

**SAN FRANCISCO
DEPARTMENT OF AGING AND ADULT SERVICES**

**AREA PLAN UPDATE
2007-2008**

THE AREA PLAN CHECKLIST

Includes Title III (B, C, D, E), V, VII, Community-Based Service Programs (CBSP), and the HICAP

Instructions: Check the boxes for completed items, as applicable. For completion of the Four-Year Plan, check the boxes in column C. For any unchecked box, provide an explanation on the last page of this checklist. For Annual Updates, check the boxes in the applicable year. **Section number six, Narrative Description of Relevant Changes, applies only to the Area Plan Update.**

1. Necessary Copies and Format

REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
All information is provided on single-sided sheets.	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
One copy of the <u>required documents</u> has been E-mailed to the Department.	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
An original and two copies of the Area Plan, Area Plan Checklist, and all required documents are attached.	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

2. Transmittal Letter

REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
The Transmittal Letter signed by the AAA Director, Chair of the Advisory Council, and Chair of the Governing Board, has original signatures and is attached. *	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The signed Transmittal Letter will be submitted by: <u>6/6/07</u> (enter date)	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

*Note: Approval of the Area Plan will be delayed pending receipt of a fully executed Transmittal Letter.

3. Strategic Plan: REQUIRED if a Strategic Plan is submitted as the Area Plan

A	B	C	D	E	F
General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
A Strategic Plan was submitted as the Area Plan. (A Strategic Plan Cross Reference Index is available by contacting CDA).	Not Applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Description of the Planning and Service Area (PSA)

REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
A brief description of the physical characteristics of the PSA is included.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A description of the demographic characteristics of the PSA is included.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A description of the unique resources and constraints existing within the PSA is included.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A broad description of the existing service system within the PSA is included.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Description of the Area Agency on Aging

REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
A description of the type and characteristics of the AAA.	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A Mission Statement.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A current Organization Chart.	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A description of how the AAA provides visible leadership in the development of community-based systems of care.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Agency type; such as Public, Private Non-Profit, or Joint Powers.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The AAA's funding sources.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Narrative Description of Relevant Changes – REQUIRED FOR UPDATE ONLY

This section must include all changes related to all programs of services funded by grants from CDA

A	B	C	D	E	F
Update Requirement	Annual Update Requirements	2005-09 Four Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
Introduction with Narrative Description of Significant Changes, including estimated number of low-income, minority seniors	Yes		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
New, continued, revised, completed, or deleted goals and objectives are identified.	Yes		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Discussion of major changes and effects to the PSA and/or AAA.	Yes		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Changes that may have reduced or increased quality or quantity of service.	Yes		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

7. The Planning Process

REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
Discussion of steps involved in the planning process and how they fit in with the overall planning cycle.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discussion of the needs assessment process.	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Discussion of targeting.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identification of priorities.	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Goals and Objectives, including Targeting, Needs Assessment, and Service Unit Plan

REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
A goal and/or objective is identified for each program or service.	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Goals and Objectives are included for each program or service funded by the AAA from the following sources: Check all that apply <input checked="" type="checkbox"/> Title III B <input checked="" type="checkbox"/> Title III B/VII(a)(b) <input checked="" type="checkbox"/> Title III C1 <input checked="" type="checkbox"/> Title III C2 <input checked="" type="checkbox"/> Title III D <input checked="" type="checkbox"/> Title III E <input type="checkbox"/> Title V <input checked="" type="checkbox"/> HICAP <input checked="" type="checkbox"/> CBSPs	Yes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Goals and objectives identified serve to create, expand, or enhance AAA direct or contracted services.	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Title III B Program Development (PD) and Coordination (C) activities are distinctly identified.	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> n/a	<input type="checkbox"/>
Objectives clearly indicate the nature of the action, the party responsible for the action, the outcome of the action, how the action will be measured, and projected start and end dates of each objective.	Yes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The Units of Service on the SUP are tied to a specific goal.	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
Targeting criteria have been met and are included:⇒Specific objectives: for providing services to low-income minority individuals; ⇒Specific objectives for providing services to older individuals with disabilities, with particular attention to individuals with severe disabilities; ⇒Specific objectives for providing services to older individuals with limited English-Speaking ability; and ⇒Specific objectives for providing services to caregivers	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A description of Needs Assessment Activities is included.	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Service Unit Plans are complete and reconcilable with appropriate budgets.	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

9. Older Americans Act Assurances

Older Americans Act Assurances	No	<input type="checkbox"/>			
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10. Appendices **REQUIRED, IF CHANGES HAVE OCCURED**

IA. Notice of Intent to Provide Direct Services (if applicable)	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
IB. Request for Approval to Provide Direct Services (if applicable)	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II. Public Hearings	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
III. Governing Board	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
IV. Advisory Council	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V. Priority Services	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VI. Community Focal Points List	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VII. Multipurpose Senior Center Acquisition and Construction Compliance Review	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VIII. Title III E Family Caregiver Support Program	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IX. Resource Tools Sample Organization Charts, Planning Process and Funding Sources/Program Descriptions, Title IIID Fact Sheet, Ombudsman Fact Sheet	No				
X. Legal Services	Yes, if changed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
XI Disaster Preparation Planning	Yes, if changed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
XII Baby Boomer Information	Unchanged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
XIII Required Services without the use of Federal and/or State Funds	Not required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For any unchecked boxes, identify the section number and provide an explanation: All unchecked boxes reflect sections of the 2005-2009 Area Plan that remain unchanged.

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Area Plan Update 2007-2008
Narrative Description of Relevant Changes

Narrative Description of Relevant Changes to the 2005-2009 Area Plan 2007-2008 Annual Update

Introduction

This following material provides a summary of updates to the 2005-2009 Area Plan for Planning and Service Area 6, the San Francisco Department of Aging and Adult Services (DAAS). Where necessary, replacement pages for the existing Area Plan document are attached.

Low-Income and Minority Seniors

The Area Plan continues to utilize the 2000 Census in order to estimate the number of low-income and minority seniors within the PSA. American Community Survey (ACS) updates suggest that the number of low-income seniors has changed little since the 2000 Census, though our analysis suggests that the ACS sample methodology may under-represent the DAAS target population.

New, Continued, Revised Completed or Deleted Goals and Objectives & Service Unit Plan Updates

1. Goals and Objectives

The Goals from the 2005-2009 Area Plan remain unchanged at this time. However, there are changes to some of the objectives related to each goal. In many instances, work will continue on existing objectives into the 2007-08 fiscal year. A brief update on each objective has been included under the heading “2007-08 Update” in each objective section. The Goals and Objectives section of this update shall replace the existing section in the 2005-2009 Area Plan, as will the updated Service Unit Plan, which includes 2007-08 service unit projections.

The following objectives have or will be **completed** by the end of this fiscal year:

- Objective 1.2: The OOA will meet with community-based organizations to improve understanding of the variety and scope of services, particularly the supplemental services funded through the Family Caregiver Support Program, as well as feasible models of service delivery, and it will work with the Human Services Agency contract staff to develop a Request for Proposals that will address the various needs of caregivers. (Completed in 2005-06.)
- Objective 1.3: The Human Services Agency planning unit will coordinate with the OOA staff, home-delivered meal providers, and outreach workers to assess the prevalence and the needs of seniors and younger adults with disabilities who are living in Single Room Occupancy hotels without elevators. The recommendations from this analysis will be incorporated into the ~~2006-07 Area Plan update~~ summary of the 2006 Needs Assessment. (Completed in 2006-07.)
- Objective 2.3: The OOA will promote increased physical activity among older adults by providing technical assistance and/or resources to service providers, resulting in at least 3 service providers adding a new physical activity class for seniors. (Completed in 2006-07.)

- Objective 2.5: To improve services to its consumers, the OOA staff will work with OOA contractors to develop and implement measurable, client-based outcomes for all OOA-funded programs. (Completed in 2005-06.)
- Objective 2.7: The OOA staff will fully implement program standards for care management (Title III) by October 1, 2005, incorporating the standards into all Requests for Proposals and subsequent contracts. (Completed in 2006-07.)
- Objective 3.1: The Deputy Director of Programs will designate an OOA liaison to attend the monthly meetings of the Long Term Care Coordinating Council to stay informed of the issues being explored and addressed, and of the policy positions being proposed to the Office of the Mayor. Attendance at these meetings will help the OOA effectively coordinate its program plans and funding priorities with the citywide effort to make strategic improvements to community-based long term care and supportive services for older adults and adults with disabilities. (Completed in 2005-06.)
- Objective 3.2: District Advisory Councils convened by the Resource Centers for Seniors and Adults with Disabilities meet regularly with consumers and service providers to share information and discuss neighborhood problems. The OOA staff assigned to each of the ten District Advisory Councils will work with the groups to formulate recommendations on how to improve coordination of services, and will incorporate recommendations in the 2006 - 07 Area Plan update. (Completed in 2006-07.)
- Objective 3.3: Working in collaboration with the Department of Public Health, the Department of Human Services, Department of Aging and Adult Services, and community-based nonprofit organizations, the OOA nutritionist will coordinate, publish and distribute a citywide low cost food, nutrition education and resource guide that will be distributed for use by staff at various city departments and community-based organizations. (Completed in 2005-06.)
- Objective 4.3: The DHS Food Stamp program will provide technical assistance to at least two congregate meal sites so that their consumers can swipe their electronic benefits card and deduct meal payments from their Food Stamps allocation. (Completed in 2005-06.)
- Objective 5.3: The OOA will provide technical assistance to identify at least one congregate meal site that will target the LGBT and/or other underserved communities. (Completed in 2005-06.)
- Objective 6.2: The OOA will evaluate its pilot project to provide Home-Delivered Meals for younger adults with disabilities, eliciting input from consumers, meal providers, and service recipients, and will make recommendations on funding and program adjustments. (Completed in 2006-07.)

Several objectives will be **new** for FY2007-08:

- Objective 1.4: The OOA staff will coordinate with community-based organizations to pilot a new initiative that reduces isolation and provides additional nutrition to seniors and younger adults with disabilities who live in at least two Single Room Occupancy hotels in Chinatown.
- Objective 2.11: OOA staff will work with a lead agency to develop and implement evidence-based health promotion programs, in line with the State Initiative: Empowering Older People to Take More Control of their Health through Evidence-Based Prevention programs.
- Objective 5.5: To advocate for safe discharge planning and to ensure that adequate long term care choices are provided, to patients of rehabilitation units of hospitals. To assure that patients participate in both care- and discharge planning through Ombudsman support. The Discharge Planning Ombudsman will visit all rehab SNFs weekly for purpose of outreach and complaint advocacy. The Discharge Planning Ombudsman will also provide an array of community-based options to the patient, family and utilization nurse prior to discharge when a complaint about process occurs.

The remaining objectives remain unchanged and will be **continued** into 2007-08. The dates have been updated to reflect that continuation and a short description of progress has been included in the Goals and Objectives section of this report.

2. Changes to the Service Unit Plan

The OOA conducted a series of Requests for Proposals during 2006-07, which will result in alterations to the service unit plan. Final contract negotiations are still underway for some services areas at this time.

The reported service units for the Personal Care, Chore, and Adult Day Care/Health category of Title III-B have decreased due only to a shift in funding source for this service. There has been no actual decline in services provided in the community as a result of this action.

The Service Unit Plan has been updated to reflect the new requirements with respect to the Ombudsman and Elder Abuse. HICAP's SUP will be presented as an amendment in July 2007 when the contract will be approved by the Commission. Those service unit plans are located after the previous years' versions in the attached document.

Discussion of Major Changes and Effects to the AAA

1. Organizational Charts

Updated organizational charts are attached. A clarified description of the planning unit is also included in the attached replacement pages.

2. Changes that may have reduced or increased quality or quantity of service

a. Formation of a “Community Living Fund”

In July 2006, the Mayor and Board of Supervisors of San Francisco created a \$3 million locally-funded Community Living Fund (CLF). The goals of this Fund are to: (1) provide adults with disabilities of all ages with real choices about where and how they receive services that provide them with assistance, care and support to live in the community; and (2) assure that no individual is institutionalized because of a lack of community-based long term care and supportive services. The purpose of the CLF is to:

- Enable adults with disabilities of all ages who are eligible for this Fund to remain living safely in their own homes and communities as long as possible.
- Provide financial support for home and community-based long term care and supportive services beyond what is currently available.
- Offer flexible funding to service providers to create “wrap-around” services that provide essential community-based assistance, care and support.
- Facilitate the development of service delivery models that strengthen the community-based long term care work force.
- Expand, not supplant, existing funding, in order to fill funding gaps until new sources of financial support for community-based long term care services can be secured through federal Medicaid waivers and other means.

The Community Living Fund is initially for FY 2006-07, and is being administered by DAAS. Funds are carried in the DAAS base budget as a “project,” allowing unexpended funds to be rolled over from one year to the next. The program does not use CDA funds.

b. Development of a Long Term Care Integrated Intake Unit

DAAS is currently in the process of transforming its internal Information and Referral line into a “Long Term Care Integrated Intake Unit.” This plan is in line with the department’s “no wrong door” philosophy for service provision. The Integrated Intake Unit will coordinate existing Information and Referral services with previously disparate access points to the following services: Home-Delivered Meals, Adult Protective Services, In-Home Supportive Services, and the Community Living Fund. Once fully implemented, consumers or caregivers seeking services will have access to comprehensive information about available resources without needing to make multiple calls to a variety of public programs.

c. Increased local funding for services in FY2006-07

Due in part to strong community advocacy efforts, DAAS was the recipient of significant “add-back” and service enhancement funding for FY 2006-07 through both the Mayor’s Office and the Board of Supervisors. This funding was spread across DAAS program areas and provided funding for new staff as well as additional contractor dollars. Funding supported programs for seniors and for younger adults with disabilities (YAD).

The “add-back” spending plan included:

- Case Management – \$800,000

- Transportation - \$150,000
- Nutrition – Congregate and Home Delivered with specific funding for YAD - \$462,000
- Advocacy / Empowerment - \$143,000

Service Enhancement funding included:

- New Adult Protective Service and County Veterans Services Office Staff - \$556,500
- Funding specifically for YAD - \$328,500
- Outreach - \$150,000
- Legal Services - \$80,000
- Naturalization - \$90,000
- Disease Prevention and Health Promotion - \$200,000
- Ombudsman - \$70,000
- Excelsior Meal Program - \$25,000

An updated comprehensive list of Office on the Aging services (showing both CDA-funded and non-CDA-funded services) is included in the “Replacement and New Pages” materials attached to this narrative.

d. Tight budgets predicted for FY2007-08

In order to meet the projected local deficit in FY2007-08, the Mayor’s Office has initially instructed City Departments to prepare and submit budgets that include a 3 percent local General Fund reduction. However, due to projected increases in revenues via the Department of Human Services’ portion of the HSA budget, the Department of Aging and Adult Services budget did not experience cuts at that time. Just recently, departments received another request for an additional 3 percent reduction citywide. DAAS will not know the final FY2007-08 budgetary outlook until late June.

Overall, federal and state funding allocations remain on track with FY2006-2007 budget and expenditures. Although there have been minor shifts within the various Older American’s Act Titles, these changes will not impact service delivery in either quality or quantity.

The Planning Process, Targeting

These sections remain unchanged from the original 2005-2009 Area Plan.

Identification of Priorities

This section also remains largely the same as the original 2005-2009 Area Plan. Due to minor budgetary shifts in the Title III-B programs, allocations of federal funding for the priority categories have changed slightly. New minimum percentages maintain the same programmatic priorities while allowing for slight flexibility in the case of unanticipated funding fluctuations within these categories. See table below.

Minimum Percentages of Federal Title III-B Funds			
	Access	In-Home Services	Legal Assistance
2005-06	48.6	6.6	44.8
2006-07	48.2	6.6	45.1
2007-08	45.0	5.0	45.0

Needs Assessment Activities

The Department of Aging and Adult Services completed a needs assessment process in October 2006. Attached are pages for the Area Plan that describe the methodology and overarching topics for the assessment, page numbered appropriately to replace those that were submitted with last year's Area Plan Update on the same topic. The final report is available on the DAAS website at <http://www.sfhsa.org/specialnotice.htm>.

