Amendments to the 2025 – 2026 AREA PLAN UPDATE

Working Draft
December 12, 2025

Previously Discussed Changes Shown in Green
Newly Proposed Changes Shown in Yellow
CDA Corrections Shown in Pink

AGENCY ON AGING AREA 4
1401 EL CAMINO AVENUE, SUITE 400
SACRAMENTO, CA 95815

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2024-2028 4-YEAR AREA PLAN REQUIRED COMPONENTS CHECKLIST

To ensure all required components are included, "X" mark the far-right column boxes. Enclose a copy of the checklist with your Area Plan; *submit this form with the Area Plan due 5-1-24 only*

Section	Four-Year Area Plan Components	4-Year Plan
TL	Transmittal Letter – *Can be electronically signed and verified, email signed letter or pdf copy of original signed letter can be sent to areaplan@aging.ca.gov*	☒
1	Mission Statement	☒
2	Description of the Planning and Service Area (PSA)	☒
3	Description of the Area Agency on Aging (AAA)	☒
4	Planning Process & Establishing Priorities & Identification of Priorities	☒
5	Needs Assessment & Targeting	☒
6	Priority Services & Public Hearings	☒
7	Area Plan Narrative Goals and Objectives:	☒
7	Title IIIB Funded Program Development (PD) Objectives	☒
7	Title IIIB Funded Coordination (C) Objectives	☒
7	System-Building and Administrative Goals & Objectives	☒
8	Service Unit Plan (SUP) and Long-Term Care Ombudsman Outcomes	☒
9	Senior Centers and Focal Points	☒
10	Title III E Family Caregiver Support Program	☒
11	Legal Assistance	☒
12	Disaster Preparedness	☒
13	Notice of Intent to Provide Direct Services	☒
14	Request for Approval to Provide Direct Services	☒
15	Governing Board	☒
16	Advisory Council	☒
17	Multipurpose Senior Center Acquisition or Construction Compliance Review	☒
18	Organization Chart	☒
19	Assurances	☒

PSA 4

AREA PLAN UPDATE (APU) CHECKLIST

Check one: ☒ **FY25-26** ☐ **FY 26-27** ☐ **FY 27-28**

Use for APUs only

AP Guidance Section	APU Components (Update/Submit A through G) ANNUALLY:	Check if Included
n/a	**A) Transmittal Letter-** *(submit by email with electronic or scanned original signatures)*	☐
n/a	**B) APU-** *(submit entire APU electronically only)*	☐
2, 3, or 4	**C)** Estimate- of the number of lower income minority older individuals in the PSA for the coming year	☐
6	**D)** Priority Services and Public Hearings	☐
n/a	**E)** Annual Budget, should match Org. Chart	☐
8	**F)** Service Unit Plan (SUP) and LTC Ombudsman Program Outcomes	☐
11	**G)** Legal Assistance	☐

AP Guidance Section	APU Components (To be attached to the APU) ➢ ***Update/Submit the following only if there has been a CHANGE to the section that was not included in the 2024-2028 Area Plan:***	Mark C for Changed	Mark N/C for Not Changed
1	Mission Statement	☐	☒
5	Needs Assessment/Targeting	☒	☐
7	AP Narrative Objectives:	☒	☐
7	• System-Building and Administration	☒	☐
7	• Title IIIB-Funded Programs	☐	☒
7	• Title IIIB-Program Development/Coordination (PD or C)	☐	☒
7	• Title IIIC-1 or Title IIIC-2	☐	☒
7	• Title IIID-Evidence Based	☐	☒
7	• HICAP Program	☐	☒
9	Senior Centers and Focal Points	☐	☒
10	Title IIIE-Family Caregiver Support Program	☐	☒
12	Disaster Preparedness	☐	☒
13	Notice of Intent to Provide Direct Services	☐	☒
14	Request for Approval to Provide Direct Services	☐	☒
15	Governing Board	☐	☒
16	Advisory Council	☐	☒
17	Multipurpose Senior Center Acquisition or Construction	☐	☒
18	Organizational Chart(s) (Must match Budget)	☐	☒
19	Assurances	☐	☒

TRANSMITTAL LETTER
2024-2028 Four Year Area Plan/ Annual Update
Check one: ☐ **FY 24-25** ☒ **FY 25-26** ☐ **FY 26-27** ☐ **FY 27-28**

AAA Name: Area 4 Agency on Aging (dba Agency on Aging Area 4) **PSA 4**

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

1. Supervisor Sharon Dryden
(Type Name)

_____ 4/11/25
Signature: Governing Board Chair [1] Date

2. Catheryn Koss
(Type Name)

_____ 4/11/25
Signature: Advisory Council Chair Date

3. Pamela Miller
(Type Name)

_____ 4/11/25
Signature: Area Agency Director Date

A copy with digital signatures will be sent to CDA under separate cover.

[1] Original signatures or electronic signatures are required.

SECTION 1. MISSION STATEMENT

The mission of the California Department of Aging is:

> "To provide leadership in addressing issues that relate to older Californians; to develop community-based systems of care that provide services which support independence within California's interdependent society, and which protect the quality of life of older persons and persons with functional impairments; and to promote citizen involvement in the planning and delivery of services."

The mission of Agency on Aging Area 4 is:

> **Enriching the lives of older adults and people with disabilities by FOSTERING networks of support, ADVOCATING for individual choice, COLLABORATING with others, ENSURING equity, and STRIVING to do so with conviction.**

SECTION 2. DESCRIPTION OF THE PLANNING AND SERVICE AREA (PSA)

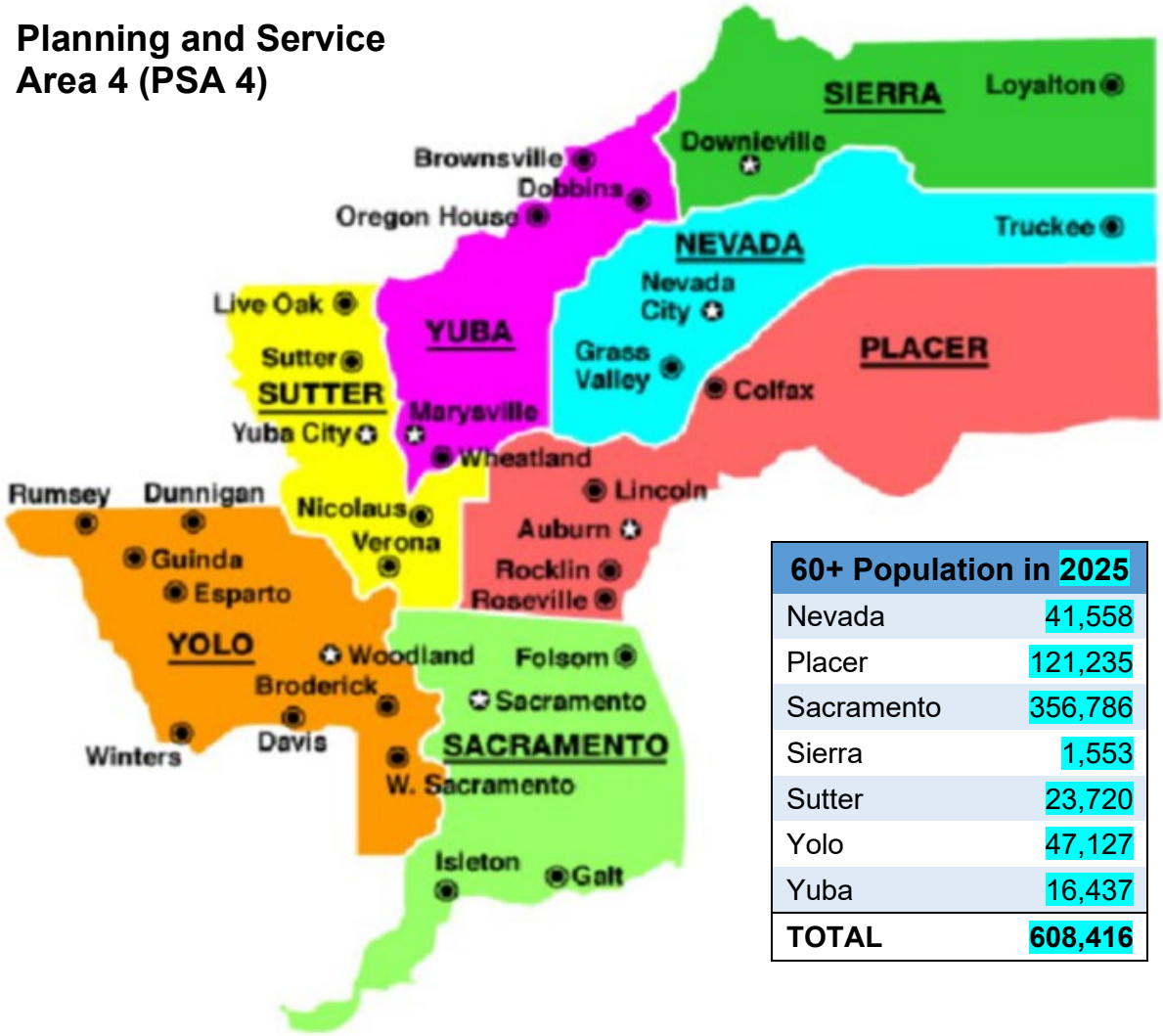
Physical Characteristics

With its main office located just 5 miles from the State Capitol, Agency on Aging Area 4 (AAA4) is one of thirty-three Area Agencies on Aging (AAAs) in California. Area 4 refers to Planning and Service Area 4 (PSA 4), which includes seven counties in Northern California: Nevada, Placer, Sacramento, Sierra, Sutter, Yolo and Yuba. While eleven other AAAs in the state have multi-county service areas, none contain as many counties as AAA4.

The growing greater Sacramento region overlaps two neighboring counties (Yolo and Placer) and contains more than a dozen cities. This metropolitan area extends to Folsom and Lincoln in the east, North Highlands in the north, West Sacramento in the west and Elk Grove in the South.

In addition, PSA 4 includes several distinct micropolitan communities outside the greater Sacramento region, including Auburn, Truckee, and Grass Valley/Nevada City to the east; the Yuba City/Marysville area to the north; Winters, Davis and Woodland to the west, and Galt to the south. Finally, there are dozens of smaller townships and unincorporated areas scattered across the service area. In fact, there are more seniors living in remote rural areas in Area 4 than in any other PSA in California (over 40,000).

Planning and Service Area 4 (PSA 4)



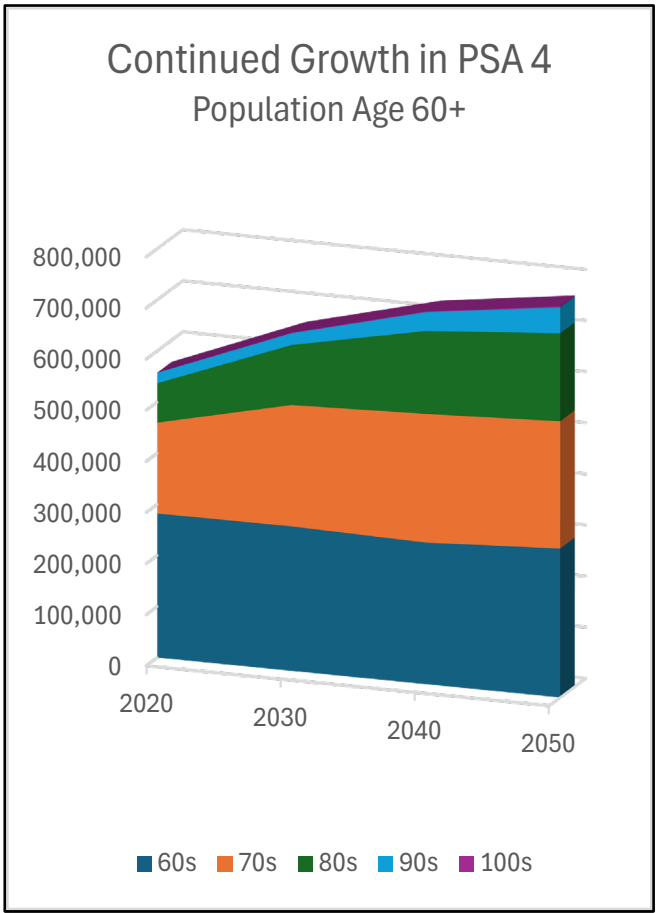
60+ Population in 2025	
Nevada	41,558
Placer	121,235
Sacramento	356,786
Sierra	1,553
Sutter	23,720
Yolo	47,127
Yuba	16,437
TOTAL	**608,416**

Covering 6,532 square miles, AAA4 is one of the largest PSAs in the state. It is also among the most geographically varied. Sacramento, Sutter, Yolo, Western Placer and Western Yuba counties are fertile lowlands where agriculture thrives; Nevada, Eastern Placer and Eastern Yuba counties are in the foothills and mountainous areas of the Sierra-Nevada Mountain Range. The western half of Sierra County is mountainous while the eastern half is high desert.

With varied geography comes varied weather patterns. In the summer, wildfires often threaten homes in the Sierras, and extreme heat is a concern for elderly people in the valley, particularly those unable to afford air conditioning. In the winter, lowland areas are subject to flooding, dense patchy fog can be a hazard in the foothills, and heavy snow in the high country makes roads impassable at times. The extreme geographic isolation of Downieville and Loyalton in Sierra County and of North San Juan in Nevada County makes access a challenge regardless of weather.

Demographic Characteristics

For the first time in history, there are now more older people (age 60+) than children (under 18) residing in our service area. We continue to witness a pronounced increase in the Older Adult population. The youngest Baby Boomers are celebrating their 60th birthdays this year (2024) while the oldest are turning 78. Thus the "arrival" of their successors (Generation X) is the primary driver of growth in the chart below. By 2050, some 765,152 people age 60+ are projected to be living in our seven-county region – an increase of 207,599 over three decades at an average pace of 576 people/month. In contrast, the number of children is expected to fall from 549,089 to 546,831 over that same 30-year timeframe as birthrates gradually decline.

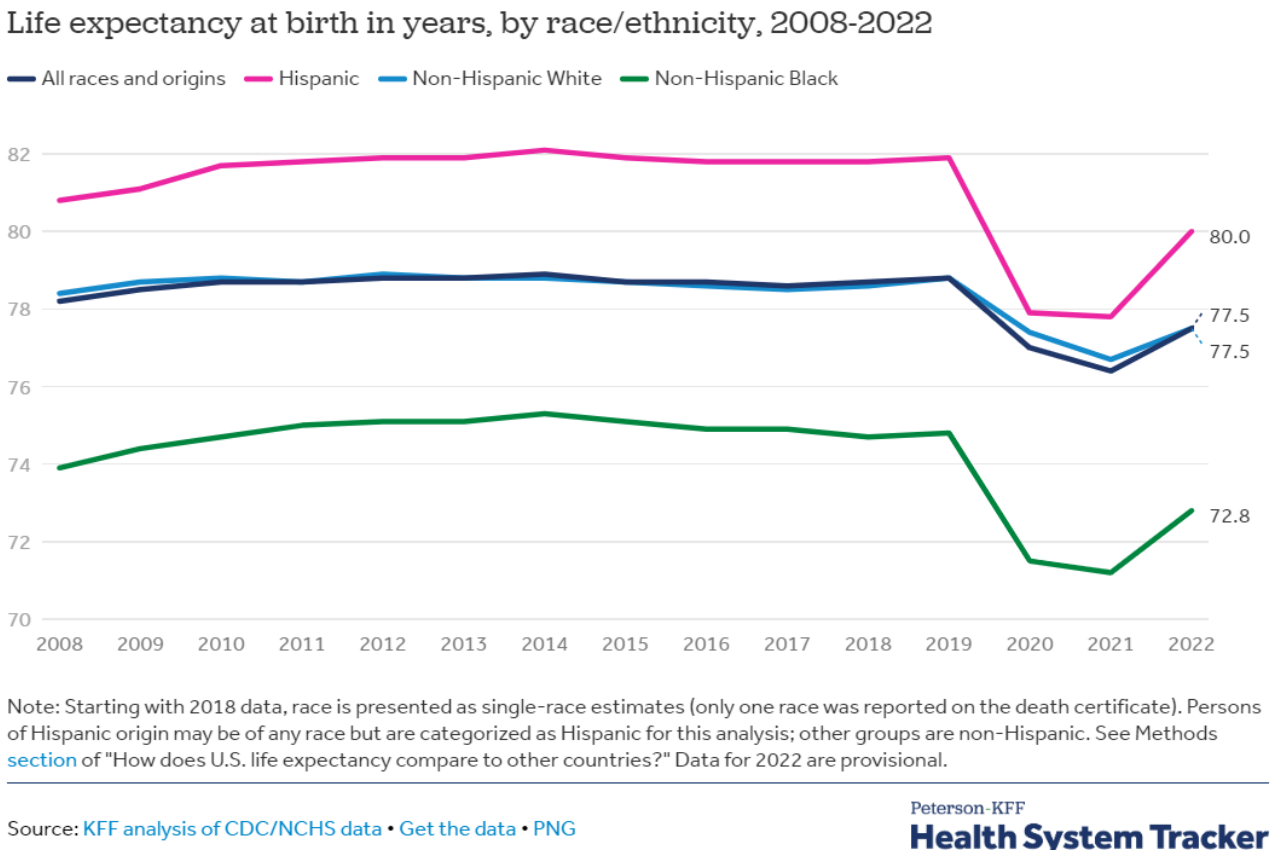


Compiled from CA Department of Finance, Population Projections P-2B, Released 2023

This means the *proportion* of older people will also continue rising. About 24% of the 2,495,436 people living in our service area today (2024) are age 60 or older; by 2050, the ratio is projected to be 27%. As a result, senior citizens will likely play an even greater role in every aspect of society.

The eldest group of older residents is of particular concern, for they utilize a sizeable share of Long-Term Services & Supports (LTSS). Here, the 2020 to 2050 projections are for exponential growth that increases among the oldest old on the order of: a 124% increase for people in their 80s, a 147% increase for folks in their 90s, and nearly a 5-fold increase in those age 100+ (from 414 local centenarians to over 2,000).

These remarkable numbers can be explained in a single word: **longevity**. Until the COVID-19 pandemic (2020), tremendous advancements in modern medicine had caused life expectancy at birth to increase by 12.1 years since the start of the Baby Boom in 1946 (from 66.7 to 78.8). The pandemic was particularly devastating for frail and elderly Americans. Yet across age groups, Blacks and Hispanics were more than three times as likely to die from COVID as their White peers, as shown in the graph below.



The entire age 60+ population for the State of California in 2023 is projected to be 9,146,021 people. Thus PSA 4 is home to 6.2% of all older Californians. Table B below shows how AAA4 compares with the rest of the State with regard to several key demographic variables. The percentages are about the same when it comes to men and women, people below 125% of poverty, unemployment, institutionalization, self-care disabilities and raising a grandchild.

There are significantly smaller proportions of ethnic seniors and non English-speaking seniors in PSA 4 than there are in California as a whole. On the other hand, AAA4 continues do have a larger proportion of isolated rural seniors (more than any other PSA, as mentioned previously) and veterans. The latter is to be expected given that McClellan Park and Mather Field in Sacramento County are former military bases; also, a number of veterans who served at Beale Air Force Base in rural Yuba County have settled in the area.

According to the Centers for Disease Control (CDC), 53 million Americans were caregivers for a spouse, elderly parent or relative, or special-needs child in 2021. Assuming a similar ratio exists in our State and region, California should have about 6.2 million such family caregivers, and PSA 4 should have about 400,000. The CDC classifies family caregiving as a public health issue, saying:

Caregiving can affect the caregiver's life in a myriad of ways including his/her ability to work, engage in social interactions and relationships, and maintain good physical and mental health.[1] *Caregiving also can bring great satisfaction and strengthen relationships, thus enhancing the caregivers' quality of life. As the population ages and disability worsens, it is critical to understand the physical and mental health burden on caregivers, the range of tasks caregivers may perform, and the societal and economic impacts of long-term chronic diseases or disability.*[2]

https://www.cdc.gov/aging/caregiving/caregiver-brief.html#:~:text=22.3%25%20of%20adults%20reported%20providing,in%20five%20(18.9%25)%20men.

Table B: Characteristics of People Age 60+ in 2023

	PSA 4 Population	PSA 4 Percentage	California Percentage
Total[1]	**569,761**	**100.0%**	**--------**
Male[2]	268,283	47.1%	46.6%
Female[2]	301,478	52.9%	53.4%
Ethnic Minority[1]	195,814	34.4%	47.8%
Non English-Speaking[1]	17,290	3.0%	4.9%
Below 125% of Poverty[1]	68,690	12.1%	12.2%
Lives in an Isolated Rural Area[1]	41,636	7.3%	4.8%
Lives Alone[1]	114,990	20.2%	17.1%
In the Labor Force[3]	155,545	27.3%	30.7%
Seeking Employment[3]	7,407	1.3%	1.6%
Institutionalized[3]	6,267	1.1%	1.4%
Has Any Disability[3]	169,789	29.8%	28.6%
Has a Self-Care Disability[3]	41,593	7.3%	7.7%
Raising a Grandchild[3]	7,407	1.3%	1.5%
Veteran[3]	80,336	14.1%	11.0%

[1] *Data taken from the 2023 California Department of Aging Population Projections by PSA*
[2] California Department of Finance Population Projections, P-2C, released 2023
[3] Imputed from *2017-21 American Community Survey, Special Tabulation on Aging (5-year estimates)*

Unique Resources and Constraints

AAA4 benefits from its proximity to the State Capitol. Not only can Agency staff, Advisory Council and Governing Board members easily attend important legislative hearings on aging issues, but the offices of statewide representatives from numerous agencies, departments, commissions and other groups are accessible as well.

As a direct result of being near the Capitol, there are a large number of very highly educated people who have retired from careers in government and lobbying. The Agency also benefits directly from higher education by partnering with UC Davis, CSU Sacramento and American River College in the form of special projects and student internships.

AAA4 is unique in that it includes more counties than any other PSA in the state. This truth brings benefits as well as challenges. When the interests of individual counties coincide, strong alliances can be made. When those interests conflict, energies and resources may become divided.

The regional diversity of the service area makes it an ideal testing ground for new programs and services; if something works in ethnically diverse downtown Sacramento, in isolated small-town Sierra County and everywhere in-between, then it ought to work just about anywhere in the State. At the same time, resources must be spread thin if services are to be provided to all seven counties (and to the individual communities within those counties) in an equitable way. Serving frail elders who live in remote rural areas poses the greatest challenge; providing home-based programs far from town is often impossible, and bringing people into town for services is often impractical.

The Service System (via the Area Agency on Aging)

AAA4 is part of the national Aging Servies Network which first began providing Older Americans Act programs in 1973. This network (service system) varies somewhat across our seven counties. Sacramento offers our most comprehensive example as it is our largest County. The diagram on the following page illustrates the federal and state-funded programs that are expected to be available via AAA4 in SFY 2024-25. In every case, the programs shown are available to the client/consumer at no cost to them. With the exception of CalAIM, these are NOT welfare programs, they are social programs open to people who need them, regardless of assets or income. In most cases, the only eligibility requirements are that individuals live in the service area and be 60 years of age or older. At the same time, Older Americans Act programs do have prioritization criteria; where waiting lists exist, those with the greatest need are to be served first.

Other Service Delivery Systems

Area Agencies on Aging are, of course, just one of many entities providing services to older adults and people with disabilities. All seven Counties administer Adult Protective Services (APS), In-Home Supportive Services (IHSS) and Public Assistance (e.g. CalFresh, MediCal and General Assistance). Many Counties also offer programs through Behavioral Health, Emergency Services, Employment, Library, Public Health, Transportation and Veterans departments/branches. Programs administered by the State of California via local providers include Community-Based Adult Services (CBAS), Caregiver Resource Centers (CRCs), Independent Living Centers (ILCs), Multipurpose Senior Services Programs (MSSP), Program for the All-Inclusive Care of the Elderly (PACE), Regional Centers and the Senior Community Service Employment Program (SCSEP).

In the private sector, well-known fee-for-service offerings include Adult Day Care (ADC) & Adult Day Health Care (ADHC), Home Care Agencies, Long-Term Care Planning, Meal Delivery, Medical Transportation, Placement Agencies, Residential Care Facilities for the Elderly (RCFEs), Skilled Nursing Facilities (SNFs).

Challenges and Successes in Local System Development

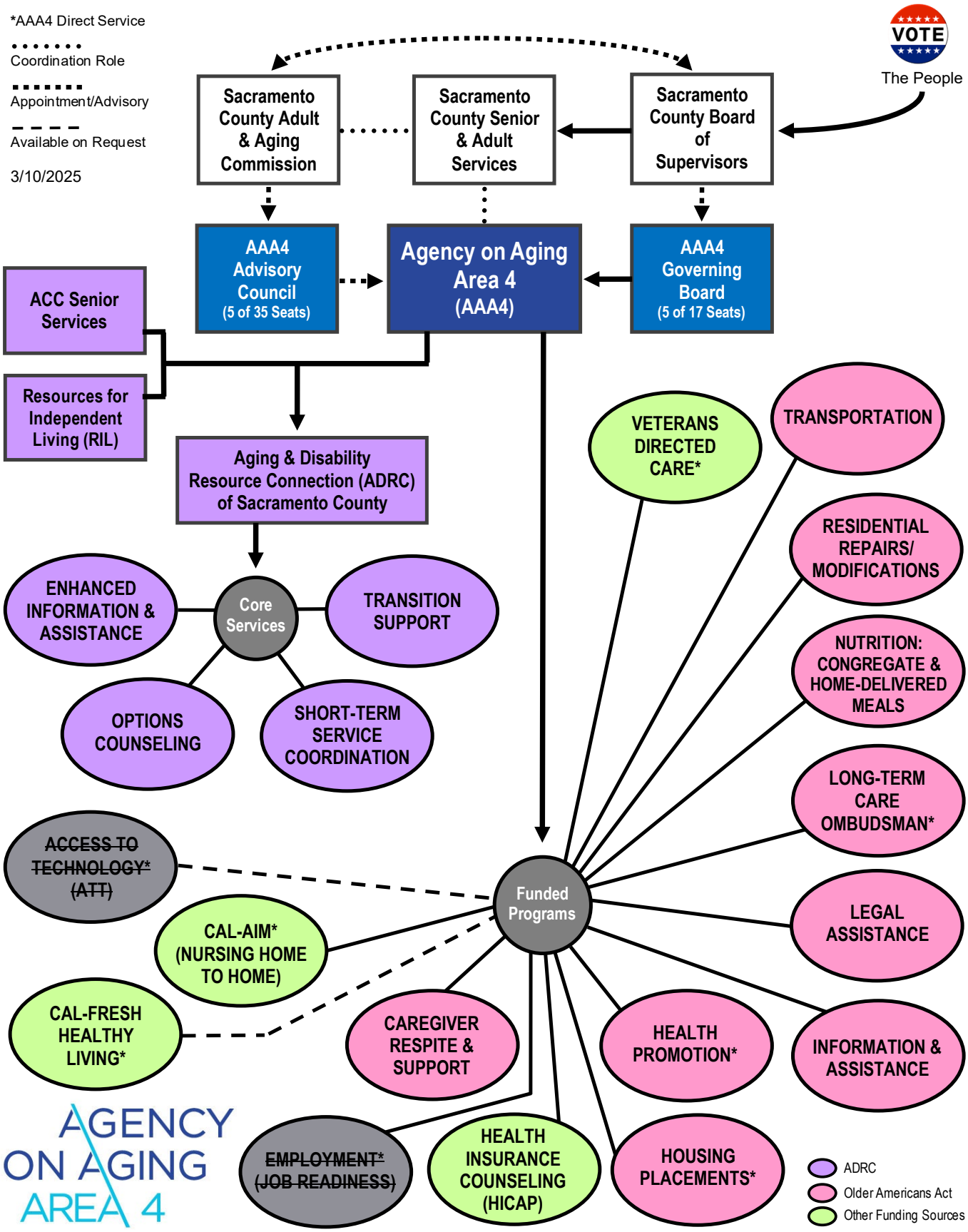
Our most fundamental challenge is that the Aging Services Network itself is extremely fragmented, both by design (in the form of inflexible funding silos) and by the application of that design across interwoven layers of federal, state, county and municipal jurisdictions. According to the Administration for Aging (ACL), “individuals trying to access LTSS frequently find themselves confronted with a bewildering maze of organizations and bureaucratic requirements at a time of vulnerability or crisis which can result in people making decisions based on incomplete, and sometimes inaccurate, information about their options.”

In our state, the complexity of public supports and services is particularly convoluted, as evidenced in a number of studies on the subject, including the Senate Select Committee on Aging and Long Term Care’s 2015 report entitled *A Shattered System: Reforming Long-Term Care in California*.

Typically, when folks need help they don’t know free help exists. This is largely because the free options are publicly funded services that don’t have to publicize to ensure a steady stream of clientele. Even those programs that do have a marketing budget (e.g., HICAP) see their efforts dwarfed by the omnipresent advertising of private sector stakeholders. People are using the resources they can see and they can afford.

The best available strategy to raise the visibility and the collective impact of all free-help options is to link them together through a local No Wrong Door approach that is supported by the State and by the federal government. An ADRC provides a proven mechanism to build such a network.

Aging Services Network: Sacramento County



SECTION 3. DESCRIPTION OF THE AREA AGENCY ON AGING (AAA)

Agency on Aging Area 4 differs from many other AAAs in that it is a stand-alone Joint Powers Authority with nonprofit status; it is not positioned inside a county department. Consequently, AAA4 enjoys greater flexibility in its operations, attracts a different type of employee and is viewed somewhat differently in the community. At the same time, the agency's joint powers status ties it directly to the county supervisors, adding strength and credibility while also assuring organizational accountability.

As noted in Section 2, Agency on Aging / Area 4 encompasses a large segment of California that is both geographically and socially diverse. It is a collection of sparsely, moderately and heavily populated counties, but each one has near equal voice in the governance of the whole. In this regard, AAA4 essentially acts as an alliance between seven independent jurisdictions. While the Department of Aging may see us as a singular homogenous entity, we see ourselves as a compilation of seven individual counties.

Our Leadership Role

AAA4 was established in 1973 as one of the six original agencies on aging in the state of California. Ten years later the agency was restructured as a Joint Powers Authority (JPA) and subsequently received non-profit status. AAA4 has a 17-member Governing Board composed of County Boards of Supervisors and their appointees representing their respective counties of Nevada, Placer, Sacramento, Sierra, Sutter, Yolo and Yuba. There is also a 35-member Advisory Council with representatives from each county. They are appointed by County Boards of Supervisors and commissions on aging; there are 6 member-at-large seats which are filled through selection by the Council's Executive Committee.

The Governing Board sets agency policy and is responsible for ensuring that AAA4 fulfills the mandates of the Older Americans and Older Californians Acts. The Advisory Council advises the Board on matters relating to the planning, delivery and monitoring of services for seniors and caregivers. The Council also serves as an independent, non-partisan advocacy body on behalf of all older persons residing in the planning and service area.

Standing Governing Board committees include audit/finance, personnel, grants review and joint program evaluation. Standing Advisory Council committees include area plan, diversity and legislative. Ad hoc and task force committees are appointed as needed.

The AAA4 office is located in Sacramento and is under the direction of the Executive Director and Assistant Director with regular input from Administrators for: ADRC & Case Management, Contracted Services & Yuba-Sutter Nutrition, Fiscal, Digital Connections & Health Promotion & Ombudsman, Human Resources, Information Technology and Operations. Together, this nine-member group is known as the Leadership Team.

Toward Community-Based Systems of Care

The overarching goal of AAA4 is to work toward comprehensive and coordinated systems of home and community-based care for older adults throughout PSA 4. Such systems should offer a range of services available to everyone, regardless of income. Older people should receive individualized assistance and referrals to other agencies where appropriate. Systems of care should be coordinated to ensure that all available public and private resources are maximized and that services are easily accessible through visible points of contact. AAAs are directed to provide leadership in this area, facilitating collaboration among key stakeholders to meet the particular needs of local communities.

PSA 4 does not have just one community; it has many. And, each one is geographically and/or politically distinct and separate from the others. With the exception of Sierra, each county has its own commission on aging or equivalent body which advises the Board of Supervisors on senior issues. These commissions provide a vital link between AAA4 and the concerns of older people and caregivers at the local level. These organizations can be effective advocates for coordinated systems of care.

In cooperation with local commissions on aging, AAA4 designates "focal points" within each county. Focal points are the hubs of activity; they are the major senior or community centers where older adults can access programs and services, including core services (i.e., information and assistance, transportation, and nutrition). All AAA4-funded providers are expected to coordinate with the focal points in their area, and some have their offices and programs on-site.

AAA4 currently contracts with four organizations to provide Senior Information and Assistance (I&A) region-wide. Face-to-face assistance is primarily available in Auburn, Grass Valley, Sacramento and Yuba City. Local Senior I&A programs are intended to be single entry points not only for people 60 and older but for anyone with questions about senior services. The I&A programs also maintain directories which raise consumer awareness and help other agencies make appropriate referrals.

A Constellation of ADRCs

As stated at the end of Section 3, the best available strategy to raise the visibility and the collective impact of all free-help options is to link them together through a local No Wrong Door approach that is supported by the State and by the federal government. AAA4 has five designated Aging & Disability Resource Connections (ADRCs) that serve this purpose.

A successful ADRC makes a resource-centered system function as though it were a person-centered system, and in doing so, it provides a critical lifeline for the largest segment of the older population – those who don't qualify for "free" case management (via MSSP) and those who can't afford to pay for geriatric care management out of pocket.

In collaboration with all three local Independent Living Centers and other Core Partners, AAA4 is able to offer Enhanced Information & Assistance, Person Centered Options Counseling, Short-Term Service Coordination and Transition Support in six of our seven counties (see additional details in Section 7: Goals and Objectives).

- ADRC of Nevada County
- ADRC of Placer County
- ADRC of Sacramento County
- ADRC of Yuba-Sutter Counties
- ADRC of Yolo County

County Connections

For many years, the Agency has effectively utilized County Workgroups to gather local input on needs, priorities and funding recommendations. These Workgroups are ad hoc sub-committees led by AAA4 Board Members (County Supervisors of their appointees) who determine the frequency and duration of the meetings and who decide whether to invite Funded Partners and other stakeholders, such as County Staff. An Agency staff member is assigned to each County Commission on Aging to help facilitate ongoing coordination of efforts and to share best practices. Currently, AAA4 is also a subcontractor of Placer, Sacramento and Yolo counties for the Access to Technology services (ATT) program.

The Health Care Sector

AAA4 aspires to leverage its existing network of service providers to become a Community Care Hub – an organization that acts as an intermediary between health payors and community-based organizations. The common goal is to reduce Emergency Room visits, hospital readmissions and hospital stays. AAA4 offers several evidence-based health promotion programs aimed at teaching folks how to prevent serious injuries due to falls (a leading cause of trauma center visits among older adults) and how to manage chronic conditions such as diabetes. Help is also available for people being discharged from the hospital through the Nevada, Placer, Yolo and Yuba-Sutter ADRC Care Transitions service. However, funding for these efforts is very limited and better coordination with local health systems is needed to get support to at-risk people when they need it most.

Under contract with Anthem Blue Cross, AAA4 is poised to begin providing CalAIM Community Supports in the summer of 2024. This Nursing Facility Transition to Home program will work to transition higher functioning clients back to a home environment. AAA4's costs will be reimbursed on a per member per month basis. This proof-of-concept project is intended to establish a foundation from which additional service lines can be developed in the future, not only via CalAIM but through Medicare Advantage Plans as well as private insurance carriers.

A Strategic Plan for our Region

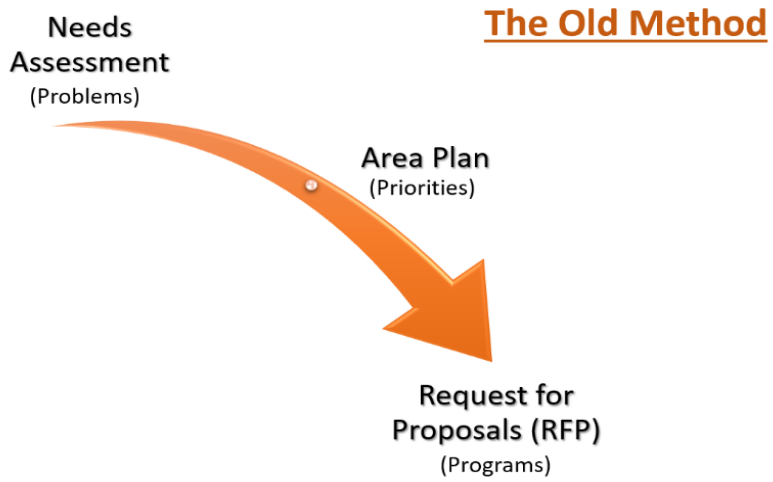
In 2023 AAA4's Governing Board developed and adopted a three-year Strategic Plan to chart the course of the Agency as it emerges from the COVID-19 pandemic while also bracing for a surge in demand for Long-Term Services and Supports (LTSS) caused by the first members of Baby Boom generation turning 80 years old. The goals of this 2024-2027 Strategic Plan are:

1) Strengthen our long-term fiscal sustainability through revenue-generating partnerships.
2) Communicate the added value of strategic partnerships to attract new partnerships.
3) Advance the intersectional principles of Diversity, Equity, Inclusion and Accessibility (DEIA).
4) Implement evidence-based evaluation methods to increase efficiency and effectiveness of service delivery.

SECTION 4. PLANNING PROCESS & ESTABLISHING PRIORITIES

The Three-Step Planning Process

All Area Agencies on Aging (AAAs) employ a planning process that involves three major elements. First, a comprehensive **Needs Assessment** is done to better understand the challenges older adults are experiencing relative to their ability to maintain independence with safety, health and dignity. Second, each AAA determines how best to utilize its resources to address the needs and challenges that exist, then writes an **Area Plan** which reflects its goals and priorities and describes the specific ways it intends to advance them over the course of a multi-year planning cycle. Third, the AAA conducts a procurement process (usually in the form of a **Request for Proposals** or RFP) to establish contracts with suitable public or private entities to deliver any Older Americans Act services that will not be provided directly by the AAA itself.



This three-step process is inherently reductionist because no matter how broad the Needs Assessment may be, the subsequent Area Plan splinters the results into OAA funding silos in preparation for further refinement into pre-defined service categories for inclusion in the RFP. As a result, the Agency largely ends up funding the same organizations to offer the same programs year after year, cycle after cycle, even as real peoples' problems deepen and spread.

In January of 2021, the Governor's Office released the Master Plan for Aging (MPA) which is intended to serve as "a 'blueprint' for state government, local government, the private sector, and philanthropy to prepare the state for the coming demographic changes and continue California's leadership in aging, disability, and equity." (source: https://mpa.aging.ca.gov/)

The Master Plan makes clear that no single organization (including the State itself) is capable of "solving" the systemic challenges associated with Housing, Health, Inclusion & Equity, Caregiving and Affording Aging. However, organizations working together deliberately and strategically are capable of chipping away at major barriers in ways that have meaningful impacts on individuals and families.

The MPA has given us newfound optimism. By focusing on solutions, seeking out strategic opportunities and actively helping our Funded Partners develop the resources they need to be fiscal sustainable, we believe we can embrace an expansionist approach that will work to the benefit of all parties.

Following the Local Playbook

The Master Plan for Aging is primarily directed at statewide initiatives; a companion document called the Local Playbook is meant to help guide local advocates and jurisdictions. The Playbook contains these seven "plays" or steps:

1. Engage Your Local Leaders
   "Collaborative, and cross-sector partnerships are the key to implementing successful projects, policies, and initiatives."
   a. Beginning in December 2021, AAA4's Strengths Assessment Project Design Team first consulted with representatives from AARP California, the Alzheimer's Association of Northern California, and the California Foundation for Independent Living Centers (CFILC).
   b. In February of 2022, meetings were then held with key Human Services staff from all seven counties and with the Executive Directors of the three Independent Living Centers: FREED, PIRS & RIL.
2. Explore Local Data
   "Meaningful metrics are the foundation of project planning and evaluation."
   a. The AARP Livability Index provided useful, high-level county data on the various "domains." However, livability scores are difficult to change, so they were not deemed to be practical metrics for AAA4.
   b. AAA4 has been conducting needs assessments since 1973. The unmet needs of older adults and family caregivers are well-known and have not varied widely over time. Thus a decision was made to focus on actionable data, meaning data that directly supports the selection, implementation and evaluation of successful service models.
3. Review Local Age-Friendly Models
   "Before developing your own plan, it's important to get to know your own community, what work has already been done there, and which priorities have been identified."
   a. One of the defining features of AAA4's Strengths Assessment has been engaging the full Advisory Council & Governing Board in the review process by organizing guest presentations on all five goals. Beginning in March 2022 and concluding in July 2023, numerous pre-existing programs and initiatives that have demonstrated their success were featured. Topics were restricted to local efforts being spearheaded by AAA4 itself, by one of the seven Counties, and by one of the independent living centers. The aspirational goal was to spark discussion about how the impact of these successful programs and initiatives could be further enhanced and/or replicated elsewhere.
4. Select Your MPA Initiatives
   "Now that you've determined the primary issues and areas of opportunity in your community, narrow down your project's focus using the MPA's Five Goals and 23 Strategies."
   a. Beginning in August 2023, County Workgroups met to select a project of focus for SFY 2024-25. The results were as follows:
      i. Nevada County: Commit funds to the development of a volunteer-based door-to-door transportation program.
      ii. Placer County: Explore development of an Adult Day Care program.
      iii. Sacramento County: Develop screening questions to identify individuals at risk of losing their housing for the purposes of early intervention and diversion.

iv. Sierra County: Establish a service provider collaborative for local organizations that serve older adults.
v. Yolo County: As needed, facilitate coordination of transportation for individuals at the time they are referred to community services.

5. Build Your Action Plan [for implementation]
   "Once you've determined your project's focus, it's important to develop a clear scope of work with goals, objectives, strategies, and evaluation measures."
   a. This 2024-28 Area Plan contains seven sets of goals: one for each County (except for Yuba & Sutter which are combined), and one for Planning and Service Area 4 (PSA 4) as a region. Within each of these sets, we have adopted the 5 bold goals from the Master Plan for Aging.
6. Evaluating Your Age-Friendly Community Program
   a. Evaluation should be integrated into the annual Area Plan Update process.
7. Stay Connected
   a. Play #7 encourages local communities to share their MPA successes with the Governor's Office and with the California Department of Aging.

The County of Nevada has led the way by producing and publishing its own Aging and Disabilities Playbook. Placer County has completed a Needs Assessment based on the Master Plan for Aging. Sacramento County along with Yuba-Sutter have received Local Aging & Disability Action Planning (LADAP) grants to develop Local Playbooks; that work is currently (2024) in progress. Yolo County has received a Scan Foundation grant to support similar activities.

In June of 2024, AAA4 will begin work on the next major Request for Proposals (RFP) for services with a start date of July 1, 2025. This is when decisions are made about how much total OAA funding each County will receive and, within each County, which OAA services will be funded at what amounts. Ahead of these County Funding Level decisions, standing precedent calls upon the Agency to utilize ad hoc Workgroups to complete the following tasks for each of the seven Counties:

- Come to an agreement on minimum funding levels for the "core" OAA services (i.e., Congregate Meals, Home-Delivered Meals, Legal Services, Senior Information & Assistance and Transportation).
- If applicable, recommend how remaining OAA dollars should be disbursed, based on Area Plan Priorities and local considerations. Remaining dollars could be used to supplement core services and/or to fund optional OAA services (e.g., Caregiver Respite, Employment, Evidence-Based Health Promotion, Minor Home Modifications, etc.).
- Identify areas where focused resource development is necessary to fund current or future OAA services at levels adequate to meet existing or emerging community needs.

Establishing Priorities

For an Area Agency on Aging (AAA), the business of setting local priorities is both a directive and a prerogative that occurs within the constraints of federal, state and municipal policies and budgets. Ostensibly, the major goals contained in an Area Plan embody the AAA's priorities. Yet, a look at the associated expenditures might give an observer a far different notion of what the Agency considers most important.

By far, the greatest expenditure of dollars in PSA 4 is for the Elderly Nutrition Program with the primary benefactors being folks who reside in the Sacramento metropolitan area, including the majority of Sacramento County and the cities of West Sacramento (Yolo County) and Roseville/Rocklin/Granite Bay (Placer County). Nutrition in general and Meals on Wheels in particular are fiscal priorities for the federal and state government, and public dollars are allocated based on the size of senior populations. So although its genesis was hardly local, AAA4 certainly embraces Meals on Wheels (home-delivered meals) as the centerpiece of our operation. We channel additional OAA dollars there, and we consider it a "critical" service that should always be available to those in dire circumstances, despite a history of waiting lists in most areas.

AAA4 continues to administer the Yuba-Sutter Meals on Wheels program as well as the "Dine Around Town" restaurant voucher program in place of traditional congregate meal sites. RFP Applicants are now given the option to propose similar approaches, and new meal voucher models are being explored in extreme rural areas. In addition, the Governing Board has established **food security** as a priority issue for older adults in our region. AAA4 will be working both with our Funded Partners and with the wider community to address the growing epidemic of senior hunger.

Due to the alarming explosion of homelessness among older adults, **housing security** has risen to priority status as well. Substantial time and energy has been invested in building relationships with local housing agencies. We have called attention to unique challenges that come with serving an aging clientele and to first-time homelessness for those age 50+. We have worked with these new partner organizations to find more effective ways to address folks in the most dire circumstances while also looking "upstream" to curb underlying causes of homelessness.

Mitigating Factors

Local priorities cannot be set without some fiscal context. To ensure an equitable distribution of funds among the seven counties in PSA 4, we apply the Intrastate Funding Formula (IFF) – the same formula used by the California Department of Aging (CDA) to distribute funds to the AAAs statewide. This "parity" system is based upon Census figures, and it makes special allowances for ethnic, low-income and rural populations. These factors are weighted as follows:

Weight	Factor
1.0	Non-Minority 60+ Population
2.0	Minority 60+ Population
2.0	Low Income 60+ Population
1.5	Geographically Isolated 60+ Population

When a county's population (especially its minority and low-income population) increases in relation to the others, there is a corresponding increase in service dollars. Parity is recalculated periodically as new population figures become available. AAA4 makes efforts to approximate parity during the multi-year contract cycle as fluctuations occur, but we generally do not reduce grants that have already been awarded. Modest increases in funds often provide some latitude. When more latitude is necessary, larger "corrections" between county funding levels are made during the next major RFP process.

Well before the final funding forecast is known, AAA4 can begin to consider program priorities by essentially "matching" local needs with OAA Service Categories intended to meet those needs. In the end, the central question in each county is: Where will investments of limited resources yield the best results possible for older adults and their caregivers? The Agency's Grants Review Committee will begin this work in the Summer of 2024, just ahead of the 2025-29 contract cycle.

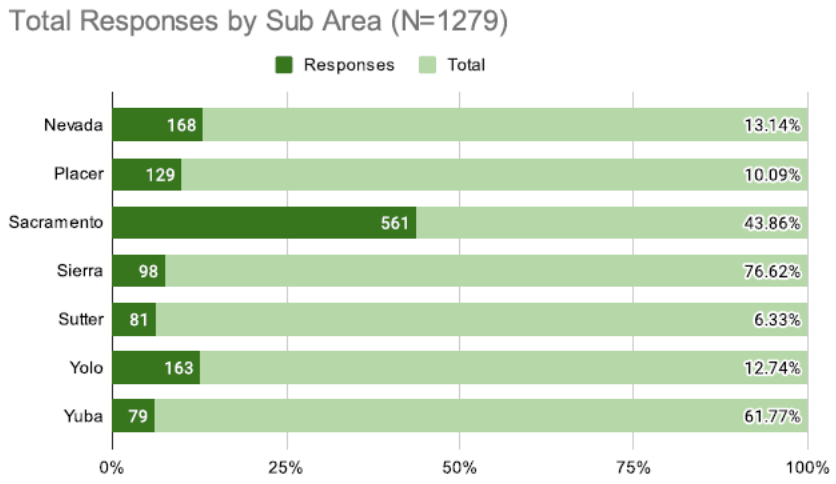
SECTION 5. NEEDS ASSESSMENT & TARGETING

Measuring Current Needs

Based upon several different methods, AAA4 has concluded Older Adults are experiencing a number of challenges relative to their ability to maintain independence with safety, health and dignity.

The 2023 Community Assessment Survey of Older Adults (CASOA)

In 2023 the California Department of Aging contracted with a research company (POLCO) to conduct a survey of older adults residing in all 58 counties. Initially, POLCO mailed postcards to a randomly generated list of households with at least one occupant age 55 or older. Individuals could complete the survey online or they could complete a paper version and return it with a postage-paid envelope. In PSA 4, 11,816 households were contacted and 867 surveys were completed. To increase the response rate, the online version of the survey was then opened to the public; this yielded an additional 412 responses for a total sample size of 1,279. Response rates varied widely by County, from 76% in Sierra to just 6% is Sutter.



The reliability of the survey results varies by County as well. In general, a sample size of 380 is needed to obtain a 5% margin of error (95% confidence interval) among a population of 20,000 people or more. In Sacramento County where 561 surveys were obtained, the margin of error is about 4%; however, in Sutter County where only 81 surveys were received, the margin of error is closer to 11%. The population of Sierra County is substantially smaller than that of the other six counties; a strong sample size of 98 translates to a 9.5% margin of error.

The overall sample was weighted to better reflect the true demographic profile of PSA 4. POLCO was unable to provide AAA4 with demographic details by County. This limits our ability to confidently generalize the results at the County level.

The survey instrument itself was a modified version of the national Community Assessment Survey of Older Adults (CASOA) containing five full pages of questions which were traditional needs assessment items organized around Age-Friendly Community themes.

2023 CASOA Survey Results	PSA 4	Nevada	Placer	Sacramento	Sierra	Sutter	Yolo	Yuba

Overall Community Quality

Place to Live and Retire

Please rate each of the following aspects of quality of life in your community.

Percent that rated the characteristic as good or excellent.

● Your community as a place to live.	80%	89%	93%	75%	87%	68%	91%	53%
● Your community as a place to retire.	64%	65%	79%	59%	54%	47%	74%	48%

Community Design

Housing

Please rate each of the following characteristics as they relate to older adults in your community.

Percent that rated the characteristic as good or excellent.

● Availability of affordable quality housing.	18%	19%	18%	19%	5%	12%	11%	18%
● Availability of accessible housing (e.g., homes with no step entry, single-floor living, wide hallways and doorways)	34%	28%	50%	33%	3%	15%	36%	16%

Please rate each of the following characteristics as they relate to older adults in your community.

Percent that rated the characteristic as minor problem, moderate problem or major problem.

● Doing heavy or intense housework.	56%	62%	56%	54%	57%	67%	47%	71%
● Maintaining your yard.	53%	58%	54%	52%	59%	70%	41%	68%

Mobility

Please rate each of the following characteristics as they relate to older adults in your community.

Percent that rated the characteristic as good or excellent.

● Ease of travel by public transportation in your community.	36%	25%	19%	42%	5%	21%	54%	19%
● Ease of travel by car in your community.	81%	82%	90%	80%	78%	61%	88%	56%
● Ease of walking in your community.	61%	43%	61%	64%	73%	47%	75%	36%

With the exception of Yuba County, the first set of figures above reveal a marked difference between respondents' perception of their community as a good or excellent place to live and a good or excellent place to retire. This discrepancy suggests most people feel their community is lacking amenities or characteristics they view as important to retirement. The balance of the survey results point to where respondents think those deficiencies exist.

Overall, just 18% of survey takers rated the "availability of affordable quality housing" as good or excellent, meaning 82% indicated it was not good. The "availability of accessible housing" scored more favorably which probably means respondents believe a significant amount of the accessible housing that does exist is either unaffordable or of poor quality.

In every county, the survey suggests the easiest way to get around is by car, on foot or via public transit, in that order. Only in Yolo County is public transit viewed favorably by most respondents.

2023 CASOA Survey Results	PSA 4	Nevada	Placer	Sacramento	Sierra	Sutter	Yolo	Yuba

Mobility (continued)

Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you?

Percent that rated the characteristic as minor problem, moderate problem or major problem.

● Having safe and affordable transportation available.	34%	31%	30%	34%	55%	50%	28%	49%
● No longer being able to drive.	20%	10%	18%	22%	17%	25%	9%	24%

Employment and Finances

Employment

Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you?

Percent that rated the characteristic as minor problem, moderate problem or major problem.

● Finding work in retirement.	38%	38%	19%	44%	59%	48%	28%	56%
● Building skills for paid or unpaid work.	36%	42%	19%	40%	65%	46%	36%	57%

Finances

Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you?

Percent that rated the characteristic as minor problem, moderate problem or major problem.

● Having enough money to meet daily expenses.	41%	48%	28%	44%	51%	53%	28%	65%
● Having enough money to pay your property taxes.	32%	44%	26%	31%	38%	47%	19%	59%

Equity and Inclusivity

Community Inclusivity

Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you?

Percent that rated the characteristic as minor problem, moderate problem or major problem.

● Having friends or family you can rely on.	29%	36%	27%	29%	25%	43%	23%	45%
● Feeling lonely or isolated.	36%	29%	32%	36%	44%	51%	40%	51%
● Feeling like you don't fit in or belong.	26%	19%	22%	27%	19%	32%	33%	38%

The availability of “safe and affordable transportation” is a concern for half the survey takers in the Yuba-Sutter area, yet in most other counties the figure is closer to 30%.

At 19%, Placer County is the only place where relatively few respondents expressed difficulty finding employment and building their job skills.

Similarly, “having enough money to meet daily expenses” concerned the fewest folks in Placer and Yolo but the most in Yuba and Sutter. More specifically, paying property taxes was least problematic for survey takers in Yolo County (19%) and most for those in Yuba County (59%).

Despite its rural nature, Nevada County recorded the lowest rate of loneliness and isolation at 29% while Yuba and Sutter tied at 51%. Nevada and Sierra respondents indicated a strong sense of belonging – just 19% cited this as a problem.

2023 CASOA Survey Results	PSA 4	Nevada	Placer	Sacramento	Sierra	Sutter	Yolo	Yuba

Equity

Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you?

Percent that rated the characteristic as minor problem, moderate problem or major problem.

● Being treated unfairly or discriminated against because of your age.	24%	14%	12%	30%	21%	24%	15%	32%

Health and Wellness

Health Care

Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you?

Percent that rated the characteristic as minor problem, moderate problem or major problem.

● Finding affordable health insurance	34%	37%	41%	30%	51%	51%	27%	45%
● Getting health care you need.	37%	51%	39%	34%	69%	48%	27%	42%
● Getting the oral health care you need.	33%	39%	27%	33%	65%	51%	30%	58%
● Getting the vision care you need.	29%	35%	27%	28%	64%	36%	24%	47%
● Affording the medications you need.	22%	34%	15%	20%	37%	42%	25%	42%

Independent Living

Please rate each of the following characteristics as they relate to older adults in your community.

Percent that rated the characteristic as good or excellent.

● Availability of long-term care options.	38%	47%	43%	38%	11%	14%	37%	14%
● Availability of daytime care options for older adults.	22%	12%	26%	23%	4%	6%	30%	4%

Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you?

Percent that rated the characteristic as minor problem, moderate problem or major problem.

● Performing regular activities, including walking, eating and preparing meals.	26%	10%	27%	26%	21%	45%	25%	39%

Survey takers from Yuba (32%) and Sacramento (30%) were most likely to report experiencing age discrimination in the last 12 months.

In the Health Care category, affordable insurance, getting health care and getting dental care is problematic for many and sometimes most respondents, depending on where they live. In almost every case, affording medications ranked more favorably than the other health issues; nowhere did a majority of people report it is a problem.

Overall, 38% of survey takers perceive the “availability of long-term care options” to be good or excellent. A smaller percentage (22%) feel the same about “daytime care options for older adults.”

Difficulty with daily activities varies widely by County with a low of 10% in Nevada and a high of 45% in Sutter.

2023 CASOA Survey Results	PSA 4	Nevada	Placer	Sacramento	Sierra	Sutter	Yolo	Yuba
Mental Health								
Please rate the quality of each of the following.								
Percent that rated the characteristic as good or excellent.								
● Your overall mental health/emotional wellbeing.	81%	86%	89%	78%	93%	81%	89%	70%
Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you?								
Percent that rated the characteristic as minor problem, moderate problem or major problem.								
● Experiencing confusion or forgetfulness.	34%	32%	37%	34%	34%	38%	17%	39%
● Feeling depressed.	40%	33%	31%	43%	38%	44%	35%	50%
● Dealing with the loss of a close family member or friend.	44%	38%	40%	47%	36%	44%	37%	49%
Physical Health								
Please rate the quality of each of the following.								
Percent that rated the characteristic as good or excellent.								
● Overall physical health.	73%	83%	76%	71%	70%	65%	81%	61%
Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you?								
Percent that rated the characteristic as minor problem, moderate problem or major problem.								
● Your physical health.	57%	52%	59%	56%	56%	72%	52%	62%
● Falling or injuring yourself in your home.	35%	34%	31%	37%	32%	54%	18%	39%
● Staying physically fit.	54%	50%	49%	56%	48%	72%	49%	68%
● Maintaining a healthy diet.	39%	42%	41%	35%	53%	62%	41%	60%
● Having enough food to eat.	18%	19%	8%	20%	25%	28%	15%	33%

Most respondents in all seven counties rated their “overall mental health/emotional wellbeing” favorably, ranging from 70% in Yuba to 93% in Sierra. Confusion and forgetfulness appears to be unusually low in Yolo County (17%). Depression seems most pronounced in Sutter County (50%).

Most survey takers also rated their “overall physical health” as good or excellent; Sutter was the lowest (61%) and Nevada was the highest (83%). Nevertheless, a majority of these same respondents reported having health problems in the last 12 months. An unusually high number of Sutter County residents reported difficulty with falls in the home (54%), but this figure is counterbalanced by a corresponding low one in Yolo (18%).

Having enough food to eat was least problematic for respondents in Placer County (8%) and most problematic for those in Yuba County (33%).

2023 CASOA Survey Results	PSA 4	Nevada	Placer	Sacramento	Sierra	Sutter	Yolo	Yuba
Safety								
Please rate each of the following characteristics as they relate to your community as a whole.								
Percent that rated the characteristic as good or excellent.								
● Overall feeling of safety in your community.	62%	76%	81%	53%	93%	43%	78%	49%
Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you?								
Percent that rated the characteristic as minor problem, moderate problem or major problem.								
● Being a victim of fraud or a scam.	31%	13%	25%	36%	25%	22%	19%	39%
● Being physically or emotionally abused.	8%	3%	2%	10%	6%	16%	6%	16%

Information and Assistance

Information on Available Older Adult Services

In general, how informed or uninformed do you feel about services and ativities available to older adults in your community?								
Percent that rated the characteristic as very informed or somewhat informed.								
● In general, how informed or uninformed do you feel about services and ativities available to older adults in your community?	54%	68%	59%	52%	73%	43%	58%	42%
Please rate each of the following characteristics as they relate to older adults in your community.								
Percent that rated the characteristic as good or excellent.								
● Availability of information about resources for older adults.	30%	40%	45%	25%	23%	10%	56%	5%
● Availability of financial or legal planning services.	34%	39%	56%	28%	7%	14%	47%	9%

People's perception of feeling safe in their community varies widely; it is highest in Sierra County (93%) and lowest in Sutter County (43%). Overall, 31% of survey respondents reported having had a problem with a fraud or scam in the last 12 months. Physical and emotional abuse was more rare but notable, peaking at 16% in Yuba-Sutter.

When asked "how informed or uninformed do you feel about services and activities available to older adults in your community?," the results were mixed. The highest percentage of informed respondents reside in Sierra County (73%); the lowest reside in Yuba-Sutter (42-43%). Across the board, the percentages drop (sometimes dramatically) when folks are asked about the "availability of information about resources for older adults." Information about "financial or legal planning services" is highest in Placer (56%) and Yolo (47%).

2023 CASOA Survey Results	PSA 4	Nevada	Placer	Sacramento	Sierra	Sutter	Yolo	Yuba
Information on Available Older Adult Services (continued)								
Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you? Percent that rated the characteristic as minor problem, moderate problem or major problem.								
● Having adequate information or dealing with public programs such as Social Security, Medicare, and Medicaid.	49%	46%	44%	49%	62%	65%	56%	57%
● Not knowing what services are available in your community.	71%	60%	70%	73%	74%	79%	56%	85%
Quality of Older Adult Services								
How would you rate the overall services provided to older adults in your community? Percent that rated the characteristic as good or excellent.								
● How would you rate the overall services provided to older adults in your community?	49%	51%	59%	46%	45%	27%	71%	17%

Productive Activities

Caregiving

Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you? Percent that rated the characteristic as minor problem, moderate problem or major problem.								
● Feeling PHYSICALLY burdened by providing care for another person.	27%	15%	28%	29%	33%	37%	13%	21%
● Feeling EMOTIONALLY burdened by providing care for another person.	31%	24%	29%	34%	35%	37%	24%	23%
● Feeling FINANCIALLY burdened by providing care for another person.	25%	19%	26%	26%	22%	28%	17%	23%

Roughly half of all survey takers reported having problems navigating public programs in the last 12 months. In every County, most respondents indicated they don't know what services are available in their community. As for the quality of the services that are provided, those percentages range from 17% good/excellent in Yuba County to 71% in Yolo County.

The caregiving figures above are mixed. It appears somewhere between one-quarter and one-third of the respondents have been involved in caring for another person in the last 12 months.

2023 CASOA Survey Results	PSA 4	Nevada	Placer	Sacramento	Sierra	Sutter	Yolo	Yuba
Civic Engagement								
Please rate each of the following characteristics as they relate to your community as a whole. Percent that rated the characteristic as good or excellent.								
● Residents' connection and engagement with their community.	48%	64%	69%	39%	53%	29%	70%	24%
Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you? Percent that rated the characteristic as minor problem, moderate problem or major problem.								
● Feeling like your voice is heard in the community.	45%	32%	40%	48%	23%	47%	37%	60%
● Finding meaningful volunteer work.	26%	17%	26%	24%	26%	37%	33%	53%
● Finding productive or meaningful activities to do.	34%	24%	33%	36%	33%	37%	27%	58%
Social Engagement								
Older adults may or may not face a number of challenges. Thinking back over the last 12 months, how much of a problem, if at all, have each of the following been for you? Percent that rated the characteristic as minor problem, moderate problem or major problem.								
● Feeling bored.	40%	32%	44%	39%	36%	55%	35%	51%
● Having interesting social events or activities to attend.	42%	35%	36%	43%	50%	57%	41%	67%

The degree to which survey takers perceive community connection and engagement differs by County. Yolo, Placer and Nevada score high (70-64%) while Sutter and Yuba score low (29-24%). In this realm, “feeling like your voice is heard” was the most frequently cited problem at an average rate of 45%. The least problematic topic was “finding meaningful volunteer work