

**Larimer County Office on Aging,  
The Area Agency on Aging  
Region 2A**

**Four-Year  
Planning & Service  
Area Aging Plan (PSAAP)**

**Fiscal Years July 1, 2015 through  
June 30, 2019**



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## **SECTION I: EXECUTIVE SUMMARY**

SUA PD=15-04 The Area Plan provides the Area Agency on Aging's primary blueprint of action. The Executive Summary incorporates the essential points of the Area Plan.

Area Agencies on Aging (AAA) form part of an aging network led by the U.S. Administration on Aging (AoA) and State Unit on Aging (SUA). AAA's are responsible for providing leadership in identifying gaps and weaknesses in the delivery of services, while fostering expansion of programs for older adults as well as provide direct funding for public and private agencies that serve seniors. The Older Americans Act (OAA) authorizes an array of community services, which are funded and coordinated through regional Area Agencies on Aging. Services include nutrition programs, transportation services, in-home services, caregiver support, case management, information and assistance, evidence-based health promotion and health education programs, legal assistance, and elder protection.

Planning for the Older Americans Act (OAA) occurs at the federal, state and local levels. Every four years, the Colorado State Unit on Aging requires each of the 16 Area Agencies on Aging (AAA) to submit a plan of action for the following four years. This plan takes into account the demographic trends of the region, the changing needs of the consumers covered by OAA and the current services covered by the AAA. The plan projects the changes that need to occur in order for the AAA to meet the challenges of the times. This includes the need to build upon the infrastructure established by the AAA to serve an increasing population of older adults. For this planning period, the State Unit on Aging provided each region with Policy Directive 15-04 "Planning Assistance" document for purposes of outlining the required elements in the area plan. Larimer County Office on Aging (LCOA) follows the outline and includes all required elements.

The designated Area Agency on Aging for Region 2A in Larimer County is the Larimer County Office on Aging. The AAA is located within the Department of Human Services (DHS), under the Governing Board of the Larimer County Board of Commissioners. The LCOA Advisory Council is appointed by the Board of Commissioners and provides additional oversight, input, and direction for the agency. LCOA operates under the guiding principles of Larimer County and DHS and is an integral part of the overall mission for the department to "provide safety and support for children and vulnerable adults". Current staff consists of a Program Manager and nine staff. (See Attachment F for organizational chart).

As LCOA plans for the future, the most prevailing consideration is the changing demographics in Larimer County. The population of adults 60 and over is expected to increase by 71% in the next ten years and make up 31% of the total population. This change will put tremendous pressure on the services that LCOA provides as well as the overall aging service delivery network.

In July 2015, the Older Americans Act will celebrate 50 years of providing services targeted at maintaining the health and independence of older adults in our community. The Larimer County Office on Aging established in 1976, remains committed and proud to continue its efforts to provide services and fulfill the mandated mission of the Older Americans Act and State Funding for Senior Services (SFSS). The funding of OAA programs delivers great value for the dollars by providing low cost services to keep older adults independent and healthy and potentially prevent more costly premature nursing home placement. Examples of these services include a daily home delivered meal, a ride to the doctor, a homemaker to clean the house, the installation of grab bars, a class in fall prevention, respite for a tired caregiver, a safe adult day center, a place to have a hot meal with friends at low cost, a resource guide to find where services are or a friendly voice on the end of the telephone line to help decide what options are available. These all contribute to health and well-being of our older adults and are at the foundation of what Larimer County Office on Aging does.

In order to fulfill this mandate, LCOA must look at local needs and trends and project what changes need to be made to current programs, and how LCOA can enhance service delivery to older adults through collaborative efforts and funding priorities.

To move forward in this planning period LCOA gathered input from older adults, their family caregivers, service providers and LCOA Advisory Council members. In addition, staff is involved with multiple networks and organizations and is at the forefront in recognizing trends and directions in the aging network at the local and national level. To guide LCOA in the next four years staff developed a vision that will keep the team focused while adjusting and planning for service delivery in the community.

#### Our Vision

- *Larimer County Office on Aging will be a recognized leader in aging and disabled services through collaborations with community partners.*
- *Larimer County Office on Aging will identify gaps in services and work to foster solutions to address needs.*
- *Larimer County Office on Aging will continually assess internal and external organizational capacity of service providers and provide advocacy and support to address changing needs.*
- *Larimer County Office on Aging will create an environment which promotes quality and cost effective services using measurable data and outcomes for internal and external programs.*

To build on this vision, LCOA must look to its community partners. LCOA depends heavily on the work of grantees and other service providers. LCOA grantees are able to leverage other sources of funding and volunteers to provide the direct services that are so crucial to keeping older adults independent and healthy. The challenges these organizations face and their work in creating the capacity to meet the growing needs of

the population is recognized by the LCOA. The Larimer County Office on Aging will strive to increase the support to grantees by providing increased communication, technical support and assistance that has been requested and necessary. Through the strengthening of the work of LCOA grantees, the network will be able to increase capacity and serve even more consumers.

In addition to working directly with local partners, LCOA will continue its work with the National Association of Area Agencies on Aging, the Colorado Association of Area Agencies on Aging, the Colorado Commission on Aging and the Colorado State Unit on Aging. This focus helps to guide policies and procedures and to streamline and enhance services as well as to pass along to grantees information critical to responding to opportunities and challenges in the future.

LCOA recognizes that with limited resources and increasing demand for services, data and outcomes will drive decision making regarding future funding. LCOA is committed to strengthening its ability to “tell the story” of the impact of services through measurable outcomes, both qualitative and quantitative. The State Unit on Aging, through the “Planning Assistance” document, has begun this process by outlining outcomes and performance indicators for a number of LCOA’s core services. LCOA will add staff dedicated to quality measures and outcomes. Information from data and outcome measures will help guide funding decisions and program development throughout this planning period.

Moving forward, LCOA will continue its focus and involvement in creating age-friendly communities in Larimer County that support a better quality of life for all seniors. The Larimer County Office on Aging will provide leadership and support to the Partnership for Age Friendly Communities (PAFC), an initiative that was created through a grant from the National Association of Area Agencies on Aging (n4a) to the Foundation on Aging of Larimer County. PAFC has recognized that this initiative can only be successful with the involvement of all sectors of the community including private, non-profit, business, and government. Working with this partnership, LCOA will strive to help mobilize and empower the community to be responsive to the needs of current and future older adults.

LCOA recognizes that we are in an environment of change. The program will need to be responsive and adaptable as new initiatives and opportunities are brought forward. The Administration on Aging and State of Colorado continue to position Area Agencies on Aging and their programs to be leaders in the provision of home and community based services and changes in our long-term care system. LCOA will work steadfastly to carry out the plan so that older adults in Larimer County may benefit from a coordinated and efficient aging network.



## **SECTION II: PUBLIC INPUT**

SUA PD-15-04 The primary foundation of the Area Plan is the voice of the consumer. The aspirations, strengths, and needs of each Planning and Service Area (PSA) should guide the Area Plan.

The AAA shall conduct at least one public input meeting on the Area Plan to provide an opportunity for older adults, local government officials, key informants, and other interested parties to provide input to the Area Plan. Adequate published notice must be extended to increase older adults' opportunity to participate. AAAs shall retain documentation of each public input meeting (through recorded or written minutes) and a list of participants. The meetings should consider current and future service and support needs of older adults and the issues, challenges, and opportunities facing the Region. Describe the number, dates, and locations of the public input meetings. Documentation of public meetings may be identified as an attachment to the Area Plan. Discuss how those attending informed the Area Plan.

The purpose of a four-year plan is to develop a course of action, that will guide an Area Agency on Aging's funding and service related decisions to fulfill the intent of the Older Americans Act. Within the development process of the four-year plan there were opportunities for the involvement of older adults, the public and service providers to help inform decision-making regarding the plan's priorities and courses of action. Each group that provided information during this period brought with them a unique frame of reference and perspective. The information listed below are highlights of these different perspectives, however, are not all-inclusive to the input received. The input provided by these groups is woven throughout this four-year plan and provides LCOA with critical insight into funding priorities and direction.

For the 2016-2019 plan development LCOA used the following methods to gather public input.

### **CASOA**

Larimer County contracted with the National Research Center, Inc. (NRC) to conduct an assessment of the strengths and needs of its older residents. The Community Assessment Survey for Older Adults (CASOA) survey, its administration, and results are standardized to assure high quality survey methods and comparable results across communities. The survey was mailed in October 2014 to a random sample of 2,500 older adult households in Larimer County. A total of 818 surveys were obtained, providing an overall response rate of 35% and a margin of error of plus or minus 3% around any given percent and two points around any given average rating for the entire sample (CASOA, 2015).

Because of the accuracy in methods and previous survey results from 2010, 2014 CASOA results were compared to the 2010 results to examine trends. Differences between 2010 and 2014 can be considered "significantly significant" if they are four percentage points (4%) or greater than any given "average" rating. The full survey can be found at: <http://www.larimer.org/seniors/publications.htm>

The results of the CASOA describe Larimer County as a “livable community for older adults” within the six community dimensions below:

- 1) Overall Community Quality
- 2) Community and Belonging
- 3) Community Information
- 4) Productive Activities
- 5) Health and Wellness
- 6) Community Design and Land Use

Overall, older adults in Larimer County gave high ratings to the community as a place to live. About 9 in 10 would recommend Larimer County to others and the vast majority of older residents plan to stay in Larimer County throughout their retirement with implications as the boomers reach old age.

The survey highlights the many strengths of the Larimer County older population and the economic impact that having a vibrant, healthy senior population can have on community. For purposes of this document, LCOA looked at areas of problems encountered by older adults and how the programs funded through the Office on Aging and/or its partnerships may be able to aid in resolution.

The areas as reported by older adults surveyed where there was at least a “minor problem” include:

- **Community and Belonging**—There was a marked decrease compared to the 2010 survey of residents who felt that Larimer County was open and accepting of older residents of diverse backgrounds or that older residents were valued. In addition, 27% of the respondents had experienced at least a “minor problem” with being treated unfairly or discriminated against because of age.
- **Community Information**—A little more than half (56%) of respondents had at least “minor problems” with not knowing what services for older adults were available.
- **Productive Activities**—Overall, 54% of respondents indicated they were providing care for others (typically for an adult 60 or older). Of those caregiving, 19% reported “feeling physically burdened” in providing care and 22% indicated “feeling emotionally burdened”.
- **Health and Wellness**—54% of respondents indicated that they had at least “minor problems” with physical health. Over 30% indicated they have problems with maintaining their home, yard and a healthy diet, while 50% indicated having problems with completing heavy or intense housework.

Overall most respondents indicate that their mental health is “excellent” or “good”, even though less than half (45%) rate the availability of quality mental health care as “good”. While most respondents ranked their mental health as “good”, they still reported at least “minor problems” by experiencing feelings of depression (29%), loneliness or isolation (26%), boredom (34%), as well as dealing with loss (29%).

Significant in this area, impacting health and wellness, is the percentage of older residents who reported they had “fallen and been injured at least once” in the previous 12 months (29%).

- **Community Design and Land Use**—Forty-nine percent (49%) of respondents report at least a “minor problem” in meeting their basic needs. These needs include 18% having housing to suit their needs, 8% having enough food to eat and 23% having safe and affordable transportation. Additionally, it is interesting to note that 12% of respondents are no longer able to drive. In other words 7,680 of the total older adult population may require some type of assistance with transportation based on this sample group.

### **Focus Groups**

LCOA conducted three community focus groups to ensure community input was able to help inform the four-year plan’s development. These groups were held at:

- Fort Collins Senior Center, Fort Collins
- Chilson Senior Center, Loveland
- Good Samaritan- Estes Park Village, Estes Park (caregiver specific)

In the two sessions held in Fort Collins and Loveland, the participants were first given information about the services provided through LCOA funding. These participants were then asked to respond to questions about what is difficult about aging and what services would be helpful. While many of the responses were very individualized, some similarities emerged including:

- Accessible transportation, especially in rural areas and across city lines.
- Help with navigating aging services-especially Veteran’s services and having one central place to access information.
- Housekeeping and home improvement services “to help get their home more adaptable”.
- Affordable housing with the additional fear of being “priced out of housing”.
- The importance of exercise and keeping active to age well and stay engaged in the community.

The purpose of the caregiver focus group held in Estes Park was to have a guided conversation to inform the LCOA on the needs of caregivers in a more geographically isolated area of Larimer County. The caregivers in attendance were asked to identify what they felt worked for them as caregiver and what would be most helpful in supporting them in their community. The top two responses included the need for adult day care program/center and respite services.

*Main Topics Requested*  
(Request, Number of requests)

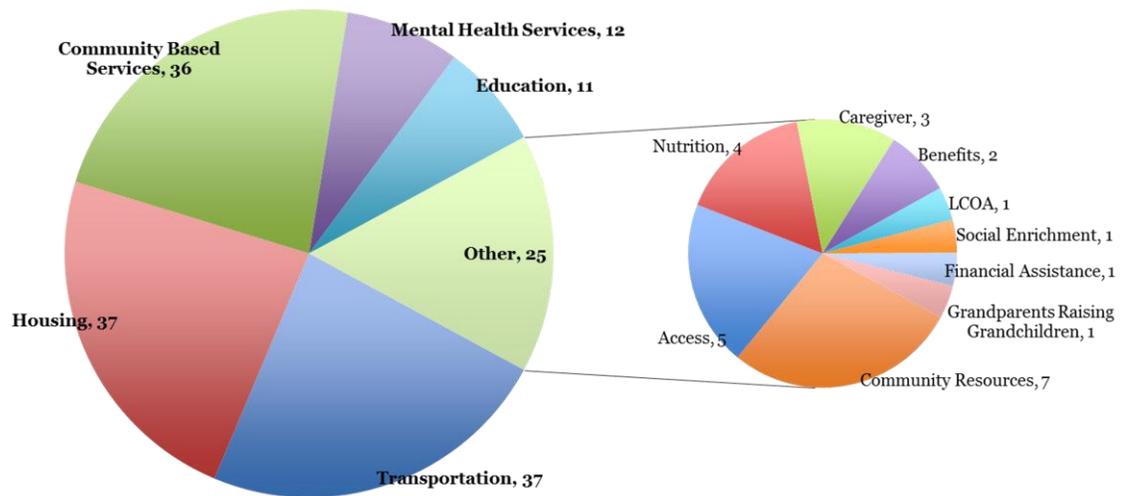


Figure 1.

