapter 35, 42 U.S.C. 3058i) for the prevention of elder abuse including neglect and exploitation. The program shall coordinate with LTC Ombudsman, senior centers, long term care facilities, judicial, law enforcement and other community agencies.**
- 26. Each Area Agency on Aging and Independent Living shall develop programs, services and initiatives that support a comprehensive coordinated system of care for older Kentuckians.**
- 27. Each Area Agency on Aging and Independent Living shall facilitate the coordination of community-based, long-term care services designed to enable older individuals to remain in their homes.**
- 28. Each Area Agency on Aging and Independent Living shall maintain a plan for the development and administration of regional ADRC and coordinate information and access to regional services.**
- 29. Each Area Agency on Aging and Independent Living shall provide assurance that if entering into an agreement with a profitmaking organization for the provision of services not otherwise receiving services under the OAA shall follow all provisions listed in Section 212 of the Older Americans Act.**
- 30. Each Area Agency on Aging and Independent Living shall plan for the development of consumer directed options to expand service delivery and coordination with other service delivery.**
- 31. Each Area Agency on Aging and Independent Living shall assure Title III-B Supportive Services will be delivered in the District in accordance with Section 321 of the OAA, as amended.**
- 32. Each Area Agency on Aging and Independent Living shall assure service providers have an adequate process for referral, service scheduling, and an internal evaluation system to ensure quality services are provided.**
- 33. Each Area Agency on Aging and Independent Living and independent living shall provide assurances for coordination of services described in Section 321 (a) of the OAA with other community agencies and voluntary organizations providing the same services, including agencies that carry out intergenerational programs or projects.**
- 34. Each Area Agency on Aging and Independent Living shall implement services in accordance with 910 KAR 1: 180 for the provision Homecare services to be delivered in the District.**
- 35. Each Area Agency on Aging and Independent Living shall provide a process used to ensure the Homecare program coordinate services for individuals with other publicly funded community long-term living services.**
- 36. Each Area Agency on Aging and Independent Living shall implement services in accordance with 910 KAR 1:160 for the provision of Adult Day Care and Alzheimer's respite services.**

37. Each Area Agency on Aging and Independent Living receiving funds to implement Personal Care Assistance Program (PCAP) in the district, shall provide for the implementation and oversight of the PCAP program and its provisions according to 910 KAR 1:090
38. Each Area Agency on Aging and Independent Living shall provide a plan for the provision of SHIP services which includes those provided by Title III-B Legal Services and ACL funds.
39. Each Area Agency on Aging and Independent Living shall provide for locally accessible counseling to individual beneficiaries unable to access other channels of information or needing and preferring locally based individual counseling services.
40. Each Area Agency on Aging and Independent Living assure that the SHIP program will target outreach in order to address access to counseling for low-income, dual-eligible, and hard-to-reach populations.
41. Each Area Agency on Aging and Independent Living enhance the counselor work force including the recruitment and training of counselors and volunteers and shall ensure that all SHIP counseling sites have access to a computer with Internet access and are registered on the SHIP NPR website: www.shipnpr.acl.gov.
42. Each Area Agency on Aging and Independent Living ensure participation in SHIP education and communication activities, thus enhancing communication to assure that SHIP counselors are equipped to respond to counseling needs and that the regional coordinator will disseminate information as needed and conduct quarterly meetings with SHIP staff and volunteers.
43. Each Area Agency on Aging and Independent Living provide for the implementation and management of Title III C-1 (Congregate) Services and maintain a plan for back up food preparation sites and nutrition sites.
44. Each Area Agency on Aging and Independent Living shall provide for the implementation and management of Title III C-2 (Home-Delivered Meal) Services, including an emergency plan for back up food preparation sites and nutrition sites.
45. Each Area Agency on Aging and Independent Living shall provide nutritionally balanced meals that comply with the most recent Dietary Guidelines, published by the Secretary of Health and Human Services and the Secretary of Agriculture, and Dietary Reference Intakes as established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences for meals funded through Title III-C Nutrition Services Program.
46. Each Area Agency on Aging and Independent Living shall provide for nutritional screening, nutrition education, and where appropriate nutrition counseling.
47. Each Area Agency on Aging and Independent Living shall comply with applicable provisions of State or local laws regarding the safe and sanitary handling of food, equipment, and supplies used in the storage, preparation, service, and delivery of meals to an older individual.
48. Each Area Agency on Aging and Independent Living shall implement a plan for furnishing emergency meals during inclement weather conditions, power failure, any disaster that may cause isolation, medical emergencies, or those with a special need. At least three menus that meet the nutritional requirements of the program shall be planned.
49. Each Area Agency on Aging and Independent Living shall provide for Title III D services as outlined in Sections 361 & 362 of OAA (Chapter 35, 42 U.S.C. 3030M), by providing integrated health promotion and disease prevention programs to older adults that are evidence-based as defined by the ACL to promote healthy lifestyles and behaviors.
50. Each Area Agency on Aging and Independent Living provide or arrange for medication management programs in accordance to Title III D, including activities to screen to prevent drug reactions and incorrect prescriptions.
51. Each Area Agency on Aging and Independent Living provide for a healthy aging initiative, including coordination with state health and wellness programs and senior games.
52. Each Area Agency on Aging and Independent Living coordinate the recruitment, supervision, retention, recognition and training of volunteers, including senior centers, long term care ombudsman and SHIP (benefits counseling) volunteers within Area Agency on Aging and Independent Living programs.