Area Plan Update 2007-2008
Goals and Objectives

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal One: To increase utilization of services by seniors, adults with disabilities and caregivers who have the highest economic and social needs			
Rationale: San Francisco has the highest per capita rate of homelessness in the nation, and 7% of persons using homeless shelter are age 60 or older. OOA objectives have not addressed this population in the past			
Objective 1.1 The OOA staff will work with their contractors, homeless shelter staff and outreach coordinators, and Single Room Occupancy hotels housing formerly homeless seniors to share resource information and increase the overall number of homeless and formerly homeless seniors receiving OOA services by 50%. <i>Update 2006-07:</i> One of the OOA contractor agencies, also an active member of SPAC, has headed the outreach effort by conducting presentations at three SRO's, a homeless shelter and a drop-in center. A data match of 2004-05 OOA consumers with San Francisco shelter consumers shows that at least 178 shelter clients also received OOA services. <i>Update 2007-08:</i> The HSA Planning Unit has used improved data sources to identify a more comprehensive baseline figure for the number of homeless or formerly homeless consumers receiving OOA services. In FY2006-07, the OOA also funded a drop-in for homeless seniors, serving approximately 300 individuals.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05-6/30/08		Continued

Goal One: To increase utilization of services by seniors, adults with disabilities and caregivers who have the highest economic and social needs			
Rationale: Current service providers do not utilize the range of caregiver support supplemental services that they can be funded for.			
Objective 1.2 The OOA will meet with community-based organizations to improve understanding of the variety and scope of services, particularly the supplemental services funded through the Family Caregiver Support Program, as well as feasible models of service delivery, and it will work with the Human Services Agency contract staff to develop a Request for Proposals that will address the various needs of caregivers. <i>Update 2006-07:</i> OOA staff worked with service providers and coordinated a presentation on the FCSP on Jan 25, 2006. Completed.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05-6/30/06		Completed

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal One: To increase utilization of services by seniors, adults with disabilities and caregivers who have the highest economic and social needs			
Rationale: In interviews with key service providers, it was noted that many seniors and persons with disabilities are living in Single Room Occupancy hotels that have no elevators and are consequently homebound.			
Objective 1.3 The Human Services Agency planning unit will coordinate with the OOA staff, home-delivered meal providers, and outreach workers to assess the prevalence and the needs of seniors and younger adults with disabilities who are living in Single Room Occupancy hotels without elevators. The recommendations from this analysis will be incorporated into the 2006-07 Area Plan update summary of the 2006 Needs Assessment. <i>Update 2006-07:</i> The Human Services planning unit obtained a list of Single Room Occupancy hotels (SROs) in the Chinatown district from the city Department of Building Inspections, and the state department of elevator inspections identified which buildings had elevators. Of the 297 SROs in Chinatown, only 9 had elevators (3%). The planning unit matched Medi-Cal caseload data with IHSS data for persons with mobility impairments, identifying vulnerable persons living in the SROs. The unit is preparing to administer a survey of this population in 2006-07. <i>Update 2007-08:</i> The Human Services Agency planning unit mailed a translated survey instrument to 336 IHSS recipients with disabilities who were living in Chinatown SRO's. The survey, which was discussed in the DAAS Community Needs Assessment, found seniors with disability impairments in Chinatown SRO's living in extreme isolation. One finding was that 40% of the respondents left their homes once a week or less. Completed.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
		7/1/05-6/30/07	

Goal One: To increase utilization of services by seniors, adults with disabilities and caregivers who have the highest economic and social needs			
Rationale: Interviews with key service providers and subsequent surveys have revealed that seniors and persons with disabilities who live in Single Room Occupancy hotels in Chinatown are often very isolated from services and social opportunities.			
Objective 1.4 The OOA staff will coordinate with community-based organizations to pilot a new initiative that reduces isolation and provides additional nutrition to seniors and younger adults with disabilities who live in at least two Single Room Occupancy hotels in Chinatown.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	5/1/07-6/30/08		New

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: The home-delivered meals program has a waiting list of over 350 isolated and vulnerable seniors and persons with disabilities, while some congregate meal sites are underutilized.			
<p>Objective 2.1</p> <p>The OOA staff will meet with nutrition providers to identify the most efficient means of reallocating resources to reduce the waiting list for home-delivered meals.</p> <p><i>2006-07 Update:</i> OOA staff has met to begin preliminary discussions of this issue.</p> <p><i>2007-08 Update:</i> OOA staff met with Nutrition Providers in the second quarter of 06-07 to discuss this issue. Due to the efforts of contractors, the average waiting time for a HDM has been reduced slightly, from our target of 60 days to 59 days from January to June 2006. Due to change in OOA’s database system, such reports are as yet unavailable for 2006-07.</p>	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 - 6/30/08		Continued

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: The network of community based organizations providing services to seniors and persons with disabilities benefit from the work of volunteers, but smaller organizations often do not have the capacity to recruit, train, and recognize volunteers.			
Objective 2.2 To recognize and motivate volunteer activity for OOA contractors, the Human Services Agency Planning Unit will survey OOA contractors regarding their use of volunteers and will present the findings to the Advisory Council to the Aging and Adult Services Commission to discuss possible system-wide volunteer recruitment and recognition activities.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 – 6/30/06		Deleted

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: Research studies demonstrate the benefits of living a healthy, active lifestyle, but many service providers have not incorporated physical activities into their programs.			
Objective 2.3 The OOA will promote increased physical activity among older adults by providing technical assistance and/or resources to service providers, resulting in at least 3 service providers adding a new physical activity class for seniors. <i>2006-07 Update:</i> As of April 2006, one contractor has added a physical activity class. OOA staff is working with other contractors to add classes. <i>2007-08 Update:</i> Objective completed.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 - 6/30/07		Completed

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: To ensure the overall quality of food services, service providers need assistance to meet stringent nutrition standards.			
Objective 2.4	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 - 6/30/08		Continued
<p>The OOA will conduct quarterly nutrition meetings to provide technical assistance and share resources that will assist providers in meeting and/or improving food safety and nutrition program standards, and will complete at least four meetings with the nutrition contractors, and two trainings for the staff of nutrition programs on nutrition risk assessment.</p> <p><i>2006-07 Update:</i> Three meetings have been conducted, with a final meeting scheduled for May 2006. The two trainings on Nutrition risk assessment are also scheduled for completion by June 2006. OOA staff plan on conducting the same schedule of meeting and trainings in 2006-07.</p> <p><i>2007-08 & Update:</i> The two trainings on nutrition risk assessment are planned for 07-08. These meetings were deferred from 2006-07 due to lacking of staff resources.</p>			

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: Currently OOA-funded contracts tend to reflect “inputs” and activities rather than reflecting client-based outcomes that would allow measurement of program effectiveness.			
Objective 2.5	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05- 6/30/06		Completed
<p>To improve services to its consumers, the OOA staff will work with OOA contractors to develop and implement measurable, client-based outcomes for all OOA-funded programs.</p> <p><i>2006-07 Update:</i> All outcome measures are scheduled for completion and inclusion in contract scope of services by June 2006. Completed.</p>			

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: To improve the effectiveness and efficiency of its services, the OOA needs to better define its program standards and include them in the requests for proposals.			
Objective 2.6	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 - 6/30/08		Revised, Continued
<p>The OOA will develop, in consultation with service providers and consumers, program standards for Community Services, District-wide Social Service Workers, and Legal Services that will be incorporated into the service definitions of the respective Requests for Proposals.</p> <p><i>2006-07 Update:</i> Three workgroups will begin meeting in May and June 2006.</p> <p><i>2007-08 Update:</i> Objective modified to remove DWSSW, as funding for that program will be folded into Case Management in 2007-08. The Community Services Standards have been drafted and will be given to Contractors for input before finalization in 2007-08. Legal Services providers will sign off on the new State standards when they become available (and add on any additional local standards that may be developed), finalizing all standards in 2007-08.</p>			

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: To improve the effectiveness and efficiency of its services, the OOA, in consultation with the California Department of Aging, is working to standardize and institutionalize program standards for care management and include them in its requests for proposals.			
Objective 2.7	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	10/1/05-6/30/07		Completed
<p>The OOA staff will fully implement program standards for care management (Title III) by October 1, 2005, incorporating the standards into all Requests for Proposals and subsequent contracts.</p> <p><i>2006-07 Update:</i> The OOA case management standards have been fully implemented from October 2005.</p> <p><i>2007-08 Update:</i> Case Management Standards were incorporated into the RFP.. Completed.</p>			

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: Currently OOA-funded contracts tend to reflect “inputs” and activities rather than reflecting client-based outcomes that would allow measurement of program effectiveness.			
Objective 2.8 <p>The OOA staff, working with the Human Service Agency Planning Unit, will develop an annual survey that differentiates levels of consumer satisfaction with specific aspects of service delivery, sampling a range of consumers and services, and compiling and analyzing the results. The OOA staff will review results with contractors once a year to make improvements in services. will work with contractors to revise the consumer satisfaction surveys that will be implemented in 06-07 in order to capture contracted performance outcome measures of the different programs.</p> <p><i>2006-07 Update:</i> At six meetings with contract providers, consumer satisfaction surveys were discussed and changes suggested. New surveys will be implemented in 2006-07.</p> <p><i>2007-08 Update:</i> The new tools have been developed and will be translated into eight different languages. Due to the time needed for proofreading, implementation will occur in 2007-08, as will any necessary modifications.</p>	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	1/1/06 - 6/30/08		Revised in 2006-07, Continued

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: AAA-funded health prevention and health maintenance programs tend to improve or increase the health and well-being of older persons and persons with disabilities. The AAA intends to promote its health related programs by continuing to serve the most vulnerable of its population within the City of San Francisco.			
Objective 2.9 <p>The OOA staff, working with the contractors, and the public, will improve the overall health of older persons and adults with disabilities by providing and expanding health screening to the capacity of program budget. This service includes a brief examination to determine the need for more in-depth medical evaluation and referral.</p> <p><i>2006-07 Update:</i> Curry Senior Center continues to provide these services to seniors and adults with disabilities in their primary care clinic.</p> <p><i>2007-08 Update:</i> The OOA has released an RFP for the continued provision of these services.</p>	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	1/1/06 - 6/30/08		Continued

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: AAA-funded health prevention and health maintenance programs tend to improve or increase the health and well-being of older persons and persons with disabilities. The AAA intends to promote its health related programs by continuing to serve the most vulnerable of its population within the City of San Francisco.			
Objective 2.10 Medication Management will prevent incorrect medications and adverse drug reactions by providing a one-on-one consultation to individuals concerning the appropriate use of prescribed drugs with follow-up as needed to each individual seeking advice and information. <i>2006-07 Update:</i> Curry Senior Center continues to provide these services to seniors and adults with disabilities in their primary care clinic. <i>2007-08 Update:</i> The OOA has released a Solicitation of Interest for the continued provision of these services.	Start & End Dates 1/1/06 - 6/30/08	Title III B Funded PD or C¹⁰	Status¹¹ Continued

Goal Two: To improve the quality and capacity of OOA-funded home and community based services			
Rationale: Research studies demonstrate the benefits of living a healthy, active lifestyle, but many service providers have not incorporated physical activities into their programs.			
Objective 2.11 OOA staff will work with a lead agency to develop and implement evidence-based health promotion programs, in line with the State Initiative: Empowering Older People to Take More Control of their Health through Evidence-Based Prevention programs.	Start & End Dates 5/1/07 - 6/30/08	Title III B Funded PD or C¹⁰	Status¹¹ New

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Three: To improve coordination of services for seniors and adults with disabilities			
Rationale: According to the <i>Living With Dignity</i> strategic plan, the citywide system of services for seniors and persons with disabilities is hampered by fragmentation and a lack of coordination.			
Objective 3.1 The Deputy Director of Programs will designate an OOA liaison to attend the monthly meetings of the Long Term Care Coordinating Council to stay informed of the issues being explored and addressed, and of the policy positions being proposed to the Office of the Mayor. Attendance at these meetings will help the OOA effectively coordinate its program plans and funding priorities with the citywide effort to make strategic improvements to community-based long term care and supportive services for older adults and adults with disabilities. <i>2006-07 Update:</i> The OOA director, Denise Cheung, now attends the Long-Term Care Coordinating Council. Completed.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 – 6/30/06		Completed

Goal Three: To improve coordination of services for seniors and adults with disabilities			
Rationale: District Advisory Councils are an underutilized community resource that would benefit from having a vehicle to formally consider issues and needs discussed at their meetings.			
Objective 3.2 District Advisory Councils convened by the Resource Centers for Seniors and Adults with Disabilities meet regularly with consumers and service providers to share information and discuss neighborhood problems. The OOA staff assigned to each of the ten District Advisory Councils will work with the groups to formulate recommendations on how to improve coordination of services, and will incorporate recommendations in the 2006 - 07 Area Plan update. <i>2006-07 Update:</i> OOA staff will start to solicit input from DAC in May and June 2006. <i>2007-08 Update:</i> OOA staff attended DAC meetings in 2006. Input from the DACs was incorporated in the October 2006 Needs Assessment report. Completed.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 – 6/30/07		Completed

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Three: To improve coordination of services for seniors and adults with disabilities			
Rationale: With nutrition cited as one of the top unmet needs, a publication that lists free or low-cost food will enhance the nutrition services provided by the Triple A.			
Objective 3.3 Working in collaboration with the Department of Public Health, the Department of Human Services, Department of Aging and Adult Services, and community-based nonprofit organizations, the OOA nutritionist will coordinate, publish and distribute a citywide low cost food, nutrition education and resource guide that will be distributed for use by staff at various city departments and community-based organizations. <i>2006-07 Update:</i> The collaboration completed the directory in September and distributed 2,000 hard copies and 300 CDs. An on-line directory is scheduled for development and implementation in June 2006. Completed. <i>2007-08 Update:</i> DAAS will post this resource on DAAS’s web site and on HSA.’s Intranet by June 2007. Further completed.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 – 6/30/06		Completed

Goal Three: To improve coordination of services for seniors and adults with disabilities			
Rationale: Many service providers experience rapid turn-over of staff, depleting the agency of the knowledge and experience of long-term employees.			
Objective 3.4 DAAS will work with the Services and Programs Advisory Committee to design and implement service provider training that will improve inter-agency communication and cooperation, including training on care-planning for care managers, one training on nutrition-risk screening for care managers, and two trainings for meeting the diverse needs of ethnic seniors and adults with disabilities. <i>2006-07 Update:</i> SPAC and DAAS staff conducted a number of trainings, including trainings in diversity, choosing homecare and board and care. Additional trainings are planned for 2006-07. <i>2007-08 Update:</i> DAAS provided four trainings as of March 2007 and will provide one more in May 2007. SPAC convened its last meeting in March, but its Training Committee will continue to meet to plan DAAS trainings.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 - 6/30/08		Continued

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Four: To integrate San Francisco Department of Human Services (DHS) and Department of Aging and Adult Services programs for the benefit of OOA consumers			
Rationale: Many seniors have not enrolled in the Food Stamp program. The integration Department of Aging and Adult Services and the Department of Human Services should allow consumers easier access to a wider range of resources.			
Objective 4.1 To increase the participation of older adults in its services and programs, the San Francisco Department of Human Services will pilot targeted outreach activities and develop a special application process for OOA consumers to coordinate screening and enrollment activities for its Non-Assistance Food Stamps, Medi-Cal, and other programs, resulting in a 5% increase of OOA consumers using DHS program services. <i>2006-2007 Update:</i> Planning is underway to identify mechanisms for providing easier access to food stamps and other programs for seniors and people with disabilities, especially those on waiting lists for nutrition programs. In addition, one DAAS staff member participates in HSA’s Outreach Committee, which coordinates the agency’s outreach strategies and activities. <i>2007-08 Update:</i> In 2006-07, DAAS & HSA staff worked collaboratively with the SF Food Security Task Force regarding recommendations related to older adults in the report “Food Security For All: A Strategic Plan to End Hunger in Our City, January 2007”. HSA planning staff will also advise on the implementation of \$1 million grant to streamline screening and application processes to increase food stamps utilization. Older adults are one of the primary target populations of that initiative.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 - 6/30/08		Continued

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Four: To integrate San Francisco Department of Human Services (DHS) and Department of Aging and Adult Services programs for the benefit of OOA consumers			
Rationale: Employees of the OOA are not familiar with DHS programs and conversely DHS employees are not familiar with the programs of the OOA.			
Objective 4.2 The OOA and DHS staff will cross-train front-line staff on their respective programs, which will increase the number of consumers receiving both DHS and OOA services will increase by a minimum of 5%, as compared to a baseline to be developed in 12/05. <i>2006-07 Update:</i> Joint meetings between DHS and OOA program managers have addressed the question of coordinating services and increasing utilization. The executive director of DAAS now sits in weekly meetings with the Deputy Director of DHS programs as well as the executive director of HSA to ensure coordinated strategies for serving common clientele. A focus on front-line staff will commence in 2006-07. <i>2007-08 Update:</i> Working with other city departments and community-based organizations in developing part of the California Nutrition Action Plan (CNAP), OOA Nutritionist and HSA staff will help in completing an outreach training presentation on food and nutrition programs offered in the city by April 2007.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 - 6/30/08		Continued