### Provider Input

Providers of services to older adults are another group of key informants for the four-year plan. LCOA conducted three types of community assessments to gather information. The descriptions are below:

- A “listening session” for LCOA grantees on September 3, 2014 with 11 grantees attending and one additional grantee providing written input.
- A Provider’s focus group on October 11, 2014, with 5 providers, specifically to gather information about caregiver needs in Estes Park.
- A community wide survey of service providers in the fall of 2014 using Survey Monkey. A total of 178 surveys were emailed to known providers of senior services with a 104 responses, 58% response rate (See Attachments for survey questions).

Overall providers indicated that accessible transportation and affordable housing are two of the biggest needs facing seniors in Larimer County. The provider survey indicated that these two items in addition to personal care, caregiver support/resources and financial assistance made up the top five requests for services. While these were listed as the most requested services, the providers submitted a full range of home and community based services (see break-out in Figure 1) that would make a difference in an older adult’s ability to age well in Larimer County. In addition to the similarities in responses between these three groups, the grantees indicate that a challenge they face is the reluctance of many older adults in using more formal services and the need to do outreach and education for isolated individuals regarding these types of services.

## **Larimer County Office on Aging Advisory Council**

The 21 member Office on Aging Advisory Council along with County Commissioner Steve Johnson and Director of Human Services, Ginny Riley, participated in a half-day session on October 9, 2014 to help inform the area plan. The session was conducted by the Colorado State University Center for Public Deliberation with the focus of gaining input on the stated outcomes and strategies in the following areas as outlined in the “Planning Assistance” document provided by the Colorado State Unit on Aging.

- Unserved and Underserved
- Caregiver Programs
- Transportation
- Nutrition Services

The Advisory Council members were asked to respond to specific strategies presented in the area plan “Planning Assistance” document. Several of the suggestions are incorporated into the outcomes and strategies in Section VII. The Advisory Council members in individual groups presented many and varied ideas. In compiling the data common themes across all the discussions were noted. These include the following:

- A need to reach Spanish-speaking older adults.
- The importance of “word-of-mouth” in reaching the unserved and underserved and how to incorporate this into outreach activities.
- The on-going need for community partnerships and intergenerational programming.
- The incorporation of ride-sharing for addressing transportation needs in rural areas.
- The need for nutrition programs to add more options in order to serve more people.

In addition, Advisory Council members provide regular input through participation in site reviews of LCOA grantees, and participation in committees and meetings where members are regularly updated on LCOA program activities and offered opportunities to provide input.

## **Staff**

LCOA initially conducted a staff retreat in June 2014 to help identify and discuss strengths, weaknesses, opportunities and threats as an organization. In February 2015 the staff reconvened, with a focus on addressing the components of the four-year plan as outlined in the “Planning Assistance” document from the State Unit on Aging.

LCOA staff took information from the previously mentioned input and combined this with their years of experience to draft a vision for the next four years as described in the Executive Summary. Staff members provided input into the listed outcomes and strategies identified by the State Unit on Aging. This staff input has been incorporated throughout the specific strategies and proposed programs in the four-year planning document.

**Partnership for Age Friendly Communities**

In February 2014, LCOA in collaboration with the Foundation on Aging and other community partners convened a group of approximately 40 representatives from city and county government, academia, health providers, transportation interests, private and non-profit businesses, senior centers and others to identify needs of the aging community. The stakeholder meeting, led by the Center for Public Deliberation at Colorado State University, identified specific projects to address the challenges of housing, transportation, wellness and the local culture of aging.

**Public Meeting**

A public meeting was held on Friday, May 2015 (see Attachment) for purposes of presenting the plan to solicit public input. There was no public comment provided at the meeting. Advisory Council approved the plan unanimously.

## Section III: Current and Future Programs

SUA PD-15-04 The Plan shall list the Older Americans Act/State Funding for Senior Services (OAA/SFSS) programs that are in place as of May 2015 and any additional programs that the AAA is considering implementing during the course of the Area Plan. The Plan shall describe the AAA's current volunteer program(s) and the total number of volunteers at the time of the writing. The Plan shall describe any projected expansion of the volunteer program(s) during the course of the Area Plan.

Each Area Agency on Aging is required by the Older Americans Act (OAA) and the Administration on Aging to provide services from specific categories. Funding for services include Older Americans Act Funding, State Funding for Senior Services and grants.

### CURRENT SERVICES

- **Access Services.** This category includes transportation, information assistance, case management and outreach.

Information and Assistance: The Larimer County Office on Aging provides information and assistance (I&A) both through a contracted provider and internal staffing.

- ***Aging and Disability Resources for Colorado (ADRC)*** is an internal program that provides in-depth information and assistance and options counseling regarding long-term care and community-based services and supports. To better serve consumers LCOA created an information and assistance specialist position to enhance the ADRC. This is in response to the increasing number of calls and request for assistance received by the ADRC and LCOA. The ADRC also provides short-term case management as needed. The ADRC is the Local Contact Agency for Medicare Section Q and provides options counseling for individuals identified by the Section Q assessment that would like to transition into a community-based setting through the Colorado Choice Transition program. In addition, the ADRC provides application assistance for individuals applying for Medicaid and Medicare Savings Plan (MSP). The staff maintains a printed and online resource directory of local resources including long term care services and supports. The ADRC is supported by several grants and OAA/SFSS funding and is provided by 3.75 fulltime employees.
- ***United Way 211*** receives funding from LCOA to provide general information and referrals to older adults, as well as more specific information on long term services and supports. 211 maintains the Whole Community Emergency Network database for use in a natural disaster.

Transportation Services: Transportation services are provided by funding contracts between LCOA and the following providers:

- **Berthoud Area Transportation (BATS)** provides rides for persons 60 and older that live in Berthoud for medical appointments as well as other trips that promote self-sufficiency. BATS limits their services to the city limits of Berthoud with twice weekly trips to Loveland, as well as a weekly trip to Longmont.
- **VIA Mobility Services** are para-transit services provided five days per week to senior residents in Estes Park.
- **SAINT** provides transportation for seniors to medical appointments as well as other trips that promote self-sufficiency, provided by volunteers, in the Fort Collins and Loveland areas.
- **Wellington Senior Center** transportation services are provided to seniors living in Wellington through a contract with LCOA.
- **Colorado Cab Company** provides transportation services to individuals who need transportation for medical needs when no other options are available.

Outreach services: LCOA provides outreach by informing the public about available services and resources. Staff participates in many groups and committees throughout the County, representing LCOA and provides presentations to community groups regarding its services. LCOA Advisory Council members also assist by distributing informational materials and attending public meetings on behalf of the Office on Aging.

- **Answers on Aging Resource Guide** is developed and maintained by LCOA staff. Annually, LCOA prints and distributes over 30,000 copies of the resource guide throughout the county. The guide consistently receives high marks from community members and providers as being one of their most effective marketing tools (Provider's Survey, 2015).
- **Coloradoan newspaper** publishes a monthly column written by a contracted writer to inform on aging issues. This program will end at the end of this fiscal year due to changes at the newspaper.
- **50+ Marketplace newspaper** publishes a monthly column written by staff on aging issues.
- **Network of Care** was introduced as a searchable service directory in 2013. Network of Care provides assistance in finding local resources, information on Medicaid and Medicare along with applications for benefits, as well as being a resource on general topics related to aging. Upcoming community events and announcements can be posted on Network of Care home page. The directory can be found at <http://LCOA.networkofcare.org>.

Case Management: **Lutheran Family Services** provides case management services in circumstances where additional assistance is required in order to successfully coordinate community based services.

Chore Services: are minor home maintenance activities that are essential to the individual's health and safety and include yard maintenance, snow removal, simple home repairs, and deep cleaning.

- **The chore voucher program** was developed in 2014 by LCOA based on an identified need. Over one-third of CASOA survey respondents indicated that they had at least a “minor problem” with maintaining their yard or doing heavy housework (CASOA, 2014). Consumers contact LCOA with requests for in-home chore services, are assessed for eligibility, and if eligible, are given a voucher for up to \$350 to purchase requested services to maintain their home.
  - **Volunteers of America (VOA)** provides Handyman Services to assist with safety modifications in the home including installation of hand rails, wheelchair ramps and bath grab bars. Services are provided by volunteers.
- **In-Home Services.** LCOA contracts for the provision of non-medical home care including personal care and homemaker services. In addition, LCOA has contracted for occasional skilled care including a certified nursing assistant (CNA). Historically, this service has been contracted to a single provider. Over the course of the past year there has been wait list for in-home services. In response, LCOA developed a voucher program. There are three vendors that have been identified that will accept in-home service vouchers. There is currently no wait list.
    - **Rehabilitation Visiting Nurses Association (RVNA)** provides skilled care, personal care and homemaker services in Larimer County through a contract with LCOA.
    - **Estes Park Home Care and Hospice** provides personal care and homemaker services to residents in Estes Park under contract with LCOA.
    - **In-Home Services Voucher** is an internal LCOA program where staff conduct in-home assessments and assign hours for non-medical home care and refer to contracted home care agencies chosen through a Request for Quotation (RFQ) in January 2014.
- **Legal Assistance.** LCOA contracts with a local law firm to provide legal services to seniors in Larimer County.
    - **Wallace and Kling** provides legal assistance to individuals 60 years or older. Nancy Wallace, the primary attorney, has announced her retirement at the end of FY2015.

- **Ombudsman Services.** LCOA provides advocacy for residents of 47 long term communities through the Long Term Care Ombudsman Program.
  - ***The Long Term Care Ombudsman program*** consists of two full-time certified Ombudsman and three certified Volunteer Ombudsman. Current staff is able to meet all program requirements including required facility visits, complaint investigations, facility staff consultations, community education, participation in resident council meetings, facility surveys and other required activities.
  - ***Title VII the Vulnerable Elder Rights Activities Programs*** provide services in conjunction with the Larimer County Long Term Care Ombudsman program. The LCOA Ombudsman program has written protocol in place with Larimer County Adult Protective Services and are members of the Larimer County Adult Protection team.
  
- **Nutrition Services.** The purpose of Older American's Act nutrition programs is to reduce hunger and food insecurity among older adults and delay adverse health conditions related to poor nutrition. The nutrition programs account for approximately half of LCOA grant funding and the largest number of units of service and clients. LCOA funds both congregate meal sites and home-delivered meal services through contracted providers.
  - ***Loveland Meals on Wheels*** provides hot, home-delivered meals, nutrition education, nutrition screenings and outreach to seniors in Loveland and the southern parts of Larimer County. Blizzard boxes are also provided.
  - ***Volunteers of America (VOA)*** provides congregate meals, nutrition education and nutrition counseling, Monday through Friday at seven meal sites in Loveland, Fort Collins, Bellvue, and Wellington. Within Fort Collins and northern parts of Larimer County frozen home-delivered meals along with nutrition education and nutrition counseling are provided to seniors.
  - ***Town of Estes Park*** provides blizzard boxes for residents in Estes Park.
  
- **Caregiver Support.** The National Family Caregiver Support Program (NFCSP), established in 2000, funds a range of services and supports that assist family and other informal caregivers to provide care for their loved ones at home for as long as possible. LCOA provides both internal and contracted services to enhance caregiver support.
  - ***Caregiver Support*** is provided internally under the Family Caregiver Support Program. The program provides information, guidance, support and assistance to family caregivers with in-home individualized visits. One full-time employee, the Caregiver Support Coordinator, coordinates the program.
  - ***Respite Grants*** are distributed by the Caregiver Support Coordinator. Grants of \$300 are available to family caregivers in need of respite. Family caregivers are eligible for a grant every six months.

- **Material aid** grants are managed by the Caregiver Support Coordinator. The Coordinator evaluates eligibility and the need for material aid including such items as incontinence supplies, and nutritional supplements.
  - **Aging Clinic of the Rockies (ACOR)** provides counseling for family caregivers. Services include assessing and treating the factors related to overstressed family caregivers. Services are provided by PhD Psychology students at Colorado State University under clinical supervision.
  - **Namaqua Center** affiliated with Touchstone Health Partners, provides short-term case management for grandparents and other relative (kin) caregivers who are raising grandchildren with the goal of assisting them in accessing community services.
  - **Volunteers of America (VOA)** administers the Caring Companion Program, which uses trained volunteers to provide respite to family caregivers through providing companionship to their care recipient.
  - **Adult Day Services** are provided through contracts with the two adult day programs in Larimer County who provide community-based group programs designed for adults with impairments. The programs provide a structured, comprehensive program to meet the health, social, and recreational needs of participants in a safe and supervised environment.
    - *Stepping Stones Adult Day*, is a program of Banner Health and McKee Medical center that provides adult day services five days a week, Monday through Friday, to participants 60 years of age and older.
    - *Elderhaus, Inc.*, provides a safe and therapeutic environment for adults Monday through Friday, as well as a partial day on Saturday.
- **Advocacy, Coordination, and Program Development.** LCOA provides internal staff to advocate for the needs of older adults and to provide leadership in coordination and collaborative efforts to promote and develop programs that meet these. LCOA also provides program development grants to develop new initiatives to meet the needs of the community such as Rural Alternative for Transportation (RAFT), a volunteer transportation service that has been developed to serve residents of rural Berthoud and surrounding areas.
    - **Partnership for Age Friendly Communities.** LCOA, in partnership with the Foundation on Aging, provides support to a broad based collaborative effort to promote principles and activities that will lead to age friendly communities throughout Larimer County.
    - **Senior Transportation Coalition.** LCOA provides support to and is an active member of the Senior Transportation Coalition group committed to addressing the transportation needs of seniors.
    - **Larimer County Office on Aging Advisory Council.** A group of community sponsors that address issues important to seniors. Past forums have included topics such as the Affordable Care Act and Veteran's issues.

- **Community Assessment Survey of Older Adults.** LCOA commissioned a community needs assessment to help inform the community regarding the needs of community seniors as well as a nutrition study to assess ways to enhance the delivery of nutrition services.
  - **Senior Outreach.** In partnership with the Foundation on Aging, LCOA staff provides leadership to a coalition of community case managers that are working to develop a streamlined process to reach seniors that are isolated and in-need of case management services.
  - **Larimer County Alliance for Grandfamilies (LCAG).** LCOA staff actively participates in LCAG to help support grandparents raising grandchildren in our communities.
- **Disease Prevention and Health Promotion Services.** LCOA contracts for disease prevention and health promotion services. Beginning July 1, 2015, federal money can only be spent on top tier evidence based programs. The following services were contracted through LCOA funding in FY14-15. EB indicates top tier Evidence Based.
    - **Matter of Balance for the Visually Impaired (EB).** Enight Skills Center provides a fall prevention program for persons 60 and over that are visually impaired.
    - **Chronic Disease Self Management (EB).** LCOA contracts with University of Colorado Health to provide programming that empowers individuals with chronic condition to manage their own health care and improve their quality of life.
    - **Powerful Tools for Caregivers (EB).** LCOA staff facilitates classes and provides overall leadership and coordination for the certified class leaders in Larimer County.
    - **Medication Management.** LCOA contracts with RVNA to provide interventions for seniors who need education or assistance in managing their medications.
    - **N' Balance.** LCOA has worked closely with the Consortium for Older Adult Wellness (COAW) to sponsor and fund fall prevention classes using the N' Balance approach. Currently, the classes are considered evidence based, but do not meet the top tier as required by the Administration on Aging for funding. COAW is actively working on top tier certification and it is anticipated that N' Balance will meet the full criteria during this planning period.
- **Vision Services.** In 2014, the state legislature added money to the LCOA budget for the provision of services to persons aged 60 and over with visual impairment. This is defined as a severe reduction in vision that cannot be corrected with standard glasses or contact lenses and reduces a person's ability to function at certain or all tasks. LCOA contracted with two new providers to address the needs of the visually impaired.
    - **Enight Skills Center,** an agency that provides outreach, education, assessments, training and material aid to visually impaired seniors.

- **Disabled Resource Services**, an agency that provides material aid and training through their “Visions Matters After 55” program.

## **FUTURE PROGRAMS**

Planning for the distribution of funds for the next four years is a complex task. The landscape of aging services is constantly changing and funding levels are difficult to predict. LCOA remains committed to the purpose of the Older Americans Act which is to use our resources in a way that will continue to increase capacity, and foster the development and implementation of a comprehensive and coordinated system to serve older adults in Larimer County.

LCOA must remain informed and ready to adapt to the changes that may occur during the next planning period. Since the last plan, the balance of funding has changed significantly with the State of Colorado contributing more than half of the total funds. This increase in funding from the State of Colorado has partially off-set the cuts in funding from the Federal government and has provided LCOA with the ability to build capacity both internally and with external grantees. There remains on-going concern about future funding due to federal sequestration, as well as the impact of the Tax Payer Bill of Rights (TABOR) and the state’s ability to adequately fund senior services into the future.

As the population of seniors increases and the amount of funding remains uncertain, it will be important to provide strong leadership and sound fiscal management of both state and federal dollars. This is to ensure that the programs offered through LCOA will meet the increased demand, as well as have the ability to demonstrate cost effectiveness and positive outcomes through performance based indicators and measurable data. LCOA will develop greater internal capacity to better support grantees in meeting these outcomes and continued provision of quality services.

While providing services in an environment of cost efficiencies and outcome based measurements, LCOA will continue to turn to its guiding principles as a tool in making funding decisions. These guiding principles are listed below.

- *Provide programs and services for adults 60 and over that promote health, independence and quality of life.*
- *Collaborate with community partners to stay informed on the strengths and needs of older adults in Larimer County. Provide leadership in planning and advocating for services to meet identified needs.*
- *Be a reliable and accurate source of information for older adults, persons with disabilities, and family caregivers in Larimer County.*

- *Reach out and target older adults with the greatest social and economic need.*

All core services, as described previously, will continue to receive funding during the next four years with funding amounts adjusted based on performance and funds available. Any changes or expansion in programming, as well as new programs, are described below. Specific outcomes and strategies can be found in Section VII for most categories.

- **Information and Assistance.** Larimer County Office on Aging will continue to focus on providing quality leadership in information and assistance to area seniors. In the recent CASOA, there was a decrease in the number of individuals indicating the availability of information as being “excellent” or “good”. LCOA is committed to reversing this trend by the advisement from marketing experts to assist with developing a comprehensive marketing and outreach plan to reach the population of seniors in Larimer County. The well developed marketing and outreach plan will include techniques for reaching non-English speakers and minorities. It is anticipated that LCOA will be able to provide more comprehensive service to older adults who are un(der)served in Larimer County.
- **Aging and Disabilities Resources for Colorado.** LCOA remains committed to the ADRC model. It is expected that during the next year, the State of Colorado will make decisions regarding the role of the ADRC in “No Wrong Door”, an initiative for persons seeking long-term aging services and supports. This model proposes to make it easier for those in need of long-term supports and service (LTSS) to learn about and access the services they need. The Larimer County Office on Aging and ADRC will remain flexible and open to service delivery models that will enhance the work of the ADRC while also serving the targeted population.
- **Transportation Services.** These services are vital for seniors and the key to accessing other services that assists seniors to remain in their own home. Lack of transportation is often cited as one of the main issues for seniors. Currently, LCOA funds five (5) transportation providers, each unique and important to the area they serve. It is anticipated that LCOA will fund one additional provider to serve rural Berthoud. Also, based on community input, LCOA will continue to explore strategies and funding opportunities to meet the needs of rural residents. LCOA staff will maintain their active role in community initiatives to address this essential service.

- **Material Aid.** Increasingly, LCOA receives requests for assistance to pay for items that are needed for day to day functioning. This trend coincides with the approximately 31% of CASOA respondents that indicated at least a “minor problem” with having enough money to meet daily expenses (CASOA, 2015). To help address this need LCOA will develop a voucher program to provide assistance with the purchase of goods that can enhance an individual’s functioning including such items as hearing aids, grab bars, materials for wheelchair ramps, security devices, shower chairs etc.
- **In-Home Services.** Services within the home are often the key in maintaining independence for seniors that experience challenges in activities of daily living. LCOA will continue to fund in-home services, yet will change the current delivery system model. LCOA will provide services through a voucher program, using internal staff to assess need and provide vouchers to eligible individuals. LCOA will contract with up to four providers to provide choice and greater accessibility to services. At the time of the assessment for services, LCOA staff will be able to assess for additional services, providing wrap-around services for those seniors in-need. It is felt that this model will be an enhancement to overall service delivery. Services in Estes Park will be contracted out to a local home health care agency. LCOA will add one full-time case manager to manage this program.
- **Legal Assistance Services.** LCOA will see a significant change in the delivery of services in this area. The current service provider will be retiring after providing 25 years of service. LCOA will seek a new provider through the Request for Proposal (RFP) process with expectations that the provider will provide services with priority given in the following areas: public benefits assistance, Powers of Attorney, living wills, housing and property disputes, and consumer issues. LCOA will provide support and oversight to assure quality of services throughout the transition.
- **Ombudsman Services.** LCOA will remain the supervising agency for the Larimer County Long Term Care Ombudsman program. The Ombudsman program will maintain two (2) full-time staff and plans to increase the number of certified volunteer Ombudsman to five (5). LCOA will commit the funding necessary to enable staff to continue to meet all program requirements. During this planning period, there will be an on-going assessment of capacity of this program with the potential need to add staff as the number of assisted living and skilled nursing home beds increases.

- **Nutrition Services.** As stated earlier, nutrition services make up the largest portion of grant funding from LCOA. Staff, current nutrition grantees, and the LCOA Advisory Council recognize that the model of service delivery, especially with congregate meal service, needs to be updated to meet the needs of a changing senior population. LCOA is committed to providing increased support to the nutrition programs to assist in planning for the future. LCOA will continue to fund nutrition at its current levels and provide program development dollars to build upon the nutrition analysis completed in 2014 (JVA Consulting, 2014). With this continued rate of funding and data the intended outcomes will be to develop new service delivery models, increase efficiencies and increase the overall number of seniors that can benefit from nutrition services. Nutrition services are a core service for the Larimer County Office on Aging and are vital to maintain the health and well-being of those most in need. In addition, LCOA will work with nutrition grantees to develop and implement a robust nutrition counseling program. Initial steps have been taken to look at models that can be implemented in Larimer County.
- **Caregiver Support Services.** LCOA remains committed to its current array of caregiver support services including the provision of respite, both in-home and community, counseling and adult day services. Staff has completed the first development steps of a new caregiver assessment process that will provide the program with the necessary data to demonstrate the effectiveness of the Family Caregiver Support program's interventions. As the population of caregivers in Larimer County increases this program will continue to make changes needed to maintain quality and cost effectiveness of its services. It is anticipated that within this planning period, additional staff and greater use of interns will be needed to maintain and grow the program to meet the increased demand.
- **Advocacy, Coordination and Program Development.** The Larimer County Office on Aging recognizes and fully embraces its role as an advocate for the needs of older adults and providing leadership in coordination of efforts to promote and develop programs for seniors in our community. This will continue to be a key function of LCOA staff as they participate in current and future initiatives that build upon efforts of creating a community that supports its older residents.
- **The Partnership for Age Friendly Communities.** This is a specific initiative that will be a top priority in the area of advocacy and program development. The staff will continue to provide on-going leadership and support. LCOA recognizes the importance of this community collaborative in addressing the issues of an aging population and understands that it is only through strong partnerships with public, private, government and business interests, that the community can address the issues that impact older adults in Larimer County. It is anticipated that through this partnership bigger issues of housing, attitudes towards aging, transportation and broad health and wellness topics will be addressed and moved forward as community initiatives.

- **Program Development** will continue to be a focus of the LCOA as areas of need are identified. As mentioned earlier, the landscape of aging services is rapidly changing and evolving as our communities prepare for and deliver services to this growing segment of the population.
- **Peer-to- Peer Counseling.** A current plan for the first year of the four-year plan is the development of a peer-to-peer counseling program. During the past year, staff and community providers have explored the development of a peer-to-peer program modeled after successful programs in other parts of the state. The desire for this program grew out of the lack of mental health services for older adults as reported by older adults participating in the 2014 CASOA and from providers input on the 2015 LCOA Provider’s Survey.
- **Friendly Visitor Program.** Staff working with community partners through the Senior Outreach, have long recognized the need for a program to address the issue of isolated and lonely seniors. LCOA will pursue a Friendly Visitor Program during this four-year planning period. LCOA staff will research best practices in this area creating a proposal with the help of community partners for implementation in the community.
- **One of the most critical areas of program development will occur internally.** The Larimer County Office on Aging has seen a tremendous growth in demands for services, increased regulations and expectations regarding performance measures and outcomes, increased number of grantees, and increased complexity in contracts and tracking. In order to provide quality services, track outcomes and provide support to current and future grantees, LCOA will create a position dedicated to quality assurance and outcomes. In addition, LCOA is engaged in an “Organizational Capacity Assessment” being conducted through the Larimer County Human Services Department. It is anticipated that following the assessment, there will be recommendations regarding internal processes that will aid in the efficiency of daily operations. As part of this assessment, LCOA will follow up on recommendations to increase capacity internally as well as supporting external grantees and partners.
- **Disease Prevention and Health Promotion.** Based on current trends in research and funding, LCOA will provide support for top tier evidence based programs that address the health needs of seniors. LCOA will maintain support for current top tier evidence based programs as listed earlier in this section.
  - Fall prevention is a top priority based on community input and the CASOA which that indicates 29% of respondents had “fallen and been injured at least once” in the past year.
  - LCOA will continue its support of N’ Balance, even though it does not meet the top tier of programming. It is very well-received among participating seniors and the sponsoring organization is working towards full accreditation.

- LCOA will work with community providers to identify other fall prevention evidence based programs to address falls and fall prevention. LCOA will continue to support its current medication management program for one additional year and work with the provider to transition to a top tier medication management program in the second year of this four-year plan.

## Volunteer Programs

Volunteers are an essential component of the LCOA for delivering services in this region. Most of the programs that are supported by the AAA use volunteers to expand their capacity and to serve more seniors. Many of the programs would no longer function without the support of volunteers and the countless hours they provide. The Larimer County on Aging recognizes the value of volunteers and each May presents the Stan Ulrich Award to a senior volunteer in Larimer County as well as a Family Caregiver award.

Internally LCOA uses volunteers in three primary areas, the Ombudsman Program, Powerful Tools for Caregivers, and the LCOA Advisory Council. Listed below is the current status of each program's use of volunteer services.

- **The Ombudsman program** currently has three (3) certified Ombudsman. The program staff would like to expand this to five (5) certified Ombudsmen within the next year. Staff feels this is a manageable number and will help to enhance the overall delivery of services.
- **The LCOA Advisory Council** currently has a twenty-one (21) members. This robust group puts in many hours of service through committees and community outreach.
- **Powerful Tools for Caregivers** currently uses 14 volunteer leaders to provide the program throughout the County. Current plans are to provide training for new volunteer class leaders in Fall 2015.
- LCOA is committed to supporting the next generation of persons interested in aging services and will continue to use **interns** to help enhance programming.

## SECTION IV: QUESTIONS

SUA PD-15-04 The Area Plan covers State Fiscal Years 2016-2019 (July 1, 2015 through June 30, 2019) The Plan shall respond specifically to each of the questions.

### 1. Describe the unserved and underserved client in the Planning Service Area.

The Older Americans Act, as amended in 2006, frequently references “targeting” and specifically requires that preference and priority in the delivery of services be given to older adults with the greatest social or economic need with particular attention to low income minority individuals, older individuals residing in rural areas, low income individuals and those older adults who are frail. These individuals are most likely to be described as the “unserved” and/or “underserved” in the planning service area due to their social and geographic isolation, limited English proficiency and/or low income status.

To better reach the population of seniors that are most likely to be “unserved” or “underserved”, is to look for areas of persons 60 and older that are at the poverty level or slightly above. Income level is a risk factor that can lead to poor health outcomes, nutritional deficiency, and social isolation. This measure can assist the Area Agency on Aging in coordinating and prioritizing outreach activities and to locate services in areas that have a higher proportion of the targeted population.

In Larimer County, persons aged 60 and over, with incomes at or below the poverty level make up approximately six percent (6%) of the population or 3,840 individuals (State Demography Office, 2014). When looking at economic need, it is important to focus on the lowest income, however, it is also important to consider those 60 and older who may be above the poverty level, but still challenged in meeting their basic needs. A more accurate way to measure this vulnerability is basing it on 185% of the federal poverty guidelines. Approximately 18% of those 60 or over in Larimer County have incomes that are 185% of the poverty level or an income of less than \$1800 per month. This is an amount that makes it hard to maintain a minimum standard of living in Larimer County where costs of basic necessities continue to increase especially in the cost of housing, which has seen increases in rent as much as 22% in the last year alone.

Using an interactive mapping tool provided by the Colorado Department of Local Affairs, LCOA can look to see where pockets of low income seniors live and begin to target outreach and services in those areas of the county. This tool will be used by LCOA to work with grantees and other providers to assure that the programs funded by Title III Older Americans Act are targeted to the priority groups. Current areas of focus will include Northeast Fort Collins, the central part of Loveland and rural areas North and West of the main corridor.

**2. How will the following two demographic cohorts—those 75 years old to 84 years old and those 85 years and older—change in the Planning Service Area over time of the Area Plan? What impacts does the AAA project to the budget and service provision because of these demographic changes?**

In 2014, there were 64,000 adults 60 and over living in Larimer County. In the next 10 years it is expected that this demographic cohort will increase by 71% (CASOA, 2015). This number will have a tremendous impact on the aging services network as the community prepares for and reacts to this demographic shift and the overall service delivery system.

More specifically for this planning period (2015-2019), the Planning Service Area is required to understand two cohorts—those 75 to 84 and those 85 and over to begin to anticipate how the growth in these cohorts will impact the need for OOA services and the budget for these services. It is projected that the population of seniors 75 to 84 will increase by 29% (12,137 to 15,659) and those 85 and over will increase by 11% (6,253 to 7,186) (CASOA, 2015).

As individuals reach the age of 75 and older, the need for in-home and community based services increases due to the physical, social and economic changes related to aging. In just one example of an increased need it is estimated that as a person ages, they will outlive their ability to drive by ten years.

LCOA anticipates that services that are directly related to assisting a person to remain independent will increase in proportion to the increase in the number of older adults. This will have an impact on the number of services needed to remain in a person's own home including homemaker and personal care, help with home maintenance and chores, transportation, and nutritional services such as home delivered meals. In addition, individuals that are more frail due to the aging process will need more than one LCOA program. This is often referred to as "wrap-around" services which help an individual remain as independent as long as possible. As the need for more services increases, so does the need for coordination of these services to assure effectiveness and efficiency in care.

The last area of growth impacted by these two cohorts will be seen in the increase in the number of long term care beds in Larimer County. It is estimated that 70% of persons over the age of 65 will need long term care in a facility at some point in time. The majority of residents in long-term care are 75 or older. Currently, Larimer County has 2,500 long-term care beds with an anticipated increase of 6% this year alone (LCOA Ombudsman Program, 2015). With the Larimer County front range being the fastest growth area in the state it can only be assumed that the number of beds will continue to increase each year as the population ages and there will be an impact on LCOA, especially the Long Term Care Ombudsman program. It is anticipated that, depending on funding, the Ombudsman program will need to increase staffing by at least a .75 FTE during this four-year planning period.

In considering the overall impact to LCOA and its service delivery, it is anticipated that there will be an increased need for all services previously mentioned. This is especially true if as the number of seniors with incomes below 185% of the federal poverty level increase at the same rate of the general aging population, creating an even greater strain on services targeted for low-income and frail seniors. In order to provide the level of service needed, funding increases will be necessary to ensure all those eligible are able to be served. LCOA will continue its efforts in advocating for enhancement of funds dedicated to the Older Americans Act and the State Fund for Seniors. In addition, LCOA will be open to exploring other sources of revenues and grants in order to enhance service delivery and expand services to this population of seniors.

To prepare for this shift, LCOA will look to better coordination of services among providers, streamlining access to LCOA services through the Aging and Disability Resources for Colorado (ADRC), critically assessing effectiveness and efficiency of current and future grantees through outcome measures, and implementing outreach methods that can be measured and coordinated to assure that those most in need are informed of services and have access to the services available. In addition, LCOA will strengthen the coordination with the County programs that serve older adults, and assist consumers in navigating between these programs.

### **3. How will the AAA increase the number of services provided and the number of unduplicated clients over the four years of the Area Plan?**

In considering the increasing number of seniors in Larimer County in the next four years, it can easily be assumed that the number of unduplicated clients will increase if funding is stable and/or increases to meet the growing call for services.

Unfortunately, this is not always the case, and in order to increase the number of clients served as well as the services provided, LCOA will need to be intentional in its efforts to effectively and efficiently create, nurture, and assess funded programs to assure that dollars provided are used in a way that reaches the most clients with services.

In the next four years, LCOA will address this issue in the following ways.

- Provide leadership and support in local networking activities including establishment of regular grantee meetings and educational opportunities to increase cross referrals as well as, referral to programs funded by LCOA. Increasingly, it is anticipated that many of the consumers served will require more than one service provided by LCOA funding. In this case, it will be essential that LCOA work with its partners to assure efficiency and smooth transitions between programs to avoid unnecessary cost burdens on grantees or duplication of services.

- The Larimer County Office on Aging will establish a staff position that will look at quality, effectiveness and efficiencies of programs funded, both internally and externally. With the increased emphasis on outcomes and performance based contracting it is essential that the organization has staff that is dedicated to quality assurance and data collection, as well as creating efficient delivery systems to assure sound fiscal stewardship of grant dollars. By creating this position, LCOA anticipates increased effectiveness in the use of grant dollars (both internally and externally), the ability to more accurately collect data that captures the number of unduplicated clients served, and an increased ability to serve additional consumers.
- The aging network continues to change in ways unexpected even a few years ago. It is essential that LCOA be aware of and ready to take on new opportunities to expand services. It is anticipated that with the Affordable Care Act, as well as the emphasis on home and community based services, person-centered planning, and consumer direct services, there will be opportunities to expand services through non-traditional areas of funding and methods. An example of this is with the use of voucher programs.

Currently, the state is engaged in a planning grant, “No Wrong Door” that has the potential to positively impact the Aging and Disability Resources for Colorado established under the Area Agency on Aging. In addition, the results of this grant may open up new opportunities for funding and service areas for LCOA. The program will work with community partners, the Advisory Council, and County management to assess each opportunity and the fit to the organization, being ready to grow programs as needed to serve additional consumers while staying true to the intent and mission of the Older Americans Act.

- Nutrition services are the foundation of the Older Americans Act and account for the largest amount of grant funding distributed through the Office on Aging. Nutrition services are responsible for the highest number of unduplicated clients and number of units of service provided. Nutrition services and the provision of home delivered, congregate meals, emergency blizzard boxes, nutrition counseling, and nutrition education are essential in contributing to the health and well-being of older adults, and contribute to the alleviation of food insecurity for the most vulnerable seniors in Larimer County.

Over the course of this past planning period, there has been a decline in the number of clients and units of services in the nutrition programs even as the population of eligible seniors has increased. LCOA commissioned an assessment of Larimer County meal programs in 2013/2104 to identify and examine the possible causes of the decline and to explore ways to increase the number of seniors served and units of service through the nutrition programs (JVA Consulting, 2014).

LCOA will use this next four-year planning period to more closely follow up on the recommendations of this study group and implement demonstration projects to address the decline in participants in nutrition services. LCOA will also look to cost efficiencies in service delivery and work with the providers to assure efficient, effective and increased service delivery with an overall increase in units of service.

- In order to increase services to seniors through LCOA, older adults and their families must be aware of the services available and have easy access to them. In the most recent CASOA, there was a decline in respondents that ranked availability of information about resources for older adults as “excellent” or “good” (CASOA, 2015). To address this decline, LCOA will assess current outreach and marketing methods and develop and implement a strategic plan to provide outreach methods that will reach older adults in Larimer County. This plan will include a special emphasis on the targeted population of low income, rural, and isolated seniors. The anticipated outcome will be an increase in the number of seniors served.

#### **4. What evidence-based health promotion or disease prevention programs does the AAA currently provide and plan to provide during the period of the Area Plan?**

Evidence-based health promotion and disease prevention programs support healthy lifestyles, promote healthy behaviors, and reduce the need for more costly medical interventions. Beginning in 2015, the State Unit on Aging requires that all programs funded by Federal Title III D funds can only be used on health promotion programs that meet the highest level criteria, top tier, as established by the Administration on Aging.

Currently the Office on Aging provides funding or supports to the following health promotion programs.

- ***Powerful Tools for Caregivers (PTC)*** a top tier evidence-based program designed to help caregivers care for themselves while caring for a relative or friend. Staff facilitates classes on an on-going basis and provides leadership, coordination and training for the certified class leaders in the area.
- ***Matter of Balance*** a top tier, evidence-based program designed to improve strength and balance. LCOA provided financial support for training to community partners during the 2012-2015 planning period. Classes are offered through community partners that have trained staff on a periodic basis. This past year, funding was expanded to Ensign Skills Center to provide a class modified to meet the needs of persons 60 and older that are visually impaired and at even greater risk for falls.
- ***N’ Balance*** is an evidence-based program currently in the process of completing research to become top tier status that can reduce the risk of falls in older adults. ‘N’ Balance is funded through LCOA with state funds. The program has been

introduced in Fort Collins and Estes Park. Current grantees have requested ongoing funding to support the program as the classes are well attended and receive high marks from participants.

- **Chronic Disease Self Management Program (CDSMP)** is a top tier program that helps individuals with chronic conditions learn to manage their own health conditions. Currently LCOA provides funding to support CDSMP classes through University of Colorado Health Systems.
- **Medication management** is a type of health promotion program is supported through grant funding to RVNA, a non-profit home care agency. The medication management program assists individuals in the home to manage their medications by setting up medications and assuring proper use of medications.

In the next four years, LCOA is committed to continued support of health promotion programs including Powerful Tools for Caregivers; N' Balance; and Chronic Disease Self-Management. LCOA will make any transitions necessary to ensure all programs funded through Title III D funds, will meet the highest level of criteria as established by the AOA (Administration on Aging, 2015). Currently, based on provider input regarding the evidence-based fall prevention program, Matter of Balance, LCOA will work with community partners to identify and support another fall prevention program that meets the top tier criteria.

The current medication management program does not meet the top tier of evidence-based programs. LCOA recognizes that medication management is an important intervention that can keep seniors independent. To this end, staff will work with community partners to look at the feasibility of funding a top tier medication management program during this planning period. During the research and development phase it is anticipated that LCOA will continue to fund the current medication management program using state funds.

## **5. Describe any federal Discretionary Grant Programs in the AAA.**

The Larimer County Office on Aging currently participates in the Medicare Improvements for Patients and Providers Act (MIPPA). This program helps Medicare beneficiaries apply for the Medicare Part D Extra Help/Low-Income Subsidy (LIS) and Medicare Savings Program (MSP). MIPPA grants are administered by the U.S. Administration for Community Living and the Centers for Medicare and Medicaid Services. In addition, funding is used to conduct outreach activities to promote access to these programs, as well as to promote other new Medicare prevention and wellness benefits. LCOA, through its Aging and Disability and Resource for Colorado (ADRC), has one staff person that provides outreach for the program and application assistance. The office works closely with the University of Colorado Health Aspen Club/SHIP and the local Medicare Information Office on the administration of this grant.

**6. Describe how the AAA takes advantage of opportunities through the Affordable Care Act.**

The Larimer County Office on Aging is currently contracted with Colorado Health Care Policy and Finance (HCPF) to provide Options Counseling through the Colorado Choice Transition (CCT) program, a Money Follows the Person initiative (MFP). This program is designed to move Medicaid clients out of nursing homes into home and community based settings. Through Options Counseling, the ADRC staff provides Medicaid clients in long-term care settings with choices about how, when and where they want to receive services. The ADRC Options Counselor works closely with Transition Coordinators, service providers, the Ombudsman, and others to develop and follow-up on strategies to increase the possibility of transitions into the home. LCOA is committed to this initiative and will continue to work to strengthen the project in Larimer County.

LCOA has a well established Aging and Disability Resources for Colorado (ADRC). Currently the State of Colorado is engaged in a planning grant entitled “No Wrong Door” that will make it easier for populations in need of long-term supports and services (LTSS) to learn about and access the services they need. The Larimer County Office on Aging/ADRC is well positioned to take advantage of upcoming opportunities that maybe offered to further enhance access to long-term supports and services.

**7. Specifically what legal issues are given priority for receiving representation from the Legal Assistance Program during the next four years?**

Federal law requires that AAA’s give priority to legal assistance in eleven areas. It is recognized that no AAA in Colorado has sufficient resources to fund services in all eleven areas and each region is tasked with developing case priorities that best meet their region’s needs.

Larimer County finds itself in a unique position in regards to legal services. The current provider for legal services, Nancy Wallace with Wallace and Kling, P.C., is retiring after providing legal assistance through Title III funding for over 25 years. Her expertise and provision of legal aide to persons 60 and over will be hard to replace.

In order to clearly identify the case priorities for Larimer County and prepare for the transition to a new legal provider, LCOA formed a work group comprised of staff and LCOA Advisory Council members. The work group researched AAA legal service models, interviewed Ms. Wallace regarding her perceptions as to the community's needs based on her experience and interviewed both LCOA and Adult Protective Services staff in order to determine most requested need for legal services. The group reviewed the information gathered as well as data from current legal provider for trends and most frequently provided service. From this process, the following priorities for the planning period have been designated:

- **Public Assistance Benefits:** Provide legal assistance and advice in applying for and determination of eligibility for public assistance benefits, including but not limited to Long Term Care Medicaid, Medicare Savings Plans, Old Age Pension, the Low-Income Energy Assistance program (LEAP) and Supplemental Nutrition Assistance Program (SNAP). This will include providing advice and information on specifics of Medicaid Programs and payment of Long Term care, including Medicaid Qualifications, Medicaid Coverage, Spousal Protection (i.e. Community Spouse Resource Allowance, Monthly Income Protection) and Medicaid Estate Recovery. Assistance will consist of advice and/or administrative representation for overpayments, reductions, termination or denial of Public Assistance Benefits. The Legal Services Provider will provide in person administrative tribunal to appeal the reduction, termination or denial of a senior client's long term care Medicaid.
- **Powers of Attorney and Living Wills:** Provide assistance with document preparation of General Durable Power of Attorney (transfer, limitation or revocation), Medical Durable Power of Attorney and Living Wills. Provide legal advice regarding issues of elder abuse, exploitation and neglect while working with appropriate authorities.
- **Housing and property issues:** Provide legal advice, negotiation and brief service on matters related to landlord-tenant issues surrounding rental and subsidized housing.
- **Consumer issues:** Provide legal advice, negotiation and brief service regarding debt collections, breach of contract, garnishments, utility shut offs and other contract disputes. Services may consist of assisting senior clients in preparing for self-representation, including, but not limited to, small claims court, objections to garnishments, interrogatories, etc.

Scope of additional services includes:

- **Community Education:** Provide community education presentations at venues where seniors may gather (e.g. Larimer County Senior Law Day) on topics of legal interests relevant to seniors and senior providers such as, but not limited to, preventative measures against fraud, consumer debt issues, housing issues, advanced directives for health care.

- **Community Outreach:** Engage in networking and coordination with community service providers to build a creditable and positive reputation among referral sources including, but not limited to, LCOA staff, Larimer County Benefits Planning and Adult Protective Services, the Colorado Legal Center, senior centers, other legal professionals, pro bono professionals, and paraprofessionals. Capacity to reach clients unable to travel including visits to rural sites in Larimer County (e.g. senior centers, senior housing complexes, nutrition sites, etc.) and to institutionalized, isolated and homebound seniors as needed either in home, by phone, email or other forms of web-based communication, to provide legal assistance. Creating the capacity to reach minority seniors by providing legal assistance in Spanish.
- Services **NOT** covered by Title III Legal Services include petitions for guardianships, bankruptcy, financial counseling or advance estate planning, divorce, lawsuits and all other trusts excluding Medicaid income trusts, or any fee generating type of case.

**8. How will the AAA ensure that legal advice from the local Legal Assistance Provider is able to provide representation for these issues?**

LCOA will release a Request for Proposal (RFP) through Larimer County purchasing office to solicit applicants for a legal assistance provider. All proposals will be reviewed by a committee consisting of staff and at least one advisory council member. Applicants will be required to provide legal advice, letters and filing of court papers, as well as appropriate referrals and counseling for individuals 60 years and older and be an attorney and/or paralegal staff under attorney supervision. All applicants must be licensed and in good standing in Colorado and demonstrate through their proposal an expertise in the target population and service priorities as listed above.

LCOA will monitor service provision through review of Legal Assistance Tracking Tool, legal assistance performance indicators, and yearly site visits.

**9. What long-term care issues will the local Ombudsman Program give priority to as a systems advocate during the next four years?**

The Long-Term Care Ombudsman Program (LTCOP) was created to provide advocacy for individuals who live in long-term care facilities and who may feel powerless and vulnerable. The Long-Term Care Ombudsman (referred to as Ombudsman in this document) advocates on many levels with each level of advocacy to contribute to overall improvement in the lives of residents in long-term facilities.

The Long-Term Care Ombudsman will continue to give priority to resolving individual problems of long-term care residents, investigating, and resolving issues within the guidelines and regulations of the Ombudsman program. Frequent issues seen by the Ombudsman include inappropriate discharges; issues of privacy; inadequate care, or lack of follow through with care plans. In addition to resolving individual problems, the

Ombudsman will work towards facility change as necessary, opening the lines of communication between families, residents and facility administrators.

LCOA Ombudsman program will remain an active member of the Colorado Choice Transitions project in Larimer County. The Ombudsman work closely with facilities, the ADRC and the Transition Coordinators to assure that residents' rights are upheld throughout the process.

The Ombudsman program will also continue to facilitate the Northern Colorado Culture Change Coalition to promote person-centered values and philosophy of care in long-term care facilities. It will continue to provide training, advocacy and support to long-term care facilities to create communities that are informed, sensitive to, and supportive of Lesbian, Gay, Bisexual, and Transgender elders through Project Visibility, a training program developed by the Boulder County Aging Services.

At the local level, the Long Term Care Ombudsman will continue participation on the Larimer County Public Health Steering Committee assigned to look at mental health and well-being of residents. The Ombudsman is there to assure that the needs of elders in the community, especially those in long-term care facilities, are considered and addressed in the planning process.

The Long-Term Care Ombudsman Program will work for legislative and regulatory change by staying informed and working with their peers and leaders statewide to support state and national initiatives that address long-term care issues and quality of care.

LCOA will continue to monitor workload of current Ombudsman team and growth of the long-term community in Larimer County. Currently there are 2,500 long-term care beds in the county. This equates to each Ombudsman covering 1,250 beds and volunteers covering 311 beds. In 2015, there will be an increase of 167 beds (6%), thus increasing the number of beds assigned to each Ombudsman. As the AAA looks to this growth, management will continue to advocate for increased funding to expand staffing to assure quality and effectiveness of this service.

**10. In addition to resident council meetings, family council meetings, and trainings to facility staff, what other activities will the local Ombudsman participate in during the next four years to educate the community regarding ombudsman services?**

The Ombudsman program will continue to provide training to Certified Nursing Assistant (CNA) classes, to educate new CNAs about the Ombudsman program and resident rights. In addition, the program will maintain its partnership with Colorado State University to provide training to new social workers regarding the program.

The Ombudsman have long recognized the need for in-depth training and outreach to discharge planners at the local hospitals to assure they are aware of the role of the Ombudsman, as well as the rights of residents in issues regarding transfers and placements. The Ombudsman program will focus on developing and implementing regular trainings to this professional group in the next planning cycle.

The program will expand its volunteer training program by adding two more volunteer ombudsman, and an additional slot for a student intern from the Human Development and Family Studies or Social Work programs at Colorado State University each year to enhance the presence of the Ombudsman program in long-term care facilities.

The Ombudsman staff are frequently asked to speak at educational functions or be on panels as experts in long-term care. The Ombudsman will continue to seek out these opportunities as part of its overall community outreach.

The Ombudsman submit articles local news outlets and will continue to seek other opportunities in printed and other social media markets to help educate the community regarding the Ombudsman program and the rights of elders in long-term care.

**11. What will be the duties of the lead Ombudsman during the next four years? Will the lead Ombudsman conduct routine facility visits and respond to resident complaints?**

The lead Ombudsman will provide oversight for all paid and volunteer Ombudsman, and ensure all federal and state statutes, regulations, policies, and procedures are upheld. The lead Ombudsman assures quality assurance within the program, reviews case notes, and ensures the completion and submission of all required reports. The lead Ombudsman will work closely with the assistant Ombudsman and provide guidance and consultation on difficult cases, as well as first line guidance and technical assistance to staff and volunteers in the use of OmbudsManger.

The Lead Ombudsman will work closely with the State Ombudsman for interpretation of State, Federal, and CDPHE regulations, rules, and policies as necessary for clarification and in identifying local systems issues that are impacting the Ombudsman program. This position will recruit and train new volunteers and interns, and recommend those for certification as ombudsman. The lead Ombudsman will conduct routine facility visits and respond to resident complaints as mandated by regulations.



## SECTION V: DEMOGRAPHICS

SUA-PD-15-04 Area Agencies on Aging are required to review the changes in population over the four years of the Area Plan for only two cohorts of older adults. These are (1) the population between the ages of 75 and 84 years old and (2) the population of older adults age 85 and up (85+). Using the State Demographer's Website to the Population by Age and Gender [https://dola.colorado.gov/demog\\_webapps/pagCategory.jsf](https://dola.colorado.gov/demog_webapps/pagCategory.jsf), identify how the population in these two groups will change in the PSA in the next four years. All regions (except for 2A, 2B, 3A, and 3B) may select their region from the top drop down and *user selected age groups* from the second drop down menu. Regions 2A, 2B, 3A, and 3B will need to select their county(ies).

### Larimer County Demographics

Region 2A consists of Larimer County, located in north central Colorado, bordered on the north by the Wyoming state line, on the east by Weld County, on the south by Boulder County, and on the west by Jackson and Grand Counties. This encompasses 2,640 square miles. Larimer County's geographical terrain is varied, with rugged mountains making up the western half and foothills, prairie and agriculture in the east. Interstate 25 bisects Larimer and Weld Counties and provides easy access to the county from Cheyenne to Denver.

The county has experienced steady growth of approximately 15.6% over the last decade and currently has an estimated population of 324,122. The Colorado State Demography Office estimates the annual population will increase each year by 1.4% to 2.0% through 2030 making it the sixth largest county in Colorado (State Demography Office, 2013).

The county is anchored by its three largest cities. Fort Collins, now the fourth largest city in Colorado, has a population of 152,061 (State Demography Office, 2013). It is the home of Colorado State University and the county seat of Larimer County. It continues to be renowned for its healthy outdoor lifestyle and boasts more than 600 acres of walking and biking trails as well being a center for local and national musical festivals.

Loveland, just south of Fort Collins, a city of 67,786, has long been known as the "Sweetheart City" because of its Valentine Re-mailing Program (Compass, 2012). Loveland has become one of the top arts communities in the country and the Benson Sculpture Garden provides a unique outdoor showcase for sculptures since 1985.

To the west, Estes Park is the largest mountain community in Larimer County with a population of 6,534. Estes Park is the gateway to Rocky Mountain National Park and a hub for tourism. It also has the highest percentage of residents over 65 in the county at 25.2% (Compass, 2012).

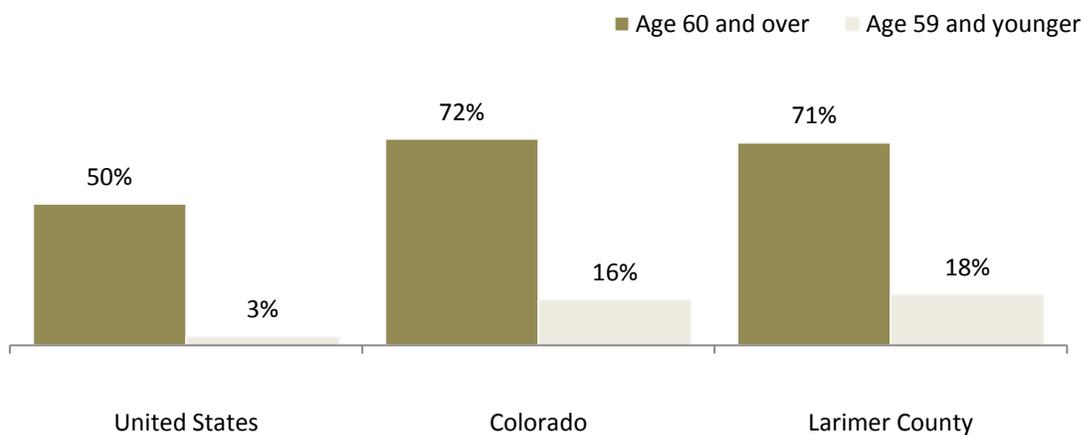
The smaller communities of Johnstown, Timnath, Wellington and Windsor have seen the largest percentage population increases in the past decade (JVA, Consulting, 2014). It will be important to consider these areas of growth as the Office on Aging looks at service delivery and the greatest need. Both Johnstown and Windsor straddle Weld County. As the population in this area increases, working with the adjoining Area

Agency on Aging in Weld County to provide services to seniors along this corridor will require coordination and collaboration to avoid duplication and increase efficiency.

### Larimer County Demographics: 60 Years and Older Population

In 2014, there were 64,000 adults 60 and over living in Larimer County. These older adults account for 25% of Larimer County’s total population. The younger population (0-59 years) in Larimer County is expected to increase by 18% by 2024, while the age 60 and over population group is expected to increase by 71% over the same period. By 2024 older adults will comprise one-third (31%) of the population of Larimer County. This number will have a tremendous impact on the aging network as the community prepares for and reacts to this demographic shift and the overall service delivery system (CASOA, 2015).

**Figure 2: Population Growth by Age Group for the United States, Colorado and Larimer County during the Period of 2010 to 2024**



*Source: U.S. Census Bureau and Colorado Division of Local Government*

For this planning period (2015-2019) the State Unit on Aging is requesting that each Planning Service Area look at two specific cohorts—those 75 to 84 and those 85 and over—and begin to anticipate how this will impact the need for Older Americans Act services and the financial budget for these senior services. It has been commonly accepted knowledge that as a person ages, their need for services provided by an Area Agency on Aging becomes more critical in assisting individuals to remain independent and in their homes of choice.

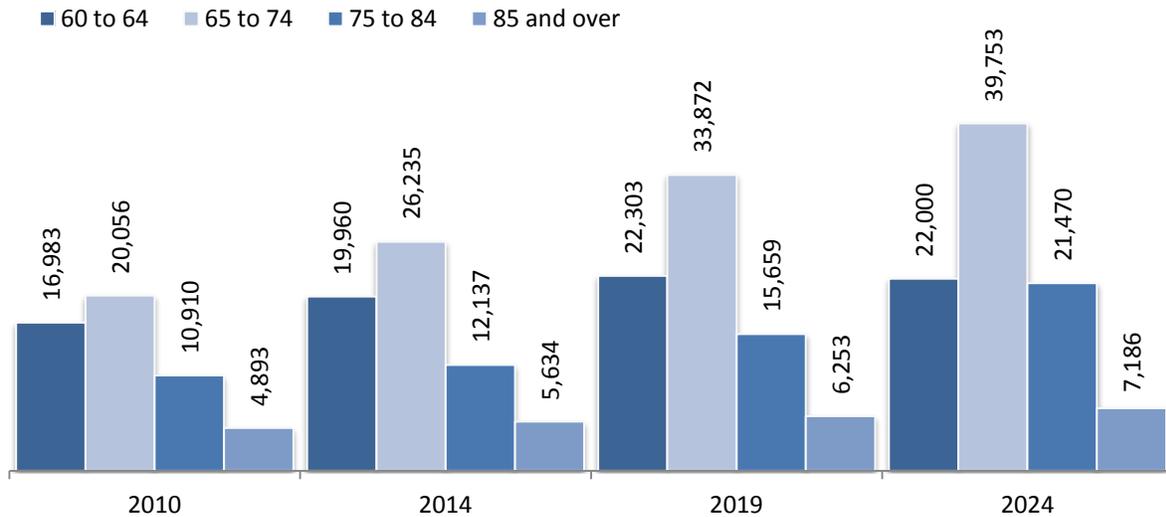
It is projected that the population of seniors 75 to 84 will increase by 29% (12,137 to 15,659) and those 85 and over will increase by 11% (6,253 to 7,186). The following chart and graph helps to illustrate the significance of this growth in Larimer County (CASOA, 2015).

**Figure 3: Projected Growth of Older Adults by Age**

	2010-2014	2014-2019	2019-2024	2010-2024 overall
60 to 64	18%	12%	-1%	30%
65 to 74	31%	29%	17%	98%
75 to 84	11%	29%	37%	97%
85 and over	15%	11%	15%	47%

Source: U.S. Census Bureau and Colorado Division of Local Government

**Figure 4: Older Adults by Age, 2010-2024**



Source: U.S. Census Bureau and Colorado Division of Local Government

In 2015, the federal poverty level for a household of one is \$11,770 per year. It is estimated that 6% of seniors in Larimer County currently live at or below the poverty level. This is a slight decrease from the previous area plan, yet still impacts 3,664 seniors in Larimer County. In 2013, it was estimated that the population of seniors that live at 185% of the federal poverty level (\$21,774 per year for household of one) is 18% or 10,927 (State Demography, 2013). Even though the numbers of low-income seniors remains relatively stable in proportion to the rest of the population, their struggles with maintaining basic services present a daily challenge as the cost of living increases in Larimer County. The number of low-income seniors is likely to increase as the number of seniors increases.

Within this 2013 estimate, the number of minority seniors over the age of 60 was 3,140 or 5.1% of the total Larimer County population over age 60. Within the younger age group (50-60) the minority share was 7.7% (State Demography, 2013). Consistent with the state of Colorado's statistics, the minority share of the population increases with younger age groups. As this more diverse population ages, the total population over age 60 in Larimer County will become more diverse as well as larger in number.



## **SECTION VI: TITLE III / VI COORDINATION**

SUA PD-15-04 Regions providing both Title III and Title VI nutrition programs shall describe the coordination of the programs in the Area Plan. Describe plans to coordinate Title III programs with Title VI Native American programs and pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits of the Area Agency on Aging and specify ways in which Area Agency intends to implement the activities. If the AAA does not provide both programs, simply mark N/A (not applicable) in the section.

This section is not applicable to Area Agency on Aging Region 2A.



## **SECTION VII: OUTCOMES, STRATEGIES, AND PERFORMANCE INDICATORS**

SUA-PD-15-04 **The outcomes and performance indicators listed below are a required component of the Area Plan with no change in language.** Suggested strategies for achieving the designated goals are listed. AAAs may include additional outcomes, strategies, and/or performance indicators. The others, not listed as required, include suggestions from the AAAs during the strategy planning sessions. In areas that identify survey language as a component of the indicator, the SUA will provide the language to be incorporated into the survey.

Measuring the impact of Older American Act (OAA) and State Funded Senior Services (SFSS) programs and activities is important, yet challenging. As the Larimer County Office on Aging (LCOA) moves forward, data and outcomes will become increasingly more important to funders and consumers. LCOA is committed to efforts to improve the measurement and evaluation of our programs in order to adequately address the needs of seniors now and into the future. The next four years will see an increased focus on implementing the processes and systems needed to accurately and efficiently measure program outcomes including developing and implementing more efficient systems to collect and analyze data. LCOA will work to collect the data needed to report on the performance indicators. In addition LCOA will continue to strive for a well administered and systematic process for demonstrating effective, cost efficient and necessary services.

The State Unit on Aging (SUA) provided the outcome measures and performance indicators for each region to use in this four-year plan within the “Planning Assistance” document. The performance indicators, as listed, are tools that will be used by the SUA to measure program impact in each Area Agency on Aging and upon which the AAA will be measured at the time of state audits. The strategies listed within this section are more specific to the Larimer County Office on Aging and were developed from staff and community input.

Not all programs provided by LCOA have outcomes listed in this section, however all programs, both internal and external, are required to develop some measurement of effectiveness. During the course of this planning period, LCOA will add a new staff position dedicated to quality assurance and outcomes. Specific outcomes and performance indicators will be assigned to all programs administered by LCOA during the first year of the area plan.

# OUTCOMES

## 1) UNSERVED AND UNDERSERVED

### **Unserved and Underserved Outcome (Required)**

Increase the number of people served and number of quality services provided through the Older Americans Act and State Funding for Senior Services.

### **Unserved and Underserved Strategies**

- Develop and implement a comprehensive marketing and outreach plan that targets low-income, minority, rural, and individuals with greatest social needs including those who are isolated or disenfranchised.
- Use data and outcomes measures to understand the effectiveness of this marketing plan and revise as needed.
- Complete internal “Assessment of Organizational Capacity” completed by the Department of Human Services. Use recommendations to increase efficiencies in internal operations to more effectively serve the targeted population.
- Develop and enhance data tracking systems and reports to analyze trends in service delivery for internal and external programs for increased understanding of service results and needs.
- Recruit volunteers from minority community to provide leadership (i.e. LCOA Advisory Council) who can assist with outreach to low-income minority population in Larimer County.
- Determine the need for translation of written materials and, as indicated, translate written materials for use during outreach efforts in minority communities.
- Maintain regular communication with grantees including, at least, quarterly grantee meetings and e-newsletter to increase cross-collaboration and referrals among LCOA funded programs.
- Partner with organizations that serve low income consumers including, but not limited to the Food Bank for Larimer County and House of Neighborly Service to expand outreach.
- Provide services in “hub” or “satellite” venues (e.g. senior centers, life centers) throughout Larimer County.
- Increase outreach to faith based community including becoming an active member of Inter-Faith Council and provide regular updates and support to members on how to reach seniors and caregivers within church congregations.

### **Unserved and Underserved Performance Indicators (Required)**

Performance Indicator 1: Increased number of unduplicated clients statewide.

Performance Indicator 2: 80% of consumers identify the services received through OAA/SFSS maintain or improve their independence.

## **2) CAREGIVER PROGRAMS**

### **Caregiver Program Outcome (Required)**

Because of support received through the OAA/SFSS Caregiver Services, caregivers will feel supported, exhibit greater self-efficacy, and have improved access to information and services.

### **Caregiver Program Strategies**

- Increase information about available caregiving services through newsletters and other forms of media as part of a comprehensive marketing and outreach plan.
- Implement the new caregiver assessment tool/process through LCOA's Family Caregiver Support program to better define needs and to more efficiently provide respite services and supports. Use data to demonstrate outcomes and revise programming as indicated.
- Increase internal capacity of direct care staff by identifying processes and efficiencies that assure needs of caregiving are addressed in all assessments. As indicated, provide additional staffing.
- Provide outreach to medical community and other providers to assist in identifying caregivers early in the caregiving process and refer for support.
- Provide outreach to minority population to identify needs of caregivers within this specific population.
- Provide for caregiver support classes and literature in Spanish as indicated by community outreach activities.
- Provide support to Estes Park caregivers to advance community initiatives to create adult day services in the area.
- Provide leadership for the expansion of the evidence-based programming Powerful Tools for Caregivers, including new classes with adapted curriculum for grandparents raising grandchildren.
- Implement a caregiver mentoring program in partnership with other organizations.
- Expand caregiver counseling services. Assure the community that services are accessible to caregivers in location and times of day offered.

### **Caregiver Program Performance Indicators (Required)**

Performance Indicator 3: Number of caregivers served.

Performance Indicator 4: 80% of NFCSP clients report in annual surveys that they feel supported by the NFCSP and express feelings of greater self-efficacy.

### **3) TRANSPORTATION PROGRAMS**

#### **Transportation Program Outcome (Required)**

Older adults have transportation available to access health care, maintain social interaction, and reach community and social services.

#### **Transportation Program Strategies**

- Participate in community efforts to promote and expand volunteer transportation services including rural areas.
- Continue on-going participation in regional transportation efforts, including the Senior Transportation Coalition, to advocate for the development of transportation services for seniors throughout Larimer County.
- Work with community groups to develop and implement innovative transportation programs based on best practices. Examples include ride-sharing, carpools, and neighbor-helping-neighbor.
- Provide on-going support to grantees of transportation services to assist in expanding current programs and coordination of services among providers.
- Provide support to mobility projects to enhance access to and information about transportation services for seniors.
- Provide accurate and up-to-date information to callers regarding transportation services through the ADRC and 211.

#### **Transportation Program Performance Indicators (Required)**

Performance Indicator 5: 90% of transportation clients indicate transportation was available to access necessary services in the community when needed.

Performance Indicator 6: Number of registered transportation clients and rides provided.

### **4) LEGAL ASSISTANCE PROGRAMS**

#### **Legal Assistance Outcome (Required)**

Resources are effectively expended on legal issues faced by those most in need and for which other legal assistance is not available.

#### **Legal Assistance Strategies:**

- Services rendered are dictated by client needs, as articulated in the Priority Services section of the Older Americans Act (Volume 10, §10.419).
- Require greater specificity in the contract regarding the types of cases handled by each local service provider as outlined in the Request for Proposal (RFP) issued May 2015.
- Promote adherence to Statewide Standards for Title IIIB Legal Assistance in Colorado through yearly site reviews and regular communication with legal provider (Volume 10, §10.419).

- Provide opportunities for education and outreach regarding legal assistance through community network events including Senior Law Day.

### **Legal Assistance Performance Indicators (Required)**

Performance Indicator 7: Number of persons who receive legal assistance through Title III and SFSS.

Performance Indicator 8: Number of service units provided through Title III and SFSS.

Performance Indicator 9: Number of unduplicated clients that legal assistance could not serve.

Performance Indicator 10: Number of clients referred to other appropriate agencies or resources.

## **5) OMBUDSMAN PROGRAMS**

### **Ombudsman Program Outcome (Required)**

Resources are effectively expended on issues faced by those most in need and for which other assistance is not available.

### **Ombudsman Strategy**

- Ombudsmen staff receive the information and training sufficient to allow them to perform the responsibilities and duties of the position.
- Staff will increase to and maintain five (5) certified Volunteer Ombudsman on the team.
- Staff and volunteers will participate in on-going training to meet re-certification standards.
- Ombudsman will provide on-going education to long-term care staff, residents, and family members regarding resident rights.
- Ombudsman will provide outreach and education to hospital discharge planners to educate and problem solve regarding issues of placement and inappropriate discharge from long-term care facilities.
- Ombudsman will provide leadership to Culture Change efforts in Northern Colorado with the goal of improving and enhancing the care of residents in long-term care.
- The Ombudsman program will take the lead in promoting and providing training in Project Visibility, a training program designed to increase awareness and sensitivity to the needs in providing services of Lesbian, Gay, Bisexual and Transgender elders.

### **Ombudsman Performance Indicators (Required)**

Performance Indicator 11: Number of training sessions attended by certified Ombudsman each year.

Performance Indicator 12: Number of certified Ombudsman in region each year.

Performance Indicator 13: Number of facilities regularly visited not in response to a complaint.

Performance Indicator 14: Number of complaints handled and resolved per year.

Performance Indicator 15: Number of Ombudsman consultations.

## **6) NUTRITION PROGRAMS**

### **Nutrition Program Outcome (Required)**

Older adults will access nutrition services, socialization, and community resources to promote independence.

### **Nutrition Program Strategies**

- LCOA will conduct follow up to the nutrition study completed in 2014, with targeted focus groups and development of specific strategies to promote efficiency and innovation in nutrition programs built from the needs of the consumers.
- Build a “senior nutrition team” to include nutrition providers, members of the LCOA Advisory Council, community members and staff to act on the recommendations of nutrition study and subsequent follow-up.
- Develop and implement evaluative measures of the nutrition programs to assure effectiveness, efficiency and high quality services.
- Develop strong partnership with Food Bank of Larimer County to expand outreach to low-income seniors.
- Expand locations of congregate meal sites to un(der)served areas with a higher number of low income seniors. Assure available transportation.
- Initiate programs at congregate meal sites to increase socialization and overall sense of community.
- Initiate or expand use of “farm to table” programs to increase nutritional quality of meals and provide for more fresh fruits and vegetables to consumers.
- Support the development and coordination of a nutrition counseling program.
- Support meal delivery to serve geographically isolated seniors that do not have access to congregate meal sites.

### **Nutrition Program Performance Indicators (Required)**

Performance Indicator 16: Number of persons who receive congregate and home delivered services per year.

Performance Indicator 17: 90% of congregate nutrition program meal clients state obtaining transportation to the meal site was very easy or somewhat easy.

Performance Indicator 18: 90% of congregate nutrition program meal clients report that during the past year someone from the Nutrition Program provided information or referred them to places to learn about financial, social, or health services that are available to them or told them how to get the help.

Performance Indicator 20: 90% of home delivered meal clients report that during the past year someone from the Nutrition Program provided information or referred them to places to learn about financial, social, or health services that are available to them or told them how to get the help.

Performance Indicator 21: 90% of congregate nutrition program meal clients report they are very satisfied or somewhat satisfied with opportunities to spend time with other people at the meal site.

Performance Indicator 22: 90% of congregate nutrition program meal clients report that the nutrition program has helped them to live independently and stay in their own home.

Performance Indicator 23: 90% of home delivered meal program clients report that the nutrition program has helped them to live independently and stay in their own home.



**SECTION VIII: ATTACHMENTS**



## **DIRECT SERVICE WAIVER REQUEST**

We hereby request approval of a Waiver to provide the direct services listed below.

1. Family Caregiver Support Program
2. ADRC: Options Counseling, Application Assistance and Information & Assistance
3. Evidence-Based Programs: Powerful Tools for Caregivers
4. In-Home Services Voucher Program
5. Chore Voucher Program
- 6.

Please attach documents describing the direct service to be provided including organizational structure and planned methods of program services delivery.

**PLEASE NOTE:** If the Waiver Request is incomplete, this may result in a delay of the approval of the Area Plan.



Nutrition Program Meal Sites (Congregate & Home Delivered Meal Programs) As of December 2010

SITE NAME/ADDRESS MEAL SITE COORDINATOR PHONE/FAX/EMAIL ADDRESS	WHICH PROGRAM(S) OPERATE OUT OF THIS SITE?		IS THIS SITE A CENTRAL OR COMMISSARY KITCHEN?		ARE MEALS PREPARED ON SITE?		IF MEALS ARE NOT PREPARED ON SITE WHERE ARE THEY TRANSPORTED FROM?	WHICH MEAL IS SERVED/DELIVERED EACH DAY?			DAYS OF THE WEEK C-1 MEALS ARE SERVED	DAYS OF THE WEEK C-2 MEALS ARE DELIVERED
	C-1	C-2	YES	NO	YES	NO		BREAKFAST	LUNCH	DINNER		
1. Loveland Meals on Wheels 437 N. Garfield Ave. Loveland, CO 80537 Elizabeth Hartless (970) 661-0311 (970) 661-0316 FAX elizabeth@lovelandmealsonwheels.org		X		X	X				X			5
2. Volunteers of America 405 Canyon Ave. Fort Collins, CO 80521 Diane Stobnicke (970) 472-9630 (970) 472-8393 FAX dstobnickevoa@frii.com		X		X		X	Frozen Meals from Florida Company-GA Foods		X			5
3. Bellvue Senior Center 2929 N. County Rd 23 Bellvue, CO 80512 Nicole Murphy (970) 472-9630 (970) 472-8393 FAX voafood@frii.com	X			X		X	Transported from Wild Sage Catering to each site		X		1	
4. Chilson Senior Center 700 E. 4th Street Loveland, CO 80537 Nicole Murphy (970) 472-9630 (970) 472-8393 FAX voafood@frii.com	X			X		X	" "		X		4	

SITE NAME/ADDRESS MEAL SITE COORDINATOR PHONE/FAX/EMAIL ADDRESS	WHICH PROGRAM(S) OPERATE OUT OF THIS SITE?		IS THIS SITE A CENTRAL OR COMMISSARY KITCHEN?		ARE MEALS PREPARED ON SITE?		IF MEALS ARE NOT PREPARED ON SITE WHERE ARE THEY TRANSPORTED FROM?	WHICH MEAL IS SERVED/DELIVERED EACH DAY?			DAYS OF THE WEEK C-1 MEALS ARE SERVED	DAYS OF THE WEEK C-2 MEALS ARE DELIVERED	
	C-1	C-2	YES	NO	YES	NO		BREAKFAST	LUNCH	DINNER			
5. Fort Collins Senior Center 1200 Raintree Drive Fort Collins, CO 80526 Nicole Murphy (970) 472-9630 (970) 472-8393 FAX voafood@frii.com	X			X		X	" "		X		4		
6. Northside Aztlan Community Center 112 Willow Street Fort Collins, CO 80524 Nicole Murphy (970) 472-9630 (970) 472-8393 FAX voafood@frii.com	X			X		X	" "			X	3		
7. Oakbrook I Apartments 3200 Stanford Road Fort Collins, CO 80525 Nicole Murphy (970) 472-9630 (970) 472-8393 FAX voafood@frii.com	X			X		X	" "			X	5		
8. Oakbrook II Apartments 3300 Stanford Road Fort Collins, CO 80525 Nicole Murphy (970) 472-9630 (970) 472-8393 FAX voafood@frii.com	X			X		X	" "			X	5		

SITE NAME/ADDRESS MEAL SITE COORDINATOR PHONE/FAX/EMAIL ADDRESS	WHICH PROGRAM(S) OPERATE OUT OF THIS SITE?		IS THIS SITE A CENTRAL OR COMMISSARY KITCHEN?		ARE MEALS PREPARED ON SITE?		IF MEALS ARE NOT PREPARED ON SITE WHERE ARE THEY TRANSPORTED FROM?	WHICH MEAL IS SERVED/DELIVERED EACH DAY?			DAYS OF THE WEEK C-1 MEALS ARE SERVED	DAYS OF THE WEEK C-2 MEALS ARE DELIVERED
	C-1	C-2	YES	NO	YES	NO		BREAKFAST	LUNCH	DINNER		
9. Silverleaf I Apartments 375 W. 37th Street, #200 Loveland, CO 80538 Nicole Murphy (970) 472-9630	X			X		X	" "		X		2	
10. Silverleaf II Apartments 375 W. 37th Street #200 Loveland, CO 80538 Nicole Murphy (970) 472-9630	X			X		X	" "		X		2	
11. Wellington Senior Center 3800 Wilson Avenue, P.O. Box 634 Wellington, CO 80549 Nicole Murphy (970) 472-9630	X			X		X	" "		X		3	



## COMMUNITY FOCAL POINTS AND SENIOR CENTERS

LIST ALL FOCAL POINTS AND SENIOR CENTERS INCLUDING NUTRITION SITES IF IT IS A FOCAL POINT

CENTER NAME ADDRESS, CITY, ZIP CODE PHONE NUMBER CONTACT EMAIL	CHECK IF FACILITY IS:			CHECK IF LOCATION SERVES:	
	A FOCAL POINT	A SENIOR CENTER	FUNDED THROUGH TITLE III-B	PREDOMINANTLY LOW INCOME ELDERLY	PREDOMINANTLY LOW-INCOME MINORITY ELDERLY
1. Bellvue Senior Center P.O. Box 254 Bellvue, CO 80512 (970) 482-0406 Marilyn Moody N/A		X			
2. Berthoud Senior Center 248 Welch Avenue Berthoud, CO 80513 (970) 532-2730 Elnora McCloughan bacc105@aol.com		X			
3. Chilson Senior Center 700 E. 4th Street Loveland, CO 80537 (970) 962-2783 Gina DeBell Gina.DeBell@cityofloveland.org		X			
4. Estes Park Senior Center 220 4th Street Estes Park, CO 80517 (970) 586-2996 Lori Mitchell lmitchell@estes.org		X			
5. Fort Collins Senior Center 1200 Raintree Drive Fort Collins, CO 80526 (970) 221-6644 Peggy Bowers		X			
6. Northside Aztlan Center 112 Willow Street Fort Collins, CO 80524 (970) 221-6655 Steve Budner sbudner@fcgov.com		X			X

## COMMUNITY FOCAL POINTS AND SENIOR CENTERS

LIST ALL FOCAL POINTS AND SENIOR CENTERS INCLUDING NUTRITION SITES IF IT IS A FOCAL POINT

CENTER NAME ADDRESS, CITY, ZIP CODE PHONE NUMBER CONTACT EMAIL	CHECK IF FACILITY IS:			CHECK IF LOCATION SERVES:	
	A FOCAL POINT	A SENIOR CENTER	FUNDED THROUGH TITLE III-B	PREDOMINANTLY LOW INCOME ELDERLY	PREDOMINANTLY LOW-INCOME MINORITY ELDERLY
7. Oakbrook I 3200 Stanford Road Fort Collins, CO 80525 (970) 226-5060 Diane Whitney	X			X	
8. oakbrook@loganpm.com Oakbrook II 3300 Standord Road Fort Collins, CO 80525 (970) 223-1356 Unable to obtain oakbrook2sc@qwestoffice.net	X			X	
9. Silver Leaf I & II 375 W. 27th Street, #200 Loveland, CO 80538 (970) 667-3232 Jan Kennedy N/A	X			X	
10. The Sanctuary 3732 Kunz Court Fort Collins, CO 80526 (970) 225-2116 Lynette Sandoval lssanctuary@qwestoffice.net	X			X	
11. Wellington Senior Center 3800 Wilson Avenue Wellington, CO 80549 (970) 586-7402 Trudy Patterson wellingtonseniors@gmail.com		X	X		

## REGIONAL ADVISORY COUNCIL MEMBERSHIP

List all persons presently serving as members of your Regional Advisory Council.

NAME	ORGANIZATION AFFILIATION
Jay Adams	Citizen Volunteer
Jeff Arduino	Rigden Farm Senior Living
Elaine Boni	Citizen Volunteer
David Born	Citizen Volunteer
Sharon Courtney	Foothills Gateway, Inc.
Helen Davis	Citizen Volunteer
Phil Elliott	Citizen Volunteer
Bonnie Glass	Citizen Volunteer
Howard Hay	Citizen Volunteer
Judy Jones	Citizen Volunteer
Audrey Ketchum	Home State Bank
Ken Lamport	Citizen Volunteer
Betty McBride	Citizen Volunteer
Ellen Pihlstrom	University of Colorado Health
Rhonda Racicot	Citizen Volunteer
Mary Shultz	Citizen Volunteer
Briauna Souders	Golden Peaks Center
Earl Stevens	Citizen Volunteer
Katie Stieber	Fort Collins Senior Center
Sharon Zamora	Citizen Volunteer

Please indicate on the chart below how many members are low income, minority, or over 60

LOW-INCOME	MINORITY	60 +
3	1	13



**STATEMENT OF INTENT**

**The Area Plan**

**Is hereby submitted for**

**AREA AGENCY ON AGING (AAA) NAME**

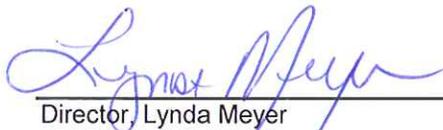
**2A  
REGION**

**For the period** July 1, 2015 through June 30, 2019

This Area Plan includes all assurances plans under provisions of the Older Americans Act during the period identified. The Area Agency on Aging identified above shall assume full responsibility to develop and administer the Area Plan in accordance with the requirements of the Older Americans Act and related State regulations and policy. In accepting this authority, the Area Agency on Aging assumes responsibility to promote the development of a comprehensive and coordinated system of community services and to serve as the advocate and focal point for older persons in the planning and service area.

The four-year area plan has been developed in accordance with the rules and regulations specified under the Older American's Act and Staff Manual Volume 10, and is hereby submitted to the Colorado Department of Human Services, Division of Aging and Adult Services for review and approval.

**SIGNATURES:**

  
\_\_\_\_\_  
Director, Lynda Meyer  
Area Agency on Aging

\_\_\_\_\_  
DATE

  
\_\_\_\_\_  
Chairperson, Audrey Ketchum  
Area Agency on Aging  
Advisory Council

5-7-15  
\_\_\_\_\_  
DATE

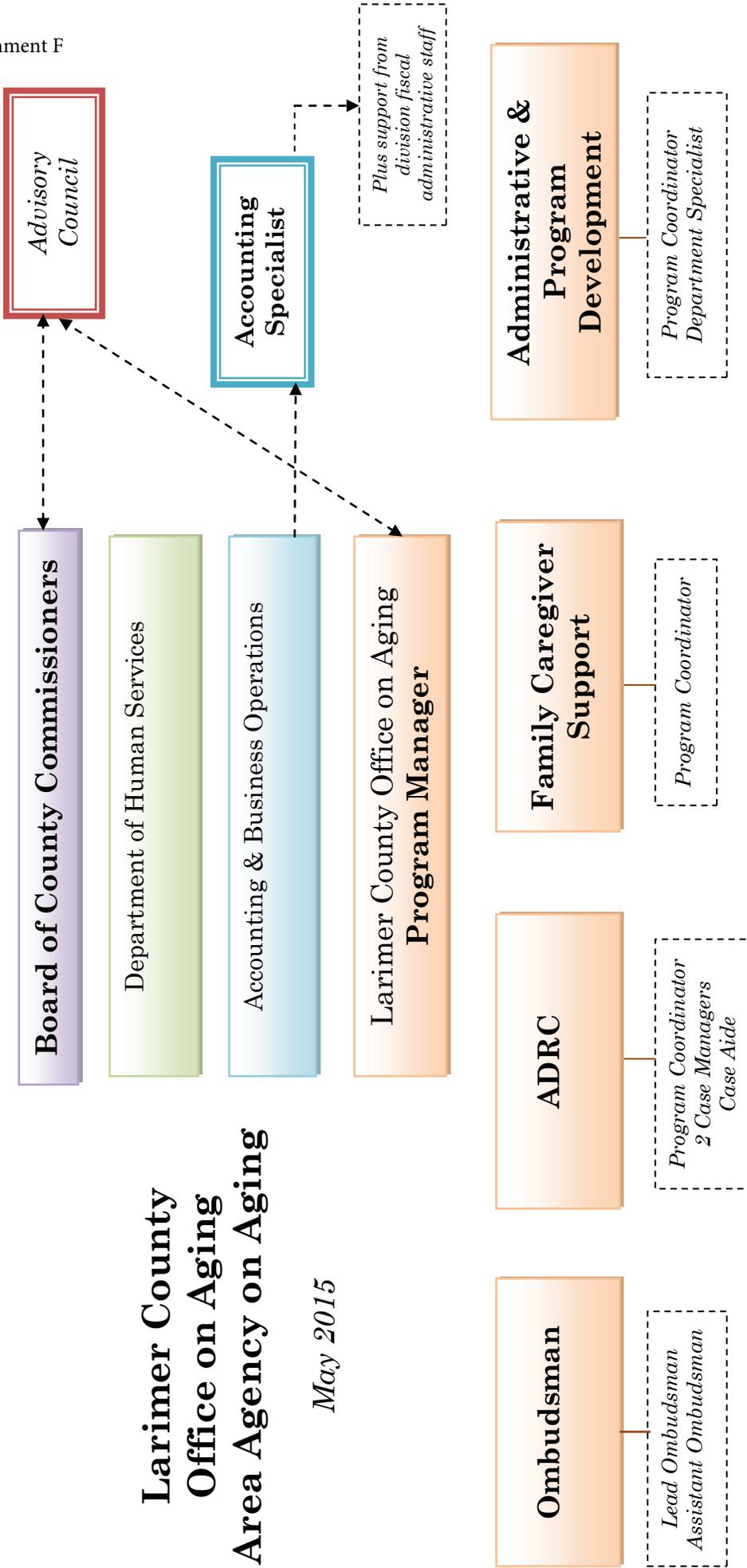
  
\_\_\_\_\_  
Chairperson, Lew Gaiter III  
Governing Board of the  
Area Agency on Aging

5/5/2015  
\_\_\_\_\_  
DATE



# Larimer County Office on Aging Area Agency on Aging

May 2015





# 2014-2015 SERVICE PROVIDER INFORMATION

SERVICE PROVIDER & SERVICES PROVIDED	CONTACT INFORMATION	MAILING ADDRESS	E-MAIL
<b>AGING CLINIC OF THE ROCKIES @CSU</b> Caregiver Counseling	<b>Tammi Vacha-Haase</b> 491-6795 491-1032 Fax	CSU Gifford Building, Room 119 Fort Collins, CO 80528	Tammi.Vacha-Haase@colostate.edu
<b>BATS</b> Transportation	<b>Adam Laso</b> (Program) 532-3049 <b>Stephanie Brothers</b> (Fiscal) 532-2643 532-0640 Fax	Town Hall P.O. Box 1229 Berthoud, CO 80513	alaso@berthoud.org sbrothers@berthoud.org
<b>DISABLED RESOURCE SERVICES</b> Material Aid	<b>Nancy Jackson</b> 482-2700	1017 Robertson St. #B Fort Collins, CO 80524	drsnj@frii.com
<b>ELDERHAUS</b> Adult Day Program	<b>Missey Toomey</b> (Program) 484-2542 424-2714 Fax <b>Joanne Vande Walle</b> (Fiscal) 221-0406	605 S. Shields Street Fort Collins, CO 80521	missey.elderhaus@yahoo.com joanne@elderhaus.org
<b>ENSIGHT SKILLS CENTER</b> Assessment, material aid, training and outreach	<b>Denny Moyer</b> 407-9999	3307 S. College Ave. #108 Fort Collins, CO 80525	denny@ensightskills.org
<b>ESTES PARK HOME CARE</b> Homemaker/Personal Care	<b>Sarah Bosko</b> 586-2273 586-3895 Fax	555 Prospect Ave. Estes Park, CO 80517	sbosko@epmedcenter.com
<b>ESTES PARK SENIOR CENTER</b> Blizzard Boxes 'N Balance	<b>Lori Mitchell</b> 586-2996	220 4th Street Estes Park, CO 80517	lmitchell@estes.org
<b>FORT COLLINS SENIOR CENTER</b> 'N Balance	<b>Katie Stieber</b> 224-6029 Cell	1200 Raintree Drive Fort Collins, CO 80526	kstieber@fcgov.com
<b>LOVELAND MOW</b> Home-Delivered Meals	<b>Liz Harless</b> <b>Jenny McKalko</b> (SAMS) 667-0311 667-0316 Fax	437 N. Garfield Avenue Loveland, CO 80537	elizabeth@lovelandmealsonwheels.org jenny@lovelandmealsonwheels.org
<b>LUTHERAN FAMILY SERVICES</b> Case Management	<b>Carri Ratazzi</b> (Program) 303-217-5855 <b>Rasa Kaunelis</b> (Billing) (303) 922-3433 <b>Amy Graver-Beers</b> (SAMS) 266-1788	363 S Harlan St, Ste 200, Denver, CO 80226 <u>PHYSICAL ADDRESS:</u> 2850 McClelland, #3200 Fort Collins, CO 80525	carri.ratazzi@lfsrm.org rasa.kaunelis@lfsrm.org amy.graverbeers@lfsrm.org
<b>NAMAQUA CENTER</b> (Touchstone Health Partners) Grandparent Counseling	<b>Craig Callan</b> (Program) <b>Karen McMahan</b> (Fiscal) 669-7550 663-2907 Fax	525 W. Oak Street Fort Collins, CO 80521 <u>PHYSICAL ADDRESS:</u> 3705 North Grant Ave. Loveland, CO 80538	craig.callan@touchstonehealthpartners.org karen.mcmahan@touchstonehealthpartners.org <b>Other Contact:</b> Cyndi Dodds: 494-9762 125 Crestridge Street, Fort Collins, CO 80525
<b>RVNA</b> Medication Management Personal Care/Homemaker	<b>Sheri Jo Wayman</b> (Program) 225-9399 (Fort Collins Office) 225-6095 Fax <b>Lori Follett</b> (Fiscal) 330-5655 (Greeley Office) 330-7146 Fax	<u>FORT COLLINS:</u> 107 Cameron Drive Fort Collins, CO 80525 <u>GREELEY:</u> 2105 Clubhouse Drive Greeley, CO 80634	sherwayman@rvna.info lorifollett@rvna.info <b>Other Contact:</b> Kurt Sultzman, CFO kurtsultzman@rvna.info
<b>SAINT</b> Transportation	<b>Gary Thomas</b> 223-8604 223-8671 Fax	333 W. Drake Road #42 Fort Collins, CO 80526	sainted@frii.com
<b>STEPPING STONES</b> (Banner Health) Adult Day Program	<b>Angel Hoffman</b> 669-7069	302 3rd St., SE, Ste. 100 Loveland, CO 80537	angel.hoffman@bannerhealth.com
<b>UC HEALTH</b> Living Well Classes	<b>Ellen Pihlstrom</b> 495-7509	1024 S Lemay Ave. Fort Collins, CO 80525	ellen.pihlstrom@uhealth.org
<b>UNITED WAY 211</b> Information and Assistance	<b>Jenne Loffer</b> 407-7048 407-7011 Fax	424 Pine Street Fort Collins, CO 80524	jloffer@uwaylc.org

<b>SERVICE PROVIDER &amp; SERVICES PROVIDED</b>	<b>CONTACT INFORMATION</b>	<b>MAILING ADDRESS</b>	<b>E-MAIL</b>
<b>VIA MOBILITY SERVICES</b> Transportation	<b>Linda Marshall</b> (Program) (303) 447-2848 (303) 447-0686 Fax <b>Bob D'Alessandro</b> (Fiscal) (303) 447-2848 ext 1056	2855 N. 63rd Street Boulder, CO 80301	lmarshall@viacolorado.org  rdalessandro@viacolorado.org
<b>VOA</b> Congregate Meals Home-Delivered Meals Caring Companion Handyman	<b>Diane Stobnicke</b> (Program) 472-9630 472-8393 Fax <b>MaryBeth Heller</b> (Fiscal/SAMS) (720) 264-3315 (720) 264-3312 Fax	<b>FORT COLLINS:</b> 405 Canyon Avenue Fort Collins, CO 80521 <b>DENVER:</b> Volunteers of America, Colorado Branch 2660 Larimer Street Denver, CO 80205	dstobnickevoa@frii.com  mbheller@voacolorado.org
<b>WALLACE &amp; KLING</b> Legal Assistance	<b>Nancy Wallace</b> 221-5602 221-0553 Fax	412 South Howes Suite B Fort Collins, CO 80521	wkpc@frii.com
<b>WELLINGTON SC</b> Transportation	<b>Trudy Patterson</b> 817-2293	3800 Wilson Avenue Box 634 Wellington, CO 80549	wellingtonseniorcenter@gmail.com





## SECTION IX: AREA PLAN IMPLEMENTATION

### SUMMARY OF OUTCOMES PERFORMANCE INDICATORS

	9/30/16	9/30/17	9/30/18	9/30/19
<b>OUTCOME ONE UNSERVED AND UNDERSERVED: Increase the number of people served and number of quality services provided through the Older Americans Act and State Funding for Senior Services.</b>				
Performance Indicator 1: Increased number of unduplicated clients statewide.				
Performance Indicator 2: 80% of consumers identify the services received through OAA/SFSS maintain or improve their independence.				
<b>OUTCOME TWO CAREGIVERS: Because of support received through the OAA/SFSS Caregiver Services, caregivers will feel supported, exhibit greater self-efficacy, and have improved access to information and services.</b>				
Performance Indicator 3: Number of caregivers served.				
Performance Indicator 4: 80% of NFCSP clients report in annual surveys that they feel supported by the NFCSP and express feelings of greater self-efficacy.				
Performance Indicator 5: 90% of transportation clients indicate transportation was available to access necessary services in the community when needed.				
<b>OUTCOME THREE TRANSPORTATION: Older adults have transportation available to access health care, maintain social interaction, and reach community and social services.</b>				
Performance Indicator 5: 90% of transportation clients indicate transportation was available to access necessary services in the community when needed.				
Performance Indicator 6: Number of registered transportation clients and number of rides provided.				
<b>OUTCOME FOUR LEGAL ASSISTANCE PROGRAMS: Resources are effectively expended on legal issues faced by those most in need and for which other legal assistance is not available.</b>				
PERFORMANCE INDICATOR 7: Number of persons who receive legal assistance through Older Americans Act and State Funding for Senior Services.				
PERFORMANCE INDICATOR 8: Number of service units provided.				
PERFORMANCE INDICATOR 9: Number of clients referred to other appropriate agencies or resources.				

	9/30/16	9/30/17	9/30/18	9/30/19
<b>OUTCOME FIVE OMBUDSMAN PROGRAM: Resources are effectively expended on issues faced by those most in need and for which other assistance is not available.</b>				
PERFORMANCE INDICATOR 10: Number of training sessions attended by certified ombudsmen each year.				
PERFORMANCE INDICATOR 11: Number of certified ombudsmen in state.				
PERFORMANCE INDICATOR 12: Number of facilities regularly visited not in response to a complaint.				
PERFORMANCE INDICATOR 13: Number of complaints handled and resolved per year.				
PERFORMANCE INDICATOR 14: Number of ombudsman consultations.				
<b>OUTCOME SIX NUTRITION: Older adults will access nutrition services, socialization, and community resources to promote independence.</b>				
PERFORMANCE INDICATOR 16: Number of persons who receive congregate and home delivered meal services.				
Performance Indicator 17: 90% of congregate nutrition program meal clients state obtaining transportation to the meal site was very easy or somewhat easy.				
Performance Indicator 18: 90% of congregate nutrition program meal clients report that during the past year someone from the Nutrition Program provided information or referred them to places to learn about financial, social, or health services that are available to them or told them how to get the help.				
Performance Indicator 19: 90% of home delivered meal clients report that during the past year someone from the Nutrition Program provided information or referred them to places to learn about financial, social, or health services that are available to them or told them how to get the help.				
Performance Indicator 20: 90% of congregate nutrition program meal clients report they are very satisfied or somewhat satisfied with opportunities to spend time with other people at the meal site.				
Performance Indicator 21: 90% of congregate nutrition program meal clients report that the nutrition program has helped them to live independently and stay in their own home.				
Performance Indicator 22: 90% of home delivered meal program clients report that the nutrition program has helped them to live independently and stay in their own home.				

## SECTION X: AREA PLAN CHECKLIST

<u>Section</u>	<u>Section Contains Information and Approved</u>	<u>Y/N</u>	<u>Page Numbers Where Information is Located.</u>	<u>Section to be Revised</u>
<u>Executive Summary</u>	Incorporate essential points. Describe outcomes and strategies.			
<u>Public Input</u>	Describe number, dates, and locations of the Public Input Meetings. Discuss how public input informed Area Plan.			
<u>Volunteers, Current/Future Programs</u>	List programs in place as of July 1, 2015. List additional programs the AAA is considering implementing.			
<u>Nine Questions</u>	Each question answered?			
<u>Demographics</u>	Review the changes in population for two cohorts: of 75 and 84 years old and age 85 and up. Comment on how increases in these two cohorts may affect budgeting and planning of services.			
<u>Title III/VI Coordination</u>	Regions that provide both Title III and Title VI nutrition programs shall describe the coordination of the programs.			
<u>Forms</u>	Attachment A? Only AAAs requesting waivers will submit this form. Attachment B? Attachment C? Attachment D? • Attachment E?			
<u>Area Plan Implementation</u>	Implementation form properly filled out. (Please remember, implementation of the Area Plan will be reviewed during program evaluations by SUA staff.)			

Please submit one signed electronic copy of the Area Plan to the State Unit on Aging by **Monday, May 8, 2015** to [Todd.Swanson@state.co.us](mailto:Todd.Swanson@state.co.us). Should you have any questions regarding the Area Plan, please contact Todd Swanson by phone at 303-519-9992 or 303-866-2651 or by email at [Todd.Swanson@state.co.us](mailto:Todd.Swanson@state.co.us).



## REFERENCES

- Administration on Aging (AoA) (2015) *Evidence-based Disease and Disability Prevention Program*. U.S. Department of Health and Human Services: Administration for Community Living. Retrieved from [http://www.aoa.gov/AoA\\_programs/HPW/Evidence\\_Based/index.aspx](http://www.aoa.gov/AoA_programs/HPW/Evidence_Based/index.aspx)
- CASOA (2015) *Community Assessment Survey for Older Adults: Larimer County, CO 2014 Report of Results*. National Research Center, Inc. publication Boulder CO.
- Census (2013) *Loveland (city,) Colorado*. State & County QuickFacts. United States Census Bureau. Retrieved from <http://quickfacts.census.gov/qfd/states/08/0846465.html>
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- JVA Consulting (2014) *Larimer County Office on Aging: Nutrition Service Research Report*. JVA Consulting, LLC. Publication
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