53. Each Area Agency on Aging and Independent Living assist with and coordinate activities to encourage opportunities for older persons to stay active and involved through community volunteerism.
54. Each Area Agency on Aging and Independent Living provide for support of caregivers through regional programs that provide information, assistance accessing resources, training, respite, counseling, support groups and other services provided in National Family Caregiver Support Program in accordance with Section 373 of OAA (Chapter 35, 42 U.S.C. 3030s-1.
55. Each Area Agency on Aging and Independent Living shall provide for support of grandparents/relative caregiver through regional programs that provide information, assistance accessing resources, training, respite, counseling, support groups and other services provided in National Family Caregiver Support Program and Kentucky Caregiver Support Program.
56. Each Area Agency on Aging and Independent Living shall inform the public, including policy makers, about the challenges the elderly face when disability changes their lives. Maintain an AAAIL Advisory Council consisting of older individuals, including older rural and minority who are participants or who are eligible for programs assisted under OAA.
57. Each Area Agency on Aging and Independent Living shall provide for coordination and delivery of Title III services to residents of long-term care facilities including community based services which residents may access, when other public resources are not available to provide such services.
58. Each Area Agency on Aging and Independent Living provide community awareness regarding the needs of residents of long-term care facilities.
59. Each Area Agency on Aging and Independent Living shall provide for a formal process to receive/identify, investigate and resolve inquiries and complaints that are made by or on behalf of residents of licensed Long Term Care facilities.
60. Each Area Agency on Aging and Independent Living shall maintain a management system which ensures accountability of the district office to respond to the resident's needs including certified back-up in absence of the District Long Term Care Ombudsman.
61. Each Area Agency on Aging and Independent Living provide to the general public, potential residents of long-term care facilities and facility residents information and education regarding: The LTC Ombudsman Program, navigating the long-term care system, Residents' Rights in Long-Term Care facilities.
62. Each Area Agency on Aging and Independent Living shall utilize the state-provided system to document information on complaints and conditions in long-term care facilities; maintaining confidentiality and prohibiting disclosure of identity of any complainant or resident, except as allowed under 42 U.S.C. 3058g (5)(D)(iii). Submit quarterly, annual and special reports as required by the State Long Term Care Ombudsman and DAIL.
63. Each Area Agency on Aging and Independent Living shall provide for adequate legal counsel, without conflicts of interest, to provide advice and consultations for the protection of health, safety, and welfare of residents, and support the district LTC Ombudsman by representing older adults as provided under the Act for legal representation.
64. Each Area Agency on Aging and Independent Living will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.
65. Each Area Agency on Aging and Independent Living shall provide assurances to provide for a District LTC Ombudsman Advisory Council in accordance with state requirements.
66. Each Area Agency on Aging and Independent Living provide for the support of the District LTC Ombudsman program with state funds (CMP) as well as with funds from the federal Title VII Ombudsman and Elder Abuse Prevention program.
67. Each Area Agency on Aging and Independent Living provide for the expansion of the District LTC Ombudsman program as additional funding is provided.

68. Each Area Agency on Aging and Independent Living make use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing services offered through the AAAIL. As appropriate and 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.
69. Each Area Agency on Aging and Independent Living shall coordinate with the state, local and/or regional public mental health services agency to: increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the Area Agency on Aging and Independent Living with mental health services provided by community health centers and by other public agencies and local mental health organizations to facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings. Coordination shall be conducted in a manner that is responsive to the needs and preferences of older individuals and their family caregivers, by: 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. In coordination with local mental health entities, continuously analyze and recommend strategies as needed to modify the local system of long-term care to better: respond to the needs and preferences of older individuals and family caregivers; facilitate the provision, by service providers, of long-term care in home and community-based settings.
70. Target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings; 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 providing for the availability and distribution of public education programs provided through the Aging and Disability Resource Center, the Area Agency on Aging and Independent Living, and other appropriate means relating to: the need to make individual improvements in daily health and wellness habits; plan in advance for long-term care; and (ii) the full range of available public and private long-term care (including integrated long-term care) programs, options, service providers, and resources.
71. Each Area Agency on Aging and Independent Living shall provide assurances that funds received will be used: to provide benefits and services to older individuals, giving priority to older individuals with greatest economic need, older individuals with greatest social need and older individuals at risk for institutional placement, low income minority older individuals, older individuals with limited English proficiency, and older individual residing in rural areas; and in compliance with the assurances Section 306(a)(13) and the limitations specified in Section 212.
72. Each Area Agency on Aging and Independent Living 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.
73. Each Area Agency on Aging and Independent Living shall include in the area plan statistical data indicating projected changes in the number of older individuals residing in the AAAIL over the next 10-year period, the impact of changes in population to older individuals and the AAAIL's services, statistical data regarding projected changes in minority, low-income, number of older rural individuals and other target populations over the next 10-year period for which data is available. Further, the AAAIL shall provide an overview of an analysis regarding how programs, policies, resources and services can be adjusted to meet the needs of the changing population of older individuals in the planning and service area, particularly supportive services to address the change in the number of individuals age 85 and older in the planning and service.
74. Each Area Agency on Aging and Independent Living shall provide services 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 AAAIL to build the capacity in the planning and service area to meet the needs of older individuals for: health and human services; land use; housing; transportation; public safety; workforce and economic development; recreation; education; civic engagement; emergency preparedness; and any other service as determined by the AAAIL in coordination with public officials.
75. Each Area Agency on Aging and Independent Living shall provide, to the extent feasible, the provision of services under the Older Americans Act and Kentucky Administrative Regulations consistent with self-directed care.