Goal Four: To integrate San Francisco Department of Human Services (DHS) and Department of Aging and Adult Services programs for the benefit of OOA consumers			
Rationale: It is believed that many seniors are unaware that they can use their Food Stamps for meals at senior nutrition sites.			
Objective 4.3 The DHS Food Stamp program will provide technical assistance to at least two congregate meal sites so that their consumers can swipe their electronic benefits card and deduct meal payments from their Food Stamps allocation. <i>2006-07 Update:</i> Two congregate meal sites have added this capability, and a third is working to do so. Completed.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 – 6/30/06		Completed

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Five: To plan for the long-term care needs of underserved and emerging target populations			
Rationale: Some senior nutrition sites are experiencing a decline in participants, and it is believed that fresh models of senior centers and activities should be developed to reflect the new generation of younger seniors.			
Objective 5.1 As coordinated by the Advisory Council to the Aging and Adult Services Commission, the OOA staff will participate in a task force of current and future consumers, Advisory Council representatives, researchers, and service contractors to discuss needs and identify new service models for meal services, caregiver support, and long term care that will be responsive to the needs of “baby boomers.” <i>2006-07 Update:</i> The Advisory Council discussed this objective in its January meeting and expressed interest in working to form a task force in partnership with DAAS that will research these issues and convene a community education forum. <i>2007-08 Update:</i> The Advisory Council Baby Boomer Work Group met in March 2007 and plans to draft recommendations by June 30, 2007.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 - 6/30/08		Continued

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Five: To plan for the long-term care needs of underserved and emerging target populations			
Rationale: The large number of baby boomer seniors approaching status for eligibility of Triple A funded services mandates a new look at service delivery models.			
Objective 5.2 The Advisory Council to the Aging and Adult Services Commission will convene an educational forum with service providers, foundation representatives, researchers, and business leaders to develop recommendations for investments in services designed to meet the needs of “baby boomers.” This plan will be the beginning of an ongoing effort to address the needs of the baby boomer generation and to make preparations for the increases in the numbers of persons growing older and living longer, and its recommendations will be incorporated into Area Plan updates. <i>2006-07 Update:</i> The Advisory Council discussed this objective in its January meeting and expressed interest in working to form a task force in partnership with DAAS that will research these issues and convene a community education forum. <i>2007-08 Update:</i> The Advisory Council is discussing this objective in coordination with their work on objective 5.1.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 - 6/30/08		Continued

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Five: To plan for the long-term care needs of underserved and emerging target populations			
Rationale: In focus groups, lesbian, gay, bisexual, and transgender (LGBT) seniors have commented on not feeling comfortable in services sites that are not oriented to them. Also, a taskforce on underserved communities of seniors and persons with disabilities is formulating recommendations that may include meal site locations, and new housing sites for formerly homeless seniors are opening up this year and may be suitable for meal sites.			
Objective 5.3	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
The OOA will provide technical assistance to identify at least one congregate meal site that will target the LGBT and/or other underserved communities. <i>2006-07 Update:</i> A LGBT meal site has begun operation in 2005-2006. Completed.	7/1/05 - 6/30/06		Completed

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Five: To plan for the long-term care needs of underserved and emerging target populations			
Rationale: The <i>Living With Dignity</i> strategic plan identified four target populations that are underserved by the city’s long-term care service system for seniors and persons with disabilities.			
Objective 5.4 The OOA staff will work with the San Francisco Partnership for Community-Based Care & Support to develop recommendations on how to improve services for seniors and adults with disabilities in the following underserved communities: 1) African American; 2) Asian/Pacific Islander; 3) Latino; and 4) lesbian, gay, bisexual, and transgender. The recommendations will be incorporated into the 2006-07 Area Plan update. <i>2006-07 Update:</i> DAAS staff has been assigned to attend the community partnership meetings and the planning unit is actively working with Partnership groups to ensure representation in the needs assessment process. Recommendations will be incorporated into the 2006 Needs Assessment. <i>2007-08 Update:</i> The 2006 Needs Assessment included information from focus groups and interviews with each of the Partnership groups. After the Assessment was completed, HSA returned to each these groups and made presentations about the results of the Assessment and invite feedback. OOA staff will continue to attend meetings in FY2007-08.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 – 6/30/08		Continued

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Five: To plan for the long-term care needs of underserved and emerging target populations			
Rationale: Often, in the rehabilitation units of hospitals, patients are not provided with adequate information for long term care choices, and transitions out of these facilities are not adequately monitored. In order to meet the individual needs of the consumers and family members, it is important to assure that patients participate in both care and discharge planning through the Ombudsman support.			
Objective 5.5 To advocate for safe discharge planning and to ensure that adequate long term care choices are provided, to patients of rehabilitation units of hospitals. To assure that patients participate in both care- and discharge planning through Ombudsman support. The Discharge Planning Ombudsman will visit all rehab SNFs weekly for purpose of outreach and complaint advocacy. The Discharge Planning Ombudsman will also provide an array of community-based options to the patient, family and utilization nurse prior to discharge when a complaint about process occurs.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/07 – 6/30/08		New

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Six: To seek parity of services for younger persons with disabilities by identifying and utilizing local resources			
Rationale: The OOA needs to better understand the needs of younger persons with disabilities and make more appropriate referrals for the delivery of services.			
Objective 6.1 To improve services for younger adults with disabilities (YAD), the Human Services Agency planning unit will work with the OOA staff, adults with disabilities, and OOA-funded contractors to assess the service needs of this population, research service models and outreach strategies, identify potential funding sources, and make recommendations regarding training and program changes that will be incorporated into the 2006-07 Area Plan update. <i>2006-07 Update:</i> These issues have been included in the plan for the 2006 Needs Assessment process. <i>20067-08 Update:</i> The 2006 Needs Assessment integrated information about the needs of younger persons with disabilities, identifying gaps in service and identifying areas for further analysis. Also, a public hearing was convened in October 2006 to discuss programs meeting the needs of the younger disabled. These efforts contributed to a \$200,000 RFP being issued in January 2007 for three specific programs to serve the YAD: legal services, money management, and social support services for hoarders and clutterers.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05 - 6/30/08		Continued

Goal Six: To seek parity of services for younger persons with disabilities by identifying and utilizing local resources			
Rationale: The OOA needs to better understand the needs of younger persons with disabilities and the most appropriate means of delivering services.			
Objective 6.2 The OOA will evaluate its pilot project to provide Home-Delivered Meals for younger adults with disabilities, eliciting input from consumers, meal providers, and service recipients, and will make recommendations on funding and program adjustments for the 2006–07 Area Plan update. <i>2006-07 Update:</i> An evaluation survey of the pilot program has been completed, and a draft report will be completed by June 2006. <i>2007-08 Update:</i> DAAS has shared the results of the completed evaluation with the Advisory Council, Services and Program Advisory Committee, and the community. Additional baseline funding has been identified to continue and expand this program. Completed.	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05- 6/30/07		Completed

Part 2.A – Area Plan 2005-2009 Goals and Objectives with 2007-08 Updates

Goal Six: To seek parity of services for younger persons with disabilities by identifying and utilizing local resources			
Rationale: The OOA needs to better understand the needs of younger persons with disabilities and the most appropriate means of delivering services.			
Objective 6.3	Start & End Dates	Title III B Funded PD or C¹⁰	Status¹¹
	7/1/05-6/30/08		Continued
<p>The overall number of younger disabled persons served by the OOA-funded network of contracts will increase by 5%, as compared to a baseline that will be developed by 12/05.</p> <p><i>2006-07 Update:</i> Implementation of a pilot home-delivered meal program for younger disabled adults, as well as provision of case management through the Institute on Aging and Neighborhood Resource Centers has significantly increased the number of younger disabled adults receiving services from OOA contractors. Data is still fragmented at this time, requiring more analysis to determine baseline and comparison figures.</p> <p><i>2007-08 Update:</i> Due to additional funding earmarked for this population, DAAS conducted a public hearing in Oct 2006 about increasing services to the younger disabled. An RFP of new/additional services was issued. (See objective 6.1.) The OOA provided services to 582 persons under the age of 60 as of February 2007 this year. In addition, DAAS had provided home delivered meals to 206 younger persons as of the same time year. Congregate meal programming began in March 2007.</p>			

TITLE III/VII SERVICE UNIT PLAN OBJECTIVES

PSA #6

2005 – 2009 Four Year Planning Period

CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) uses the National Aging Program Information System (NAPIS) Categories and units of service, as defined in PM 97-02. For services not defined in NAPIS, refer to Division 4000 of the Management Information Systems (MIS) Manual.

Report units of service to be provided with **ALL funding sources**.

Related funding is reported in the annual Area Plan Budget (CDA 122) for Titles III B, III C-1, III C-2, III D, VII (a) and VII (b). This SUP does **not** include Title III E services.

For services that will not be provided, check the Not Applicable box .

TITLE III/VII

1. Personal Care (In-Home)*

**Units of Service = (1-Hour)
Not Applicable: (check)**

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	8,130	3,4	Objective 3-1, 4-2
2006-2007	8,130	4	Objective 4-2
2007-2008			
2008-2009			

2. Homemaker (In-Home)*

**Units of Service = (1-Hour)
Not Applicable: (check)**

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	7,610	3,4	Objective 3-1, 4-2
2006-2007	7,610	4	Objective 4-2
2007-2008	6,421	4	Objective 4-2
2008-2009			

3. Chore (In-Home)*

**Units of Service = (1-Hour)
Not Applicable: (check)**

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	2,810	3,4	Objective 3-1, 4-2
2006-2007	2,810	4	Objective 4-2
2007-2008			
2008-2009			

* Indicates Title III-B Priority Services

4. Home Delivered Meals

**Units of Service = (1-Meal)
Not Applicable: (check)**

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	852,561	1, 2, 3	Objectives 1-2, 1-3, 2-1,2-4, 3-4
2006-2007	852,561	1, 2, 3	Objectives 1-3, 2-1,2-4, 3-4
2007-2008	899,300	2	Objectives 2-1,2-4
2008-2009			

5. Adult Day Care/Health

**Units of Service = (1-Hour)
Not Applicable: (check)**

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	63,022	3	Objective 3-1
2006-2007	63,022	2	Objective 2-8
2007-2008			
2008-2009			

6. Case Management (Access)♦ *

**Units of Service = (1-Hour)
Not Applicable: X (check)**

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

7. Congregate Meals

**Units of Service = (1-Meal)
Not Applicable: (check)**

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	841,936	1, 2, 4, 5	Objectives 1-1, 1-3, 2-3, 2-4 4-1, 4-2, 4-3, 5-1
2006-2007	841,936	1, 2, 4, 5	Objectives 1-1, 1-3, 2-3, 2-4 4-1, 4-2, 5-1
2007-2008	798,926	1, 2, 4, 5	Objectives 1-1, 2-4 4-1, 4-2, 5-1
2008-2009			

8. Nutrition Counseling

**Units of Service = (1-Hour)
Not Applicable: (check)**

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	960	2, 5, 6	Objectives 2-4, 2-5, 5-1, 5-3, 6-2
2006-2007	960	2, 5, 6	Objectives 2-4, 5-1, 6-2
2007-2008	960	2, 5	Objectives 2-4, 5-1
2008-2009			

♦ Indicates Title III-B Priority Services

9. Assisted Transportation (Access)*

Units of Service = (One 1-way trip)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

10. Transportation (Access)*

Units of Service = (One 1-way trip)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	77,511	3,4	Objectives 3-1, 4-2
2006-2007	77,511	4	Objectives 4-2
2007-2008	67,339	4	Objectives 4-2
2008-2009			

11. Legal Assistance*

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	11,884	2, 3, 4, 5, 6	Objectives 2-5, 2-6, 2-8, 3-2, 4-1, 5-2, 6-1
2006-2007	11,884	2, 3, 4, 5, 6	Objectives 2-6, 2-8, 3-2, 4-1, 5-2, 6-1
2007-2008	16,134	2, 4, 5, 6	Objectives 2-6, 2-8, 4-1, 5-2, 6-1
2008-2009			

12. Nutrition Education

Units of Service = (1-Session)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	970	1, 2, 3, 4	1-1, 2-4, 3-3, 3-4
2006-2007	970	1, 2, 3, 4	1-1, 2-4, 3-4
2007-2008	41,719	1, 2, 3, 4	1-1, 2-4, 3-4
2008-2009			

13. Information and Assistance (Access)* *

Units of Service = (1-Contact)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	10,000	1, 2, 3, 4, 5, 6	1-1, 1-2, 2-5, 2-8, 3-2, 3-3, 4-2, 5-2, 5-3, 5-4, 6-1, 6-3
2006-2007	4,200	1, 2, 3, 4, 5, 6	1-1, 2-8, 3-2, 4-2, 5-2, 5-4, 6-1, 6-3
2007-2008	4,200	1, 2, 4, 5, 6	1-1, 2-8, 4-2, 5-2, 5-4, 6-1, 6-3
2008-2009			

* Indicates Title III-B Priority Services

14. Outreach (Access)*

Units of Service = (1-Contact)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	675	1, 2, 3, 4, 5, 6	1-1, 1-2, 1-3, 2-8, 3-1, 3-2, 3-3, 3-4, 4-1, 4-2, 4-3, 5-1, 5-2, 5-3, 5-4, 6-1, 6-3
2006-2007			
2007-2008			
2008-2009			

15. Title III Services (“Other”)

- Identify only services not reported in categories 1 – 14 above.
- Specify the units of service and what constitutes a service unit. (Reference Division 4000 of the MIS Operations Manual, February 7, 1994.)
- Every Title III B service listed in Program 15 below must also be among the services listed under Program 15 in the Area Plan budget, CDA 122.

Title III-D: Disease Prevention
Units of Service ^E (1,500)

Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	1,500	2, 5, 6	2-4, 5-2, 5-4, 6-1
2006-2007	1,500	2, 5, 6	2-4, 5-2, 5-4, 6-1
2007-2008	1,500	2, 5, 6	2-4, 5-2, 5-4, 6-1
2008-2009			

Title III-D: Medication Management
Units of Service ^E (500)

Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	500	2, 5, 6	2-4, 5-2, 5-4, 6-1
2006-2007	500	2, 5, 6	2-4, 5-2, 5-4, 6-1
2007-2008	500	2, 5, 6	2-4, 2-10, 5-2, 5-4, 6-1
2008-2009			

Other

Not Applicable: (check)

Service Category: Title III-B “Other Supportive Services” Housing: Emergency Assistance
Units of Service ^E (100)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	100	1, 2, 3, 4	1-1, 2-5, 3-2, 3-4, 4-2,
2006-2007			
2007-2008			
2008-2009			

^E Entry Required

Other

Not Applicable: (check)

Service Category: Title III-B "Other Supportive Services" Community Education/Advocacy

Units of Service^E (1,300)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	1,300	1, 2, 3, 4, 5	1-1, 2-5, 3-2, 4-2, 5-2
2006-2007			
2007-2008			
2008-2009			

Other

Not Applicable: (check)

Service Category: Title III-B "Other Supportive Services" Community Services/Volunteer Opportunities

Units of Service^E (245)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	245	1, 3, 5, 6	1-1, 1-3, 3-2, 5-4, 6-1, 6-3
2006-2007			
2007-2008			
2008-2009			

Other

Not Applicable: (check)

Service Category: Title III-B "Other Supportive Services" Naturalization

Units of Service^E (772)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	772	1, 5	1-1, 5-4
2006-2007			
2007-2008			
2008-2009			

Other

Not Applicable: (check)

Service Category: _____

Units of Service^E (_____)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

^E Entry Required

LONG-TERM CARE OMBUDSMAN (FY2005-06 and FY2006-07)
(Title III B and Title VII a)

Note: For completion of this section, see Instructions for SUP Objective Guidelines

Total number of cases to be closed: Units of Service = (one closed case)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	540	2, 5	2-5, 5-1, 5-2
2006-2007	540	5	5-1, 5-2

Training for Ombudsman staff and volunteers

(Includes 36-hour Certification Training and 12-Hour Required Annual Training)

Fiscal Year	Number of Sessions
2005-06	10
2006-07	15

Fiscal Year	Number of Hours
2005-06	120
2006-07	120

Fiscal Year	Total Number of Trainees
2005-06	10
2006-07	51

Visits

Fiscal Year	Number of Visits to SNFs (Unduplicated Count)
2005-06	27
2006-07	27

Fiscal Year	Number of Visits to RCFEs (Unduplicated Count)
2005-06	110
2006-07	110

Visits. cont.

Fiscal Year	Projected Number of Volunteers needed
2005-06	n/a
2006-07	10

Fiscal Year	Number of Existing Volunteers
2005-06	n/a
2006-07	37

LONG-TERM CARE OMBUDSMAN (FY2007-08 and FY2008-09) (Title III B and Title VII a)

AREA PLAN OUTCOMES FOR THE LONG-TERM CARE OMBUDSMAN PROGRAM

Mission: As mandated by the Older Americans Act, the mission of the Long-Term Care Ombudsman Program is to seek resolution of problems and advocate for the rights of residents of long-term care facilities with the goal of enhancing the quality of life and care of residents. Baseline numbers are provided from each local Ombudsman Program's Fiscal Year (FY) 2003-2004 National Ombudsman Reporting System data. Targets are established by the local Ombudsman in consultation with the Area Agency on Aging and are approved by the State Long-Term Care Ombudsman.

For baseline data, please use your program's data which was submitted for the FY 2003-2004 State Annual Report to AoA. The source for this data is your local program's OmbudsManager reports.

1. ***The problems and concerns of long-term care residents are solved through complaint resolution and other services of the Ombudsman Program. [OAA Section 712(a)(3)(5)]***

Measures and Targets:

A. Complaint Resolution Rate (AoA Report, Part I-E, Actions and Complaints)

1.	FY 2003-2004 Baseline: 302 complaints resolved plus 245 complaints partially resolved complaints divided by total complaints 929 equals Baseline 59%
2.	FY 2007-2008 Target: 78% resolution rate
3.	FY 2008-2009 Target: ___% resolution rate
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

B. Work with Resident Councils (AoA Report, Part III-R, #8)

1.	FY 2003-2004 Baseline: 3 number of meetings attended
2.	FY 2007-2008 Target: 8 number and 10% increase
3.	FY 2008-2009 Target: ___ number and ___% increase
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

C. Work with Family Councils (AoA Report, Part III-F, #9)

1.	FY 2003-2004 Baseline: 0 number of meetings attended
2.	FY 2007-2008 Target: 3 number and 100% increase
3.	FY 2008-2009 Target: ___ number and ___% increase
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

D. Consultations to Facilities (AoA Report, Part III-F, #4)

1.	FY 2003-2004 Baseline: 31 number of consultations
2.	FY 2007-2008 Target: 62 number and 100% increase
3.	FY 2008-2009 Target: ___ number and ___% increase
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

E. Information and Consultations to Individuals (AoA Report, Part III-F, #5)

1.	FY 2003-2004 Baseline: 222 number of consultations
2.	FY 2007-2008 Target: 244 number and 10% increase
3.	FY 2008-2009 Target: ___ number and ___% increase
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

F. Community Education (AoA Report, Part III-F, #10)

1.	FY 2003-2004 Baseline: 29 number of sessions
2.	FY 2007-2008 Target: 34 number of sessions and 17% increase
3.	FY 2008-2009 Target: ___ number of sessions and ___% increase
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

G. Systems Advocacy

1. FY 2007-2008 Target: Please provide at least one example of a significant systemic advocacy effort in each local Ombudsman Program. (Examples: working with law enforcement to improve response and investigation of abuse complaints, collaborations with other agencies to improve quality of care to residents, disaster preparedness planning, presentations to legislators and local officials regarding quality of care issues etc)

The Long Term Care Ombudsman will expand its collaboration around elder and dependent abuse with the San Francisco Police Department (SFPD). Activities include: (1) Conducting a series of trainings to station-houses throughout San Francisco; (2) Acting as a liaison with District Attorney Witness Protection and Elder Abuse Specialist; (3) Advocating along with APS and the Institute on Aging's Elder Abuse Prevention Program for a dedicated Elder Abuse unit within SFPD.

Measures and Targets:

2. Residents have regular access to an Ombudsman. [OAA Section 712(a)(3)(D), (5)(B)(ii)]

A. Regular Nursing Facility Resident Visitation (AoA Report, Part III-F, #6) The target should be 100% of facilities visited. Refer to the NORS definition of regular visitation, which is at least one visit on a quarterly basis.

1.	FY 2003-2004 Baseline: 96% (number of regular visitations (25) divided by the number of nursing facilities (26))
2.	FY 2007-2008 Target: 15% increase in the number of regular resident visitations
3.	FY 2008-2009 Target: ___% increase in the number of regular resident visitations
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

B. Regular Residential Care Facility for the Elderly Resident Visitation

(AoA Report, Part III-F, #6 – board and care facilities) The target should be 100% of facilities visited. Refer to the NORS definition of regular visitation, which is at least one visit on a quarterly basis.

1.	FY 2003-2004 Baseline: 100% (234 number of regular visitations divided by the number of 110 licensed residential care facilities for the elderly – all facilities visited at least once.)
2.	FY 2007-2008 Target: 10% increase in number of regular resident visitations (___ number of regular visitations divided by the number of ___ residential care facilities for the elderly)
3.	FY 2008-2009 Target: ___% increase in number of regular resident visitations (_____ number of regular visitations divided by the number of ___ residential care facilities for the elderly)
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

C. Number of Full-Time Equivalent (FTE) Paid Staff Ombudsmen

(One FTE generally equates to 40 hours per week or 1,760 hours per year)

1.	FY 2003-2004 Baseline: 4 FTEs
2.	FY 2007-2008 Target: 5 and 20% increase
3.	FY 2008-2009 Target: ___ and ___% increase
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

D. Number of Certified Volunteer Ombudsmen

1.	FY 2003-2004 Baseline: 25
2.	FY 2006-2007 Current Number: 27 after decertification
3.	FY 2006-2007 Target: 35 number and 8% increase. FY 2008-2009 Target: ___ number and ___% increase
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

Measures and Targets:

1. Ombudsmen report their complaint processing and other activities accurately and consistently. [OAA Section 712(c)]

A. Each Ombudsman Program provides regular training on the National Ombudsman Reporting System (NORS).

1.	FY 2003-2004 Baseline: 1 number of NORS Part I, II or III training sessions completed.
2.	FY 2007-2008 Target: 4 number of NORS Part I, II and III training sessions planned.
3.	FY 2008-2009 Target: _____ number of NORS Part I, II and III training sessions planned.
Associated Program Goals and Objective Numbers: 5-1, 5-2, 5-5	

ELDER ABUSE PREVENTION SERVICES (TITLE VII b) (All FYs)

Units of Service = (1 Hour)

Fiscal Year	1 Proposed Units of Service	2 Goal Numbers	3 Associated Program Goal and Objective Numbers
2005-2006	1884	1,2, 3	1-3, 2-5 3-1
2006-2007	1884	1	1-3
2007-2008	2500	3	3-4
2008-2009			

Other Title VII b activities from Division 4000.

Service Category: _____

Units of Service ^E (____)

Fiscal Year	1 Proposed Units of Service	2 Goal Numbers	3 Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Other Program Accomplishments

Fiscal Year	Total # of Public Education Sessions
2005-06	n/a
2006-07	16
2007-08	16
2008-09	

Fiscal Year	Total # of Training Sessions for Professionals
2005-06	n/a
2006-07	32
2007-08	32
2008-09	

Fiscal Year	Total # of Educational Materials Developed (Products)
2005-06	n/a
2006-07	5
2007-08	5
2008-09	

Fiscal Year	Total # of Educational Materials Distributed (Documents)
2005-06	n/a
2006-07	3,500
2007-08	3,500
2008-09	

Note: As of February 2005, all Resource Centers for Seniors and Adults with Disabilities Programs have been removed from the Area Plan Budget for FY2004-05, to facilitate leveraging additional Federal revenues for the local AAA. AS SUCH, THESE SERVICE UNITS ARE NO LONGER REPORTED IN THE NAPIS REPORTS.

TITLE III E SERVICE UNIT PLAN OBJECTIVES

PSA #6

2005 – 2009 Four Year Planning Period

CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) utilizes the service categories defined in PM 03-10. Related Title III E funding is reported in the Area Plan Budget (CDA 122). This SUP is for the reporting of Title III E services **only**.

Report units of service to be provided with **ALL funding sources**.

For services that will not be provided, check the Not Applicable box

TITLE III E

1. Outreach

Units of Service = (1-Contact)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	375	1, 5	1-2, 5-1
2006-2007	375	5	5-1
2007-2008	375	5	5-1
2008-2009			

2. Community Education

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	102	1	1-2
2006-2007	102	2	2-8
2007-2008	285	2	2-8
2008-2009			

3. Information and Assistance*

Units of Service = (1-Contact)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	750	1, 5	1-2, 5-1
2006-2007	750	2	2-8
2007-2008	725	2	2-8
2008-2009			

4. Comprehensive Assessment

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	155	2	2-5
2006-2007	155	2	2-8
2007-2008	310	2	2-8
2008-2009			

5. Case Management

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	225	2, 3	2-8
2006-2007	225	2, 3	2-8
2007-2008	200	2, 3	2-8
2008-2009			

6. Transportation

Units of Service = (One 1-way trip)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

7. Assisted Transportation

Units of Service = (One 1-way trip)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

8. Counseling

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	1,094	2	2-8
2006-2007	1,094	2	2-8
2007-2008	640	2	2-8
2008-2009			

9. Caregiver Support Group

Units of Service = (1-Hour Meeting)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	164	2, 3	2-8
2006-2007	164	2, 3	2-8
2007-2008	164	2, 3	2-8
2008-2009			

10. Caregiver Training

Units of Service = (1-Contact)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	92	1, 2, 3	2-8
2006-2007	92	1, 2, 3	2-8
2007-2008	120	1, 2, 3	2-8
2008-2009			

11. Respite Care Services

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	20,550	1	1-2
2006-2007	20,550	2	2-8
2007-2008	7,644	2	2-8
2008-2009			

12. Minor Home Modifications

Units of Service = (1-Occurrence)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

13. Placement

Units of Service = (1-Placement)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

14. Homemaker

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

15. Chore

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	80	1	1-2
2006-2007			
2007-2008			
2008-2009			

16. Home Security & Safety

Units of Service = (1-Occurrence)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

17. Assistive Devices

Units of Service = (1-Single Occurrence)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

18. Visiting

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	1,300	1	1-2
2006-2007	1,300	2	2-8
2007-2008			
2008-2009			

19. Congregate Meals

Units of Service = (1-Meal)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

20. Home Delivered Meals

Units of Service = (1-Meal)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

21. Legal Assistance

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	77	1, 2	1-2, 2-8
2006-2007	77	1, 2	2-8
2007-2008	50	1, 2	2-8
2008-2009			

22. Peer Counseling

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

23. Translation/Interpretation

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

24. Income Support/Material Aid

Units of Service = (1-Occurrence)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	25	1	1-2
2006-2007			
2007-2008			
2008-2009			

25. Money Management

Units of Service = (1-Hour)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

26. Registry

Units of Service = (1-Match)
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Other – Specify:

Service Category: _____
Requires PRIOR CDA Approval

Units of Service: ^E _____ entry required
Not Applicable: (check)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

^E Entry required

TITLE V/SCSEP SERVICE UNIT PLAN OBJECTIVES

PSA #6

2005 – 2009 Four Year Planning Period

CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) utilizes the new Data Collection System developed by the U.S. Department of Labor (DOL), which captures the new performance measures per the Older Americans Act of 1965 as amended in 2000, and the Federal Register 20 CFR Part 641. The related funding is reported in the annual Title V/SCSEP Budget.

Please list your performance measures in the table below. Each AAA must achieve at least the DOL’s minimum required performance measures, unless lower measures have been negotiated and approved by the DOL. AAAs may indicate higher performance measures as well.

Title V/SCSEP				
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Fiscal Year (FY)	Goal Number	Objective Number	CDA Authorized Slots	National Authorized Slots (If applicable)
2005-06	n/a			
2006-07	n/a			
2007-08				
2008-09				

DOL’s Minimum Required Performance Measures

1. Placement Rate – DOL’s Minimum Unsubsidized Placement Goal is 25%

FY	Estimated Unsubsidized Placement Goal %
2005-06	n/a
2006-07	n/a
2007-08	
2008-09	

2. Service Level – DOL’s Minimum Service Level is 140%

FY	Estimated Service Level %
2005-06	n/a
2006-07	n/a
2007-08	
2008-09	

3. Service to the Most in Need – DOL’s Minimum Goal to Serve the Most in Need is 68%

FY	Estimated % Service to the Most in Need
2005-06	n/a
2006-07	n/a
2007-08	
2008-09	

4. Community Service Hours Provided – DOL’s Minimum Goal for Community Serve Hours Provided is 999,400 hours, which is 91% (approximately 950 hours per authorized slot)

FY	Estimated Community Service Hours Provided
2005-06	n/a
2006-07	n/a
2007-08	
2008-09	

5. Employment Retention Rate – DOL’s Minimum Employment Retention Rate is 70%

FY	Estimated Employment Retention Rate %
2005-06	n/a
2006-07	n/a
2007-08	
2008-09	

6. Customer Satisfaction for Employers, Participants, and Host Agencies – DOL’s Combined Minimum Customer Satisfaction Rate for Employers, Participants, and Host Agencies is 80%

FY	Estimated % Combined Customer Satisfaction Rate
2005-06	n/a
2006-07	n/a
2007-08	
2008-09	

7. Earnings Increase –

DOL’s Minimum Goal for Earnings Increase 1 is 25% Higher than the Pre-Program Earnings

DOL’s Minimum Goal for Earnings Increase 2 is 5% Higher than Earnings Increase 1

FY	Estimated Earnings Increase 1	Estimated Earnings Increase 2
2005-06	n/a	n/a
2006-07	n/a	n/a
2007-08		
2008-09		

**COMMUNITY BASED SERVICES PROGRAMS
SERVICE UNIT PLAN (CBSP) OBJECTIVES:**

PSA #6

2005 – 2009 Four Year Planning Period

CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) follows the instructions for layouts provided in PM 98-26 (P) and updated in PM 00-13 (P). The related funding is reported in the annual Area Plan Budget (CDA 122). Report units of service to be provided with **ALL** funding sources.

For services that will not be provided, check the Not Applicable box

CBSP

Alzheimer's Day Care Resource Center (ADCRC)

Fiscal Year	Goal Numbers
2005-2006	1
2006-2007	1
2007-2008	1
2008-2009	

Fiscal Year	Caregiver Support Sessions
2005-2006	60
2006-2007	60
2007-2008	60
2008-2009	

Fiscal Year	In-Service Training Sessions
2005-2006	24
2006-2007	24
2007-2008	24
2008-2009	

Fiscal Year	On-Site Training Sessions
2005-2006	32
2006-2007	32
2007-2008	32
2008-2009	

Fiscal Year	On-Site Training Sessions
2005-2006	16
2006-2007	16
2007-2008	16
2008-2009	

Brown Bag

Fiscal Year	Goal Numbers
2005-2006	1, 5
2006-2007	1, 5
2007-2008	1,5
2008-2009	

Fiscal Year	Estimated # of Unduplicated Persons to be Served
2005-2006	527
2006-2007	527
2007-2008	527
2008-2009	

Fiscal Year	Estimated Pounds of Food to be Distributed
2005-2006	602, 424
2006-2007	602, 424
2007-2008	602,424
2008-2009	

Fiscal Year	Estimated # of Volunteers
2005-2006	9
2006-2007	9
2007-2008	9
2008-2009	

Fiscal Year	Estimated # of Volunteer Hours
2005-2006	1,044
2006-2007	1,044
2007-2008	1,044
2008-2009	

Fiscal Year	Estimated # of Distribution Sites
2005-2006	6
2006-2007	6
2007-2008	6
2008-2009	

(CBSP) Respite Purchase of Services – RPOS

Not Applicable: (check)

Fiscal Year	Goal Numbers
2005-2006	1
2006-2007	1
2007-2008	1
2008-2009	

Fiscal Year	Respite Hours Provided
2005-2006	459
2006-2007	459
2007-2008	459
2008-2009	

(CBSP) Respite Purchase of Services – RPOS. cont.

Fiscal Year	Points of Service Transportation (# of one-way trips)
2005-2006	n/a
2006-2007	n/a
2007-2008	n/a
2008-2009	

Fiscal Year	Alzheimer's Day Care Resource Center (# of days)
2005-2006	n/a
2006-2007	n/a
2007-2008	n/a
2008-2009	

Linkages

Fiscal Year	Goal Numbers
2005-2006	1,2,3,5
2006-2007	1,2,3,5
2007-2008	1,2,3,5
2008-2009	

Fiscal Year	Number of Unduplicated Clients Served (Include Targeted Case Management and Handicapped Parking Revenue)
2005-2006	183
2006-2007	183
2007-2008	157
2008-2009	

Fiscal Year	Active Monthly Caseload (Include Targeted Case Management and handicapped parking revenue)
2005-2006	160
2006-2007	160
2007-2008	120
2008-2009	

Senior Companion

Not Applicable: (check)

Fiscal Year	Goal Numbers
2005-2006	1
2006-2007	1
2007-2008	1
2008-2009	

Fiscal Year	Volunteer Service Years (VSYs)
2005-2006	5
2006-2007	5
2007-2008	5
2008-2009	

Fiscal Year	Volunteer Hours
2005-2006	5,220
2006-2007	5,220
2007-2008	5,220
2008-2009	

Fiscal Year	Senior Volunteers
2005-2006	4
2006-2007	4
2007-2008	4
2008-2009	

Fiscal Year	Seniors Served
2005-2006	35
2006-2007	35
2007-2008	35
2008-2009	

HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP) SERVICE UNIT PLAN OBJECTIVES

PSA #6

2005 – 2009 Four Year Planning Period

CCR Article 3, Section 7300 (d)

The Service Unit Plan (SUP) utilizes definitions that can be found at www.aging.ca.gov. After connecting with the home web page, select “AAA Partners,” then “Reporting Instructions,” then select “HICAP Reporting Instructions as of July 1, 2004.” HICAP reporting instructions, forms, and definitions are centralized there.

The related funding is reported in the HICAP Budget. Indicate the estimated service performance units provided with federal and state HICAP funds.

HICAP Services

References to Plan Goal(s) and Objective(s) related to HICAP Services without Legal Services Component

(FY2005-06 and FY2006-07 Service Unit Plans. FY2007-08 and FY2008-09 SUPs formats are slightly different, and have been added at the end of the original version.)

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	768 consumers includes legal	1	
2006-2007	4,436 staff hrs	2	2-8

1. HICAP Budget without HICAP Legal Services Budget

Fiscal Year	Estimated State & Federal Budget Amount
2005-06	\$42,344
2006-07	\$278,968

2. Community Education

Fiscal Year	Estimated # of Interactive Presentations in SFY. Unit of Service = (1 Presentation)
2005-06	70
2006-07	70

3. Community Education

Fiscal Year	# of Attendees reached at Interactive Presentations in SFY. Unit of Service = (1 Attendee Reached)
2005-06	20,000
2006-07	20,000

4. Counseling

Fiscal Year	Estimated # of Clients Counseled in SFY. Unit of Service = (1 Client Counseled)
2005-06	768
2006-07	768

5. Counselors

Fiscal Year	Estimated # of Registered Counselors for SFY. Unit of Service = (1 Unduplicated Registered Counselor)
2005-06	12
2006-07	12

6. Counselors

Fiscal Year	Estimated # of Volunteer Registered Counselors for SFY. Unit of Service = (1 Volunteer Registered Counselor)
2005-06	n/a
2006-07	12

7. Counselors

Fiscal Year	Estimated # of Active Counselors for SFY. Unit of Service = (1 Unduplicated Active Counselor)
2005-06	12
2006-07	12
2007-08	

8. Counselors

Fiscal Year	Estimated # of Volunteer Active Counselors for SFY. Unit of Service = (1 Unduplicated Volunteer Active Counselor)
2005-06	n/a
2006-07	9
2007-08	

HICAP Legal Services (if funded and available through HICAP)

References to Plan Goal(s) and Objective(s) related to HICAP Legal Services Component

■	1	2	3
Fiscal Year	Proposed Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006	Included in previous		
2006-2007	units		
2007-2008	of service		

9. HICAP Legal Services Budget Only

Fiscal Year	Estimated State & Federal Budget Amount
2005-06	\$32,500
2006-07	\$25,600
2007-08	\$30,000

10. Clients

Fiscal Year	Estimated Hours of Legal Representation for SFY. Unit of Service = (1 Hour of Legal Representation)
2005-06	Included in previous
2006-07	units
2007-08	of service

11. Representation

Fiscal Year	Estimated Hours of Legal Representation for SFY. Unit of Service = (1 Hour of Legal Representation)
2005-06	623
2006-07	623
2007-08	Included in previous units of service

12. Representation

Fiscal Year	Estimated Hours of Legal Backup Support to Staff for SFY. Unit of Service = (1 Hour of Legal Backup Support)
2005-06	Included in previous
2006-07	units
2007-08	of service

HICAP Services (Revised SUP for FY2007-08 and FY2008-09)

Section 1. Three Primary HICAP Units of Service

State Fiscal Year (SFY)	Total Estimated Persons Counseled per SFY (Unit of Service)	Goal Numbers
2005-2006	768	
2006-2007	768	
2007-2008	900	
2008-2009		

State Fiscal Year (SFY)	Total Estimated Number of Attendees reached in Community Education per SFY (Unit of Service)	Goal Numbers
2005-2006	20,000	
2006-2007	20,000	
2007-2008	22,000	
2008-2009		

State Fiscal Year (SFY)	Total Estimated Number of Community Education Events Planned per SFY (Unit of Service)	Goal Numbers
2005-2006	70	
2006-2007	70	
2007-2008	80	
2008-2009		

Section 2. Three HICAP Legal Services Units of Service (if applicable)¹

State Fiscal Year (SFY)	Total Estimated Number of Clients Represented per SFY (Unit of Service)	Goal Numbers
2005-2006	Included in previous units	1, 2
2006-2007		
2007-2008	60	
2008-2009		

State Fiscal Year (SFY)	Total Estimated Number of Legal Representation Hours per SFY (Unit of Service)	Goal Numbers
2005-2006	623	
2006-2007	623	
2007-2008	720	
2008-2009		

State Fiscal Year (SFY)	Total Estimated Number of Program Consultation Hours per SFY (Unit of Service)	Goal Numbers
2005-2006		
2006-2007		
2007-2008	0	
2008-2009		

¹ Requires a contract for using HICAP funds to pay for HICAP Legal Services.

Section 3. Two HICAP Counselor Measures

Fiscal Year (FY)	Average Number of Registered Counselors for the SFY²
2005-2006	12
2006-2007	12
2007-2008	14
2008-2009	

Fiscal Year (FY)	Average Number of Active Counselors for the SFY³
2005-2006	12
2006-2007	12
2007-2008	14
2008-2009	

²⁰The number of registered Counselors will vary throughout the year. This includes Paid Counselors, In-kind Paid Counselors, and Volunteer Counselors. For “average,” how many Counselors you intend to keep on registered rolls at any given time.

²¹The number of active Counselors will vary throughout the year. This includes Paid Counselors, In-kind Paid Counselors, and Volunteer Counselors. The average number of active Counselors cannot be greater than the total average registered Counselors. At any given time, how many of the registered Counselors do you anticipate will actually be counseling? For example, you may anticipate that 85% of your Counselors would be working in the field at any given time. Use the number of Counselors this represents for the average active Counselors, a subset of all registered Counselors.

**Area Plan Update 2007-2008
Replacement and New Pages
for 2005-2009 Area Plan**

planning and all of the contracts management functions have been centralized into the Human Services Agency's administration, while program management and nutrition monitoring functions have remained at the Office on the Aging. To better integrate expertise on the DAAS system, one program analyst and one nutritionist have transferred to the contracts, and one program analyst has transferred to the planning unit. The reorganization of staff is as follows:

- ❖ **Fiscal:** The San Francisco AAA maintained two full time accountants prior to integration. Of these staff, one has transferred directly to the Human Services Agency's fiscal unit and one transferred to another City department.
- ❖ **Budget:** The San Francisco AAA maintained one full time budget analyst and one full time Deputy Director of Finance and Administration (who served as the AAA's Chief Financial Officer and Agency Contracts Representative) prior to its integration into the Human Services Agency. Of these staff, the analyst ~~has~~ transferred to the Human Services Agency's budget unit. ~~and continues to provide full budgetary support (75% charged against Title III/VII/CBSP administration funds) to the AAA.~~ The Deputy Director of Finance and Administration has retired from City service. Both the budget analyst and deputy director positions were ultimately eliminated by the Board of Supervisors following the merge. Budget support is now provided by pre-existing budget staff.
- ❖ **Planning:** Prior to the integration, the San Francisco AAA planning was accomplished by the OOA manager and program analysts. In the new structure, one former OOA program analyst has been transferred to the Human Services Agency planning unit. The supervisor of the planning unit and the staff assigned as AAA planner, work closely with the DAAS Deputy Director, ~~Programs~~ the OOA Director, and the OOA program analysts whenever appropriate. As in all matters related to the OOA, the DAAS Executive Director has full authority to approve or disapprove all program and budget activities. The planning unit supervisor reports directly to the Human Services Agency Director of ~~Administration~~ Policy and Planning on many functions related to administration and fiscal planning and works closely with the DAAS Executive Director on matters of concern to the Office on the Aging.
- ❖ **Contracts:** Prior to integration, contract management at the AAA was under the authority of its Deputy Director of Finance and Administration, who has since retired. AAA contract management duties are now the purview of the contracts unit of the Human Services Agency, into which one OOA program analyst and one OOA nutritionist have transferred. This nutritionist, who had been charged against Title III/VII/CBSP administration funds, has since been removed from the Area Plan budget.
- ❖ **Personnel:** Since the July 2004 integration, the AAA's two-member personnel unit has been transferred into the personnel unit at the Human Services Agency, which now supports the personnel needs of both respective departments and the AAA.
- ❖ **Technology Staff.** The San Francisco AAA employed two information technology staff, and both have transferred and been fully integrated into the Human Services Agency information technology unit that supports the technology needs of both departments and of the Area Agency on Aging

- ❖ **Support Services Staff:** Prior to integration, the San Francisco AAA did not have staff dedicated to support services functions, such as mailroom distribution, purchasing, space planning, and engineering. For these functions, the AAA had allocated a percentage of an executive secretary's staff time. Since integration, the AAA now receives services from the Human Services Agency's support services.

Administration

In the new AAA structure under the Human Services Agency of San Francisco, a blended team of Administrators from both the AAA and the Human Services Agency work cooperatively to ensure that all contractual obligations in administering our Older Americans Act programs are met. The team, guided by the AAA's executive director and the Agency's deputy director of administration, includes the following people:

1. The Agency budget manager, who prepares the budgets for both DAAS and DHS.
2. The Agency director of contracts, who handles all fiscal monitoring and contract compliance issues.
3. The Agency planning unit supervisor, who oversees preparation of the Area Plan and its annual updates.
4. The Agency budget analyst, ~~formerly with DAAS~~, who prepares the Area Plan budget.
5. The Agency finance manager, who acts as the AAA's Agency contracts representative and manages all fiscal and accounting staff.
6. The Aging and Adult Services deputy director, and the OOA director who oversees the OOA.

Through regular communication on programmatic and administrative needs, this group works to ensure that adequate staff support is given to the AAA in setting up a structure to meet the AAA's administrative requirements with the California Department of Aging. This group also works to institutionalize these mechanisms into the Human Services Agency structure.

Removal of Program Funds from the Area Plan to Maximize Leveraging

To receive state and federal funds, Area Agencies on Aging are required to provide a local match of funding. In the past, San Francisco provided revenue far in excess of the required match. While this demonstrated the city's commitment to serving seniors, it did not maximize the potential for those extra funds to leverage other federal and state funding that could be used for seniors and people with disabilities. As a result of the recommendations of a workgroup to study ways to increase funding, DAAS will begin to use a significant portion of funding from the city's general fund as a match for Medi-Cal participant reimbursements.

As such, these dollars will not be found in the Area Plan as a match to the services funded by the Older Americans Act. The programs to be used as match are: Care/Case Management, ~~District-Wide Social Services Workers~~, Resource Centers for Seniors and Adults with Disabilities, and Community Services, all Title III-B Supportive Services programs. *These ~~four~~ three programs continue to operate as before. They will continue to serve seniors and people with disabilities, and the newly leveraged Medi-Cal revenue will allow DAAS to avoid service reductions in the short term and hopefully expand services as the city's budget picture improves.*

The shift in match will change DAAS' reporting to the State as it affects the Area Plan budget. On state fiscal and activity reports, known as NAPIS, DAAS will not include units of service funded by Medi-Cal match dollars. Contracts with community-based organizations will continue to reflect the entire scope of services and DAAS will work with the contractors to develop a reporting process that captures the full extent of their activities.

The Office on the Aging

Located within DAAS, the Office on the Aging is the single agency within the City and County of San Francisco that is specifically charged with coordinating and supporting services for the elderly. The mission of the Office on the Aging is:

- 1. To assist seniors and persons with disabilities to plan for and coordinate a continuum of community and in-home care thereby avoiding premature or inappropriate institutionalization;*
- 2. To increase participation of the target population;*
- 3. To advocate for policies that promote the coordination and integration of a Community-Based Long-Term Care System of care and support.*

The OOA operates with federal, State and local funds to coordinate a "Community-Based System of Care" that includes contracting with 47 local agencies and work orders with two county government agencies. The network of programs and services target frail, low income and cultural/racial/ethnic minority seniors, including lesbian, gay, bisexual and transgender persons, and younger adults with disabilities. The OOA supports bilingual/ bicultural services that reduce barriers and improve access. The services that the OOA funds include¹:

- ❖ **Adult Day Services***: a community-based day care program providing medical, rehabilitative, and social services to the elderly and other adults with functional impairments, either physical or mental, for the purpose of restoring or maintaining optimal capacity for self-care.
- ❖ **Alzheimer's Day Care Resource Centers**: day care specifically for those in the moderate to severe stages of Alzheimer's Disease or related dementia, whose care needs and behavioral problems make it difficult for the individual to participate in existing day care programs.
- ❖ **Care Management***: care coordination for older adults or adults with disabilities who are experiencing a diminished capacity to function so that formal assistance is required. Services include: assessing needs; developing care plans; authorizing, arranging and coordinating services; follow-up monitoring; and reassessment.
- ❖ **Community Services***: services that maintain or improve quality of life such as health maintenance (exercise), education, translation, services that protect senior rights, services that promote socialization/participation, and services that assure access and coordination.

¹ Services marked with an * that are bolded denote those services that are not funded by the California Department of Aging.

- ❖ **Congregate Meals:** meals provided in a group setting that consist of the procurement, preparation, transporting and serving of meals, as well as nutrition education. Local funding supports programming for younger adults with disabilities.
- ~~❖ **District Wide Social Services Workers*:** services that include assessing consumer needs, problem solving, arranging services, coordinating services, and follow up monitoring.~~
- ❖ **Elder Abuse Prevention:** consultation with the Ombudsman Program and coordination with Adult Protective Services and other abuse prevention services to provide education, outreach, referral, and receipt of complaints on behalf of vulnerable seniors and adults with disabilities.
- ❖ **Family Caregiver Support Program:** outreach to caregivers of older adults or grandchildren. Services include information and assistance, case management, transportation and assisted transportation, counseling, and supplemental services to caregivers who have difficulty maintaining quality homecare or the ability to live independently at home.
- ❖ ~~**Food Brown Bag:**~~ surplus and donated food products, produce, and nutrition education to low-income older adults and adults with disabilities.
- ❖ **Health Insurance Counseling and Advocacy Program:** counseling and information about Medicare, supplemental health insurance, managed care or related health insurance; community education activities; advocacy; and legal representation.
- ❖ **Health Screening:** a preventive health service that includes a medical exam to determine medical conditions that may require referral for a more in-depth medical evaluation.
- ❖ **Home-Delivered Meals:** meals for persons who are homebound because of illness or an incapacitating disability that also includes nutrition education. Local funding supports programming for younger adults with disabilities.
- ~~❖ **Home-Delivered Meals Clearinghouse:** eligibility assessment of homebound consumers that is consistent among referral agencies and service providers to assure the equitable selection of consumers from the citywide waiting list.²~~
- ❖ **Housing Counseling/Advocacy*:** information for individuals in jeopardy of being evicted and assistance in advocating for tenant rights. Also, training for individuals and groups so they can inform the public about the need for affordable and accessible senior housing.
- ❖ **Housing Emergency Assistance*:** assistance for vulnerable adults in the form of grants-in-aid to landlords for rent, security deposits, and/or moving costs.
- ❖ **In-Home Supportive Services:** personal care, homemaker and chore services to allow older adults and adults with disabilities to remain at home.

² The internal DAAS Integrated Intake and Screening Unit will oversee this functionality as of FY2007-08.

- ❖ **Legal Services:** legal advice, counseling and/or representation by an attorney, or other person acting under the supervision of an attorney. Local funding supports programming for younger adults with disabilities.
- ❖ **Linkages and Respite Purchase of Service:** prevention of premature or inappropriate institutionalization of elderly and functionally impaired adults by providing care management, and information and assistance services.
- ❖ **Medical Escort*:** schedules staff to accompany and personally assist a consumer to travel to and/or from a medical appointment or hospital.
- ❖ **Medication Management:** an adjunct to medical treatment services when indicated.
- ❖ **Money Management*:** program assigns trained volunteers to consumers needing assistance with money management. The program for younger adults offers direct assistance in the management of income and assets, including payment of rent and utilities, purchase of food and other necessities, and payment of insurance premiums, deductibles and co-payments.
- ❖ **Naturalization Services*:** services that help legal permanent residents prepare for citizenship, learn English as a second language, provide legal advice, counseling, and representation.
- ❖ **Ombudsman Services:** advocacy efforts on behalf of residents of long-term care facilities to protect their civil and human rights and to resolve their complaints.
- ❖ **Resource Centers for Seniors and Adults with Disabilities*:** one-stop neighborhood access to information, referral and assistance, translation services and form and document assistance for seniors, caregivers, and adults with disabilities.
- ❖ **Senior Companion:** supportive services by a volunteer senior companion that allows an older adult to maintain independence and with enriching social contacts.
- ❖ **Social Support for Hoarders and Clutterers*:** services that assist this population to improve their quality of life, including the goal of improving the condition of their physical living space.
- ❖ **Consumer Empowerment*:** training for seniors and adults with disabilities that teaches community organizing, leadership skills, how to conduct effecting meetings, how to access essential services, conflict resolution, diversity and political advocacy.
- ❖ **Homecare Advocacy*:** this program works with hospitals organizing discharge planning.
- ❖ **Transportation:** paratransit services through MUNI Accessible Services that provides wheelchair lift-van and group van transportation to seniors and adults with disabilities; taxi vouchers are also provided to seniors and adults with disabilities.

The accompanying chart is a list of the OOA-funded service providers. A second chart, adapted from the *Living With Dignity* strategic plan, illustrates the “no wrong door” vision the service system.

2006 Needs Assessment Activities

Needs Assessment Overview

The 2006 community needs assessment was guided by the following goal: To estimate the unmet needs for services for seniors and for adults with disabilities in San Francisco, taking into consideration services currently provided by DAAS and its contractors, other city departments, and other community-based providers. The assessment provided, wherever possible, concrete quantitative estimates of and a qualitative context for service gaps citywide, by neighborhood, and for high-need communities. It identified existing needs of seniors and of younger adults with disabilities. It then described existing services that address those needs. By comparing needs with existing services, the assessment revealed gaps in services and supports.

In order to maintain a feasible scope, analysis was limited to broad areas of need that mirror the social services focus of DAAS, though it is likely that other community needs are relevant to the missions of other public agencies (e.g., disease prevention or employment training). The needs assessment was broken into seven overarching topic areas:

- ❖ Housing
- ❖ Nutrition
- ❖ Isolation
- ❖ Case Management & Transitional Care
- ❖ Self Care & Safety
- ❖ Caregiver Support
- ❖ Access

Each section presented an overview of the issue, evidence of local needs, a description of existing local services, and an analysis of gaps.

The process of the assessment included both quantitative and qualitative analysis methods. The HSA planning unit conducted deep analysis of data from the US Census Bureau, supplementing it with other national, state, and local research. Staff also conducted numerous key informant interviews, roundtable discussions and focus groups with both service providers and consumers.

Methods

The design of the community needs assessment was driven by two overarching principles. First, the assessment would be consumer-focused, including both those consumers who currently receive services and those who have “unmet needs.” Methods were intended to reveal the true needs of consumers, even for those unable to express them clearly. The design of the assessment was cautious not to simply reinforce existing systems for serving consumers by, for example, seeking feedback primarily from those consumers who are already receiving services from the DAAS network of providers.

Second, the assessment relied upon the highest possible quality of information available for each topic.

The methods relied upon a convergent approach, gathering information from both quantitative sources and from qualitative research wherever possible in order to prevent “blind spots” and to enhance the reliability of the findings when quantitative and qualitative sources reinforce each other.

Quantitative analysis sought to concretely describe the landscape of needs and existing services in San Francisco without the subjective biases that are inherent to qualitative research. Data sources included:

1. Census 2000:
2. American Community Survey 2004
3. California Health Interview Survey
4. SF-GetCare Consumer Data
5. Department of Human Services Administrative Data
6. San Francisco Homeless Shelter Data
7. Administrative Data from Other Government Agencies
8. 2006 Phone Survey of Seniors and Adults with Disabilities

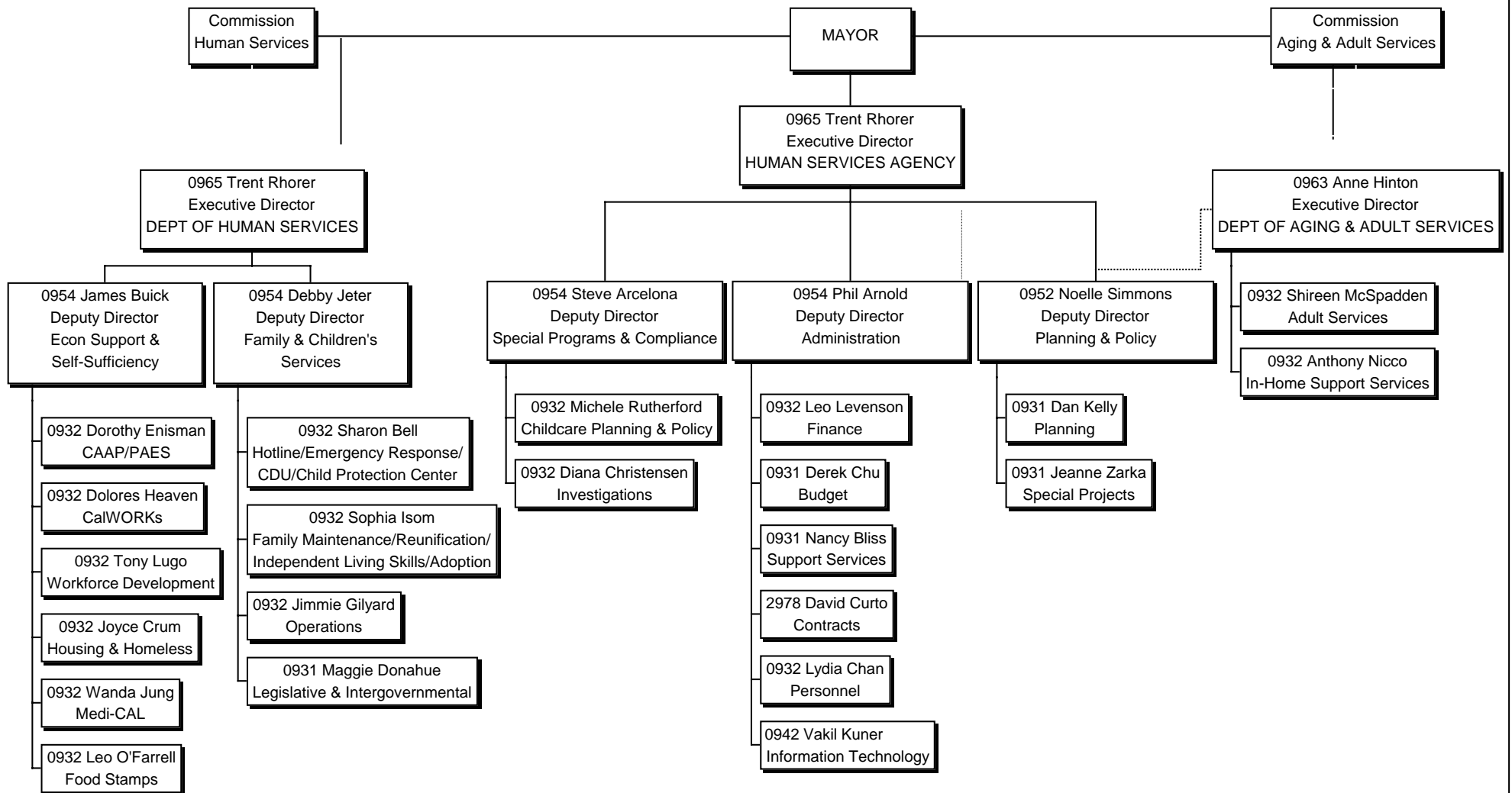
In order to supplement the data sources listed above, staff conducted a literature review of relevant national, state, and local reports. Information from this research provided an overview of each issue area and described San Francisco-specific needs and challenges.

The qualitative portion of needs assessment research was informed by the data analysis and literature review. Qualitative research methods provided concrete opportunities for public input and helped to broaden the perspective of the needs assessment beyond what is possible using only quantitative sources. Qualitative methods included:

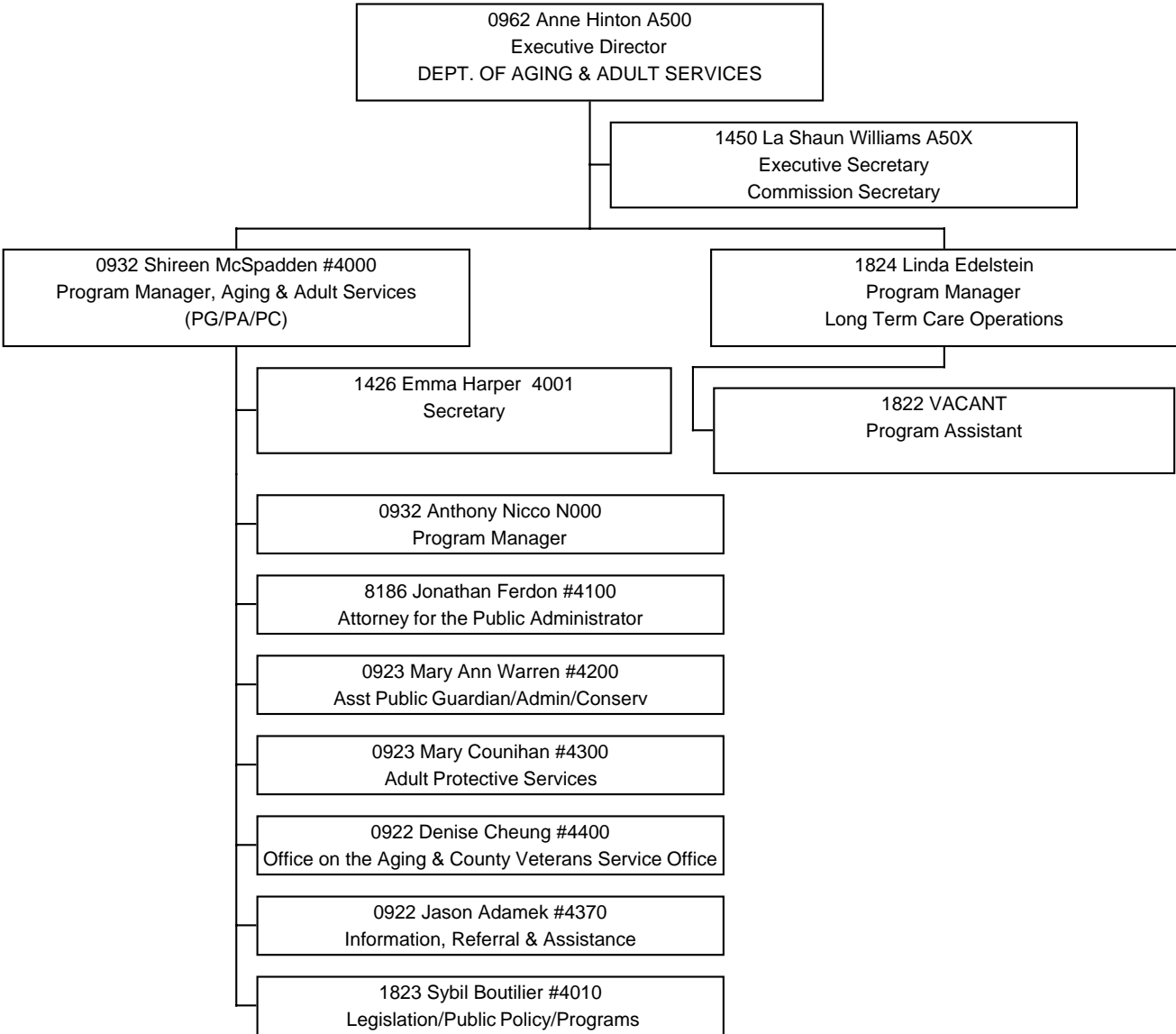
1. Key Informant Interviews
2. Roundtable Discussions with Service Providers
3. Consumer Focus Groups
4. Recommendations from District Advisory Councils

The final 2006 Community Needs Assessment report is available online at <http://www.sfhsa.org/specialnotice.htm>.

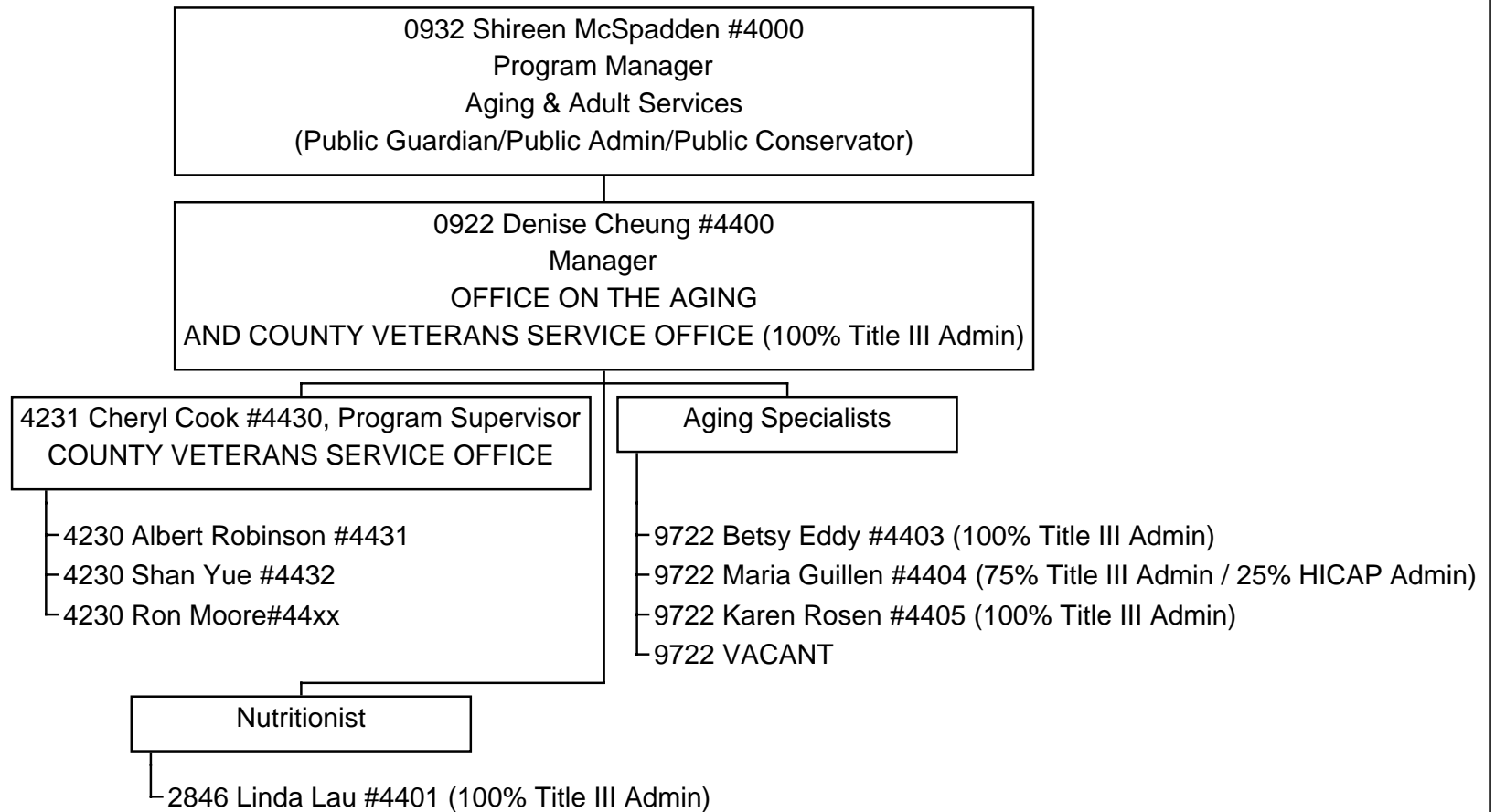
**CITY & COUNTY OF SAN FRANCISCO
HUMAN SERVICES AGENCY
FY 2007/2008**



**DEPT. OF AGING & ADULT SERVICES
FY 2007/2008**



**Dept. of Aging & Adult Services
Office on the Aging & County Veterans
Service Office
FY 2007/2008**



Dept. of Aging & Adults Services
INFORMATION & REFERRAL SERVICES
FY 2007/2008

0932 Shireen McSpadden #4000
Program Manager
Aging & Adult Services
(Public Guardian/Public Admin/Public Conservator)

0922 Jason Adamek #4370
Protective Services Supervisor
INFORMATION & REFERRAL SVCS

2587 William Aguilar #4510 (100% Title IIIB Funded)

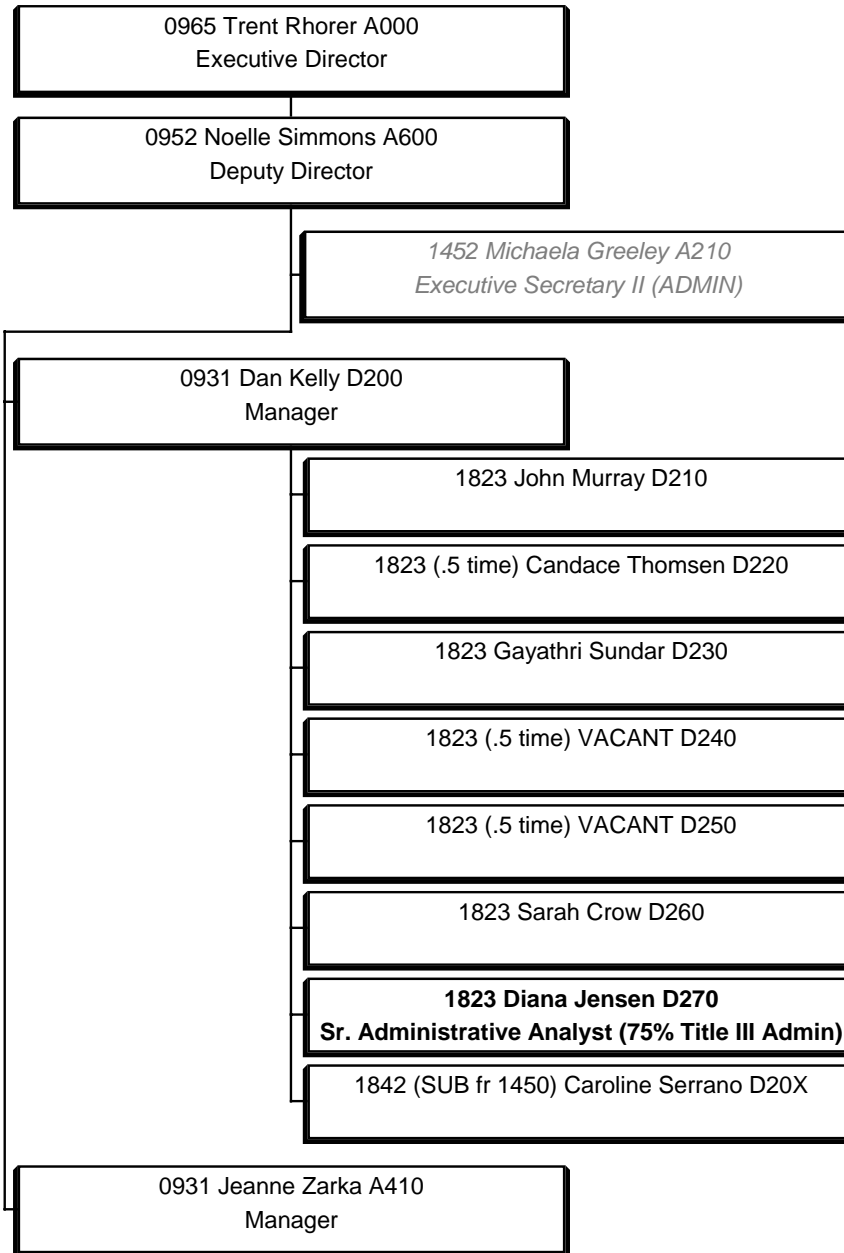
2587 Ronnie McFarland #4520 (100% Title IIIB Funded)

2585 Marvin Catalan #4530

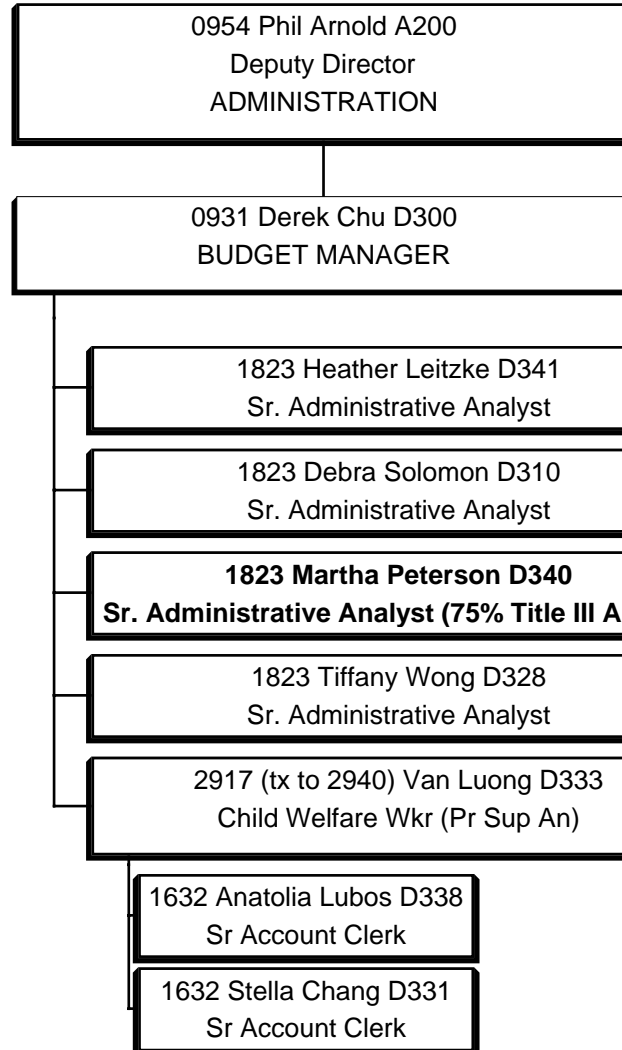
2585 Vacant

2585 Vacant

**Human Services Agency
POLICY & PLANNING
FY 2007/2008**



**Human Services Agency
BUDGET UNIT
FY 2007/2008**



Area Plan Update 2007-2008
Appendices

Appendices – 2007-2008 Updates

The status of the Area Plan Appendices is summarized below. All updated appendices have been page-numbered appropriately for insertion into the existing 2005-2009 Area Plan document.

- Appendix IA: Updated
- Appendix IB: Unchanged
- Appendix II: Updated
- Appendix III: Updated
- Appendix IV: Updated
- Appendix V: Unchanged
- Appendix VI: Updated
- Appendix VII: Unchanged
- Appendix VIII: Unchanged.
- Appendix X: Updated
- Appendix XI: Updated
- Appendix XII: Unchanged
- Appendix XIII: No longer required

APPENDIX IA - PSA #6

NOTICE OF INTENT TO PROVIDE DIRECT SERVICES

CCR Article 3, Section 7320 (a) (b)

If an AAA plans to directly provide any of the following services, it is required to provide a description of the methods that will be used to assure that target populations throughout the PSA will be served. If not providing direct services below, check box .

Check applicable services

Check each applicable Fiscal Year(s)

Title III B

Information and Assistance

FY 2005-06 FY 06-07 FY 07-08 FY 08-09

Title III B

Case Management

FY 2005-06 FY 06-07 FY 07-08 FY 08-09

Title III B

Program Development
 Coordination

FY 2005-06 FY 06-07 FY 07-08 FY 08-09
 FY 2005-06 FY 06-07 FY 07-08 FY 08-09

Title III D

Disease Prevention
and Health Promotion

FY 2005-06 FY 06-07 FY 07-08 FY 08-09

Title III E

Outreach to Caregivers

FY 2005-06 FY 06-07 FY 07-08 FY 08-09

Title III E

Information and Assistance to
Caregivers

FY 2005-06 FY 06-07 FY 07-08 FY 08-09

Title III E

Comprehensive Assessment of
Caregivers

FY 2005-06 FY 06-07 FY 07-08 FY 08-09

Title III E

Case Management for Caregivers

FY 2005-06 FY 06-07 FY 07-08 FY 08-09

Title VII b

Prevention of Elder Abuse,
Neglect, and Exploitation

FY 2005-06 FY 06-07 FY 07-08 FY 08-09

Describe the methods that will be used to assure that target populations will be

served throughout the PSA. 6The Information, Referral and Assistance program fulfills its obligation to reach out to the entire community and to targeted consumers in many ways. Limited English-speaking clients are referred to the OOA Resource Centers for Seniors and Adults with Disabilities, where over 14 different languages and dialects are spoken. Materials designed to describe the program are translated into Spanish, Chinese and Russian. IR &A staff attend community health fairs and information fairs to reach out to clients of all races, nationalities, ethnicities, ages, abilities, genders and sexual orientations.

A new web site was launched on May 17, 2005 called Network of Care. The web site provides information about services in English, Spanish, Chinese and Russian. It also has information about available services, assistive devices, legislation, current events and a library. The website also has interactive components such as message boards, calendar, and options to build web pages for agencies and groups that are interested in these enhancements. For screen only readers, the site is also available in a text format.

Recently, a TTY line has been added to increase accessibility for people with hearing impairments. At public meetings all sites are ADA accessible, microphones are used, and translation and low hearing devices are available.

Members of the Information, Referral and Assistance program participate in many community collaborations including: the San Francisco Partnership for Long Term Care and Support; the Services and Programs Advisory Committee (SPAC); the Community Advisory Committee to the Targeted Care Management program; Housing Pipeline; 311; and the Help for Elders and Adults with Disabilities hotline (HEAD Line). Participation in these collaborations increases trust and mutual community awareness of the program and it's capabilities. Through this participation, IR&A staff are in frequent contact with the community in order to better understand and respond to changing needs.

APPENDIX II – PSA #6

Check each applicable planning cycle:

2005-09 FY 2006-07 FY 2007-08 FY 2008-09

PUBLIC HEARINGS Conducted for the 2005-2009 Planning Period

CCR Article 3, Section 7302(a)(10) and Section 7308

Date	Location	Number Attending	Area Plan presented with Translator ¹ : Yes/No	Hearing Held at Long-Term Care Facility Yes/No
4/18/07	Advisory Council: Dept. of Aging and Adult Services, 875 Stevenson, SF	16	Not requested	No
5/22/07	Aging and Adult Services Commission: City Hall, SF	34	Not requested	No
6/6/07	Aging and Adult Services Commission: City Hall, SF	40	If requested	No

All of the items below must be discussed at each planning cycle's Public Hearings

1. Discuss outreach efforts used in seeking input into the Area Plan from institutionalized, homebound, and/or disabled older individuals. Flyers posted, sent to library, emailed to all contractors and senior service centers and interested parties

2. Proposed expenditures for Program Development (PD) and Coordination (C) must be discussed at a public hearing. Did the AAA discuss PD and C activities at a public hearing?

- Yes Not Applicable (check only if PD and C funding is not being used)
 No

If No, Explain:

3. Summarize the comments received concerning proposed expenditures for PD and C, if applicable.
N/A

4. Were all interested parties in the PSA notified of the public hearing and provided the opportunity to testify regarding setting of minimum percentages of Title III B program funds to meet the adequate proportion funding for Priority Services? (See Appendix V)

- Yes
 No

If No, Explain:

5. Summarize the comments received concerning minimum percentages of Title III B funds to meet the adequate proportion funding for priority services. (See Appendix V)
No comments.

6. Summarize other major issues discussed or raised at the public hearings.

¹³A Translator is not required unless the AAA determines that a significant number of attendees require translation services.

Advisory council members discussed concerns related to the implementation of new transportation lines. Members of the public discussed issues related to the equitable distribution of meal resources throughout the city, given limited resources.

7. List major changes in the Area Plan resulting from input by attendees at the hearings. No major changes.

APPENDIX III – PSA #6

Check each applicable planning cycle:

2005-09

FY 2006-07

FY 2007-08

FY 2008-09

GOVERNING BOARD

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

Number of Members on the Board: 7

Names/Titles of Officers:

Term in Office Expires:

GUSTAVO SERINA – PRESIDENT	2008
ANITA AARON - VICE PRESIDENT	2008

Names/Titles of All Members:

Term Expires:

RAYMOND DEL PORTILLO – COMMISSIONER	2008
ROSARIO CARRION-DI RICCO - COMMISSIONER	2008
VENERACION ZAMORA – COMMISSIONER	2008
LUCY FISHER – COMMISSIONER	2011
EDNA JAMES - COMMISSIONER	2011

APPENDIX IV – PSA #6

Check each applicable planning cycle:

2005-09 FY 2006-07 FY 2007-08 FY 2008-09

ADVISORY COUNCIL

45 Code of Federal Regulations (CFR), Section 1321.57
CCR Article 3, Section 7302 (a) (12)

Total Council Membership (including vacancies)	<u>22</u>	
Number of Council Members 60+	<u>10</u>	
	<u>% of PSA's</u>	<u>% on</u>
	<u>60+Population</u>	<u>Advisory Council</u>
Race/Ethnic Composition		
White	44	<u>60</u>
Hispanic	<u>9</u>	<u>13</u>
Black	<u>8</u>	<u>13</u>
Asian/Pacific Islander	<u>37</u>	<u>13</u>
Native American/Alaskan Native	<u>0</u>	<u>0</u>
Other	<u>2</u>	<u>0²</u>

Attach a copy of the current advisory council membership roster that includes:

- Names/Titles of officers and date term expires
- Names/Titles of other Advisory Council members and date term expires
See attached Advisory Council list for both of these lists.

Indicate which member(s) represent each of the “Other Representation” categories listed below.

	<u>Yes</u>	<u>No</u>	
Low Income Representative	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vacant
Disabled Representative	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Luis Calderon
Supportive Services Provider Representative	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vera Haile
Health Care Provider Representative	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Lisa Luna-Smith
Local Elected Officials	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vacant
Individuals with Leadership Experience in the Private and Voluntary Sectors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	George Schofield

Explain any "No" answer. The previous “low income representative” recently retired from the Advisory Council. The council is seeking a new designated representative for this purpose.

Briefly describe the process designated by the local governing board to appoint Advisory Council members. The Advisory Council is not to exceed twenty-two members (voting members), eleven of who shall be appointed by the Board of Supervisors. The composition of the other members is as follows: eleven members appointed by Commission for Aging and Adult Services. More than fifty percent (50%) of the members of each group of eleven members shall be persons who are 60 years of age or older. The Council shall be representative of the geographic and ethnic populations of the City and County of San Francisco by districts determined by the Commission. The council shall include service providers, older persons with the greatest socio and economic need, consumers, and others specified by federal regulation. The Advisory Council members shall be appointed to serve two (2) year terms.

² Percentages do not add to 100 percent due to rounding.



CITY AND COUNTY OF SAN FRANCISCO
ADVISORY COUNCIL TO AGING AND ADULT SERVICES COMMISSION

Membership as of March, 2007

Name	Appointed By Supvr./Comm.	Ethnicity, Gender & Age			Term Expires	Term	Dist.
1. <i>George Schofield, President</i>	AASC	<i>White</i>	<i>Male</i>	<i>60+</i>	3/31/08	2	
2. <i>Luis Calderon, 1st Vice President</i>	B. Dufty	<i>Latino</i>	<i>Male</i>	<i>60-</i>	3/31/08	2	8
3. <i>Vera Haile, 2nd Vice President</i>	J. McGoldrick	<i>White</i>	<i>Female</i>	<i>60+</i>	3/31/08	2	1
4. <i>Cathy Russo, Secretary</i>	S. Elsbernd	<i>White</i>	<i>Female</i>	<i>60+</i>	3/31/08	2	7
5. Sharon Eberhardt	G. Sandoval	White	Female	60	3/31/08	2	11
6.	T. Ammiano						9
7. Alexander C. MacDonald	C. Daly	Scottish American	Male	60+	3/31/08	2	6
8.	M. Alioto-Pier						
9.	E. Jew						
10. Mary Higgins	S. Maxwell	African American	Female	60-	3/31/08	2	10
11. Anna Maria Pierini	A. Peskin	Italian American	Female	60-	3/31/08	2	3
12.	R. Mirarimi						
13. Anne Kirueshkin	AASC	White Russian	Female	60+	3/31/08	2	1
14. Lisa Marie Luna-Smith	AASC	Mexican American	Female	60-	3/31/08	2	2
15.	AASC						7
16. Nancy Flaxman	AASC	White	Female/LGBT	60	3/31/08	2	3
17. Marian Fields	AASC	African American	Female	60+	3/31/08	2	10
18. Isabel Huie	AASC	Asian American	Female	60+	3/31/08	2	
19. Connie Little	AASC	White	Female	60+	3/31/08	2	
20. Benny Wong	AASC	Chinese American	Male	60-	3/31/08	2	
21.	AASC						
22.	AASC						

APPENDIX V – PSA #6

Check each applicable planning cycle:

2005-09

FY 2006-07

FY 2007-08

FY 2008-09

PRIORITY SERVICES:

Funding for Access, In-Home Services, and Legal Assistance

The CCR, Article 3, Section 7312, requires that the AAA allocate an “adequate proportion” of federal funds to provide Access, In-Home Services, and Legal Assistance in the PSA. The annual minimum allocation is determined by the AAA through the planning process. The minimum percentages of applicable Title III B funds³ listed below have been identified for annual expenditure throughout the four-year planning period. These percentages are based on needs assessment findings, resources available within the PSA, and discussions at public hearings on the Area Plan.

Category of Service & Percentage of Title III B Funds Expended in/or To Be Expended in FY05-06 through FY08-09

Access:

Case Management, Assisted Transportation, Transportation,
Information and Assistance, and Outreach

05-06 48.6% 06-07 48.2% 07-08 45.0% 08-09 45.0%

In-Home Services:

Personal Care, Homemaker and Home Health Aides, Chore, In-Home Respite, Daycare as respite services for families, Telephone Reassurance, Visiting, and Minor Home Modification,

05-06 6.6% 06-07 6.6% 07-08 5.0% 08-09 5.0%

Legal Assistance:

05-06 44.8% 06-07 45.1% 07-08 45.0% 08-09 45.0%

1. Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA. As described throughout the Area Plan, the OOA emphasizes services to low-income seniors and persons with disabilities, especially those with limited English proficiency. The City and County of San Francisco uses its general fund to support a range of services for seniors and persons with disabilities, and the allocations of Title III B funds reflects a commitment to making those services as accessible as possible to its target populations. Since the target population includes many immigrants and individuals in precarious living situations, the allocation also reflects a commitment to providing legal assistance that assists them with naturalization, eviction prevention, appeals on benefit applications, and other critical services. The allocation is not being changed for the current Area Plan, as the community has come to depend on these services. Furthermore, the allocations have been approved by the Adult and Aging Services Commission through successive years and public hearings.

¹⁴ Minimum percentages of applicable funds are calculated on the annual Title III B baseline allocation, minus Title III B administration and minus Ombudsman.

2. Appendix V must be updated if the minimum percentages change from the initial year of the four-year plan.
3. Provide documentation that prior notification of the Area Plan public hearing(s) was provided to all interested parties in the PSA and that the notification indicated that a change was proposed, the proposed change would be discussed at the hearing, and all interested parties would be given an opportunity to testify regarding the change. Proposed allocation adjustments were included in two public meetings. Documentation on the new proposed allocations was included in each meeting's docket, which is publicly available to all interested parties. The changes were discussed as part of the action items related to both the Area Plan Budget and the Area Plan Update. Public comment on these items was solicited at each meeting.
4. Submit a record (e.g., a transcript of that portion of the public hearing(s) in which adequate proportion is discussed) documenting that the proposed change in funding for this category of service was discussed at Area Plan public hearings.

No changes to adequate proportion were anticipated at the time of the April 18th public meeting, and the existing proportions were not questioned at that meeting. At the May 22nd meeting, the attached memo described the rationale for proposed minor changes in the adequate proportion figures (please see the next page). Neither the members of the Commission nor members of the public commented further on these recommendations before approval. At the June 6th meeting, the Area Plan Update narrative also included a description of the changes.

MEMORANDUM

TO: AGING AND ADULT SERVICES COMMISSION

THROUGH: ANNE HINTON, DIRECTOR

FROM: PHIL ARNOLD, DEPUTY DIRECTOR FOR FINANCE AND ADMINISTRATION

DATE: MAY 22, 2007

SUBJECT: FY07-08 CDA-122 AREA PLAN BUDGET

INTRODUCTION

As part of the California Department on Aging's (CDA) required annual update, the Department of Aging and Adult Services (DAAS) submits the *Area Plan Budget*, with an original usually due each year by May 1st. Because of the massive re-procurement that has taken place this year in the Department, and the fact that RFPs have only recently been finalized and contracts negotiated, an extension has been requested by the DAAS to the State CDA. Because virtually every DAAS service was re-procured and in some cases new contractors selected, the Area Plan Update and Budget could not be completed until these contracting decisions were finalized.

Attached, please find two documents related to the Area Plan Budget for 2007-08:

- The first document is the *Area Plan Budget*, which is largely unchanged from FY2006-07. On page 4, the approved percentages for Priority Services using Federal IIIB funds was altered slightly in order to afford more flexibility when displaying fluctuations in the revenue stream. Also, this budget includes a shift of State funds from the Adult Day to the Homemaker service category on page 8.
- The second document details current changes in the Area Plan Budget Federal and State allocations for Older Americans Act programs, by Title, from FY 2006-07 to FY2007-08. Overall, the federal and state allocations have increased by \$21,816 from a budget of \$5.7 million.

Again, the purpose of the *Area Plan Budget* at this time is to reflect allocations that will be provided by the Federal and State governments. Once the contracting process has been finalized, this Area Plan Budget will be revised to reflect the expenditure of CDA-relevant final allocations, including federal, state and local funding.

APPENDIX VI – PSA #6

Check each applicable planning cycle:

2005-09 FY 2006-07 FY 2007-08 FY 2008-09

COMMUNITY FOCAL POINTS LIST CCR Article 3, Section 7302(a)(14)

Provide an updated list of designated community focal points and their addresses. This information must match the National Aging Program Information System (NAPIS) SPR 106.

RESOURCE CENTERS FOR SENIORS AND ADULTS WITH DISABILITIES

- #1. Richmond Resource Center: Institute On Aging
3330 Geary Boulevard, 3rd Floor San Francisco, CA 94118

- #2. Western Addition/Marina Resource Ctr: Institute On Aging
1426 Fillmore Street, Suite 302 San Francisco, CA 94115

- #3. Northeast Resource Center: Self-Help for the Elderly
407 Sansome Street, Lower Level San Francisco, CA 94111

- #4. Central City/Potrero Hill Resource Ctr: Self-Help for the Elderly
602 Eddy Street San Francisco, CA 94109

- #5. Mission/Bernal Heights/Noe Valley Buena Vista/Eureka Valley Resource Center: Institute On Aging
225-30th Street, Room 320 San Francisco, CA 94131

- #6. Bayview Hunters Point Resource Center: Network for Elders
1555-A Burke Avenue San Francisco, CA 94124

- #7. Visitacion Valley/Portola/Excelsior Resource Center: Network for Elders
66 Raymond Avenue San Francisco, CA 94134

- #8. OMI/St. Francis Wood/Miraloma Park Resource Center: Network for Elders
446 Randolph Street San Francisco, CA 94134

- #9. Inner Sunset/Haight Ashbury Resource Center: Self-Help for the Elderly
1400 Irving Street San Francisco, CA 94122

- #10. Outer Sunset Resource Center: Self-Help for the Elderly
2436 Judah Street San Francisco, CA 94122

- #11. Information and Assistance and Integrated Intake Unit: Department of Aging and Adult Services
875 Stevenson Street San Francisco, CA 94103

APPENDIX X – PSA #6

Check each applicable planning cycle:

2005-09

FY 2006-07

FY 2007-08

FY 2008-09

Legal Assistance^①

This section must be completed and submitted with the Four-Year Area Plan.

Any changes to this Appendix must be documented on this form and remitted with Area Plan Updates. This Appendix is to be completed electronically.

1. Specific to Legal Services, what is your PSA's Mission Statement or Purpose Statement? Statement must include Title III B requirements. The mission of the Department of Aging and Adult Services is to assist older and functionally impaired adults and their families to maximize self-sufficiency, safety, health and independence so that they can remain living in their own homes without the threat of harassment or issues that threaten citizenship or other abuses.
2. Based on your local needs assessment, what percentage of Title IIIB funding is allocated to Legal Services? 45.0%
3. Specific to Legal Services, what is the targeted senior population and mechanism for reaching targeted groups in your PSA? Discussion:

Legal service providers publish and distribute brochures in at least 4 languages; they have bi-lingual staff or access other languages with the use of an interpreter. Legal providers are focused in Asian and Latino communities as evidenced by their agency names: Asian Law Caucus, La Raza Centro Legal, Asian Pacific Islander Legal Outreach; they attend community fairs in targeted neighborhoods; they attend services at District Advisory Council meetings each month; they collaborate with other providers; they establish outpost offices in neighborhoods where it is most likely target populations can be found; they participate in roundtable discussions for community events. In addition, in FY 2006-07, the legal service providers used added local funding to collaborate on a joint outreach effort. The providers publish a Senior Rights Bulletin that was widely distributed throughout San Francisco via senior centers, nutrition sites and other social service agencies. The Bulletin was printed in English, Chinese and Spanish languages and clearly highlighted the legal services agencies that could be of assistance to the community.

Also, the four legal service providers attended an All-Staff Meeting for Adult Protective Services for the purpose of informing the 50 member staff of social workers and supportive staff of the wide range of legal services offered. This session also helped open up avenues for better coordination and collaboration. Follow-up sessions are planned.

4. How many legal assistance providers are in your PSA? Complete table below.

Fiscal Year	# Legal Services Providers
2005-2006	4
2006-2007	4
2007-2008	4
2008-2009	

5. What methods of outreach are providers using? Discuss: (Please see answer to #3.)
6. What geographic regions are covered by each provider? Complete table below.

^① For information related to Legal Services, contact Chisorom Okwuosa at 916 327-6849 or COkwuosa@aging.ca.gov

Fiscal Year	Name of Provider	Geographic Region covered
2005-2006	a. Asian Law Caucus b. Asian Pacific Islander Legal Outreach c. La Raza Centro Legal and d. Legal Assistance to the Elderly	a. Asian Community and the entire City and County of San Francisco b. Asian Community and the entire City and County of San Francisco c. Hispanic community and the entire City and County of San Francisco d. the entire City and County of San Francisco
2006-2007	Same as above.	a. b. c.
2007-2008	Same as above.	a. b. c.
2008-2009	a. b. c.	a. b. c.

7. How do older adults access Legal Services in your PSA? Discuss: In PSA 6, there are four DAAS/OOA funded legal service providers that provide access to seniors by maintaining regular office hours. All of the providers provide language access to persons who are limited English-speaking. Three of the four providers are fully proficient in providing multi-lingual and multi-culturally competent services. All providers operate their programs in accessible buildings in terms of disability access and close access to public transportation. In addition, most of the providers utilize out-stations in the community to increase access to seniors.

The Senior Information and Referral in-house staff and the 10 Resource Centers for Seniors and Adults with Disabilities refer many callers to the legal service providers.

8. What are the major legal issues in your PSA? Include new trends of legal problems in your area: Discuss: The major legal issues continue to be evictions and other housing related issues, benefit appeals, consumer fraud issues, elder abuse and immigration/naturalization issues. One of the service providers is committed to the issue of domestic violence. Another legal service provider has extensive years of experience with the HICAP program and is very apt at handling health insurance related matters.

Continued new trends involve the preying on seniors and adults with disabilities regarding scams and fraud to include Medicare and other more consumer related issue. With a heavy emphasis on immigration reform, there is an increased level of anxiety and intimidation in the immigrant community. There is a corresponding increased demand for immigration and naturalization services from the legal providers.

9. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. Discuss: The biggest barrier at the moment is making sure our service providers are able to maintain their services at capacity. Some have had to expand their fundraising activity, leaving less time to serve the consumers. Many must hold large, major fundraising events during the year.

The DAAS/OOA Legal Services workgroup will meet in 2007-08 at least three times to discuss how DAAS/OOA can assist in this matter.

10. What other organizations or groups does your legal service provider coordinate services with? Discuss: The legal service providers meet as a Legal Services workgroup (see item 9.) to coordinate services and make efforts to collaborate. The providers are also members of the Coalition of Agencies Serving the Elderly and attend the various District Advisory Council meetings, as well as the various ethnic and LGBT community partnership groups.

APPENDIX XI – PSA # 06

Check each applicable planning cycle:

2005-09

FY 2006-07

FY 2007-08

FY 2008-09

Disaster Preparation Planning Conducted for the 2005-2009 Planning Period

OAA Title III, Sec. 310, CCR Article 2, Section 7529(a) (4) and Section 7547

All of the items below must be discussed at each planning cycle's Public Hearings

Please provide narrative answers to the following questions. The text boxes following the questions have been formatted to type your answers.

1. Describe AAA's disaster plan. The plan shall ensure the provision of critical services that will meet the emergency needs of consumers the AAA is charged to serve during medical or natural disaster, such as earthquakes or floods.

The Department of Aging and Adult Services (DAAS) is the designated AAA for San Francisco. DAAS is part of the San Francisco Human Services Agency. The Human Services Agency is the lead agency for the provision of Care and Shelter under San Francisco's Emergency Response Plan. In the event of a declaration of emergency in San Francisco, all City and County employees are designated as Disaster Service Workers and are subject to assignment by the San Francisco Department of Emergency Management. The Human Services Agency has pre-designated a Department Operations Center (DOC) to be activated in the event of an emergency. Under the San Francisco Emergency Response Plan, the Human Services Agency DOC will take responsibility for opening, provisioning and staffing shelters for displaced person under the direction of the San Francisco Emergency Operations Center (EOC). The Human Services Agency has also established the following emergency response priorities:

- Assess the health and safety of Agency workers
- Assess the operability of Agency facilities and programs
- Restore Agency services
- Establish contact with the Agency's most-vulnerable clients

The Human Services Agency DOC will attempt to ensure that services provided by AAA contract agencies continue or are restored as soon as possible. Home-delivered meals and senior center services including congregate meals are a vital part of response and recovery for the well being of older persons. In order to help AAA agencies receive assistance needed to continue operations, the Agency staff will conduct an assessment of the status of provider staff and consumers, facilities and needs as soon after a disaster as possible. The assessment will be conducted by phone or if phone service is disrupted by site visits.

It is expected that 24 to 72 hours or more may lapse before City disaster systems and shelters are available. AAA contractors may be faced with older persons and adults with disabilities in their facilities during the period immediately after the disaster strikes. In order to be prepared for this scenario, AAA contractors are required to comply with emergency preparedness standards that include: a current disaster plan, annual training on the plan, maintenance of disaster supplies including food and water and a plan to check on the most at-risk consumers in their homes.

2. Describe how AAA would coordinate its disaster response with the local Office of Emergency Services.

The DAAS emergency response staff members are part of the Human Services Agency DOC. In the event of an emergency, the Agency DOC will establish and maintain contact with the San Francisco Emergency Operations Center for the duration of the emergency in order to ensure that all emergency response activities are coordinated. All preparations for emergency response are coordinated between the Agency and the San Francisco Department of Emergency Management.

3. Identify the local Office of Emergency Services contact person your AAA would coordinate with in the event of a disaster:

name: Rob Stengel, Planner
telephone number: 415-503-2079
e-mail address: Robert.stengel@sfgov.org
address: Department of Emergency Management
25 Van Ness Avenue, 6th Floor
San Francisco, CA 94102

4. Identify your:

AAA Disaster Response Coordinator

name: Betsy Eddy, Program Analyst/Emergency Coordinator
telephone number: 415-355-6786
e-mail address: betsy.eddy@sfgov.org
address: Department of Aging and Adult Services
875 Stevenson Street, 3rd Floor
San Francisco, CA 94103

AAA Back-up Disaster Response Coordinator

name: Jason Adamek, Information, Referral and Assistance Program Director
telephone number: 415-355-6701
e-mail address: Jason.Adamek@sfgov.org
address: Department of Aging and Adult Services

5. Has your Information and Assistance staff been provided written emergency procedures on how to provide services during and after a disaster?

- Yes
 No

If No, Explain:

6. Describe your emergency and disaster training curriculum and the frequency this training is provided to AAA staff that work directly with older individuals.

In previous years, the Office on the Aging has provided required training for funded agencies on the development of disaster plans using provided templates and on the contractual requirement entitled Emergency Preparedness Responsibility of the OOA Contractor, a three page list of emergency preparedness items that each agency must meet. Each funded agency is required to train its staff and volunteers annually in the procedures contained in the agency disaster plan. The training section of this policy memorandum states:

Training Provisions

- a. Documented Annual Training for all staff, volunteers and participants in the agency's Emergency Operations Plan
- b. Training of staff, volunteers and participants in home preparedness
- c. Provisions to train staff and volunteers in First Aid and CPR
- d. Training for Earthquake Preparedness shall include:
 1. Two documented earthquake drills per year
 2. Procedures to assemble staff if no phones are working
 3. Anticipate the probability that no transportation, utilities (including telephone) or emergency services will be available for 72 hours or longer after a major quake
 4. The importance of cooperating with public officials
 5. How to inspect facilities for damage, water and gas leaks
 6. How to check for injuries
 7. Warning of the danger of cooking inside buildings
 8. Anticipate the probability of after shocks
 9. Turn on a portable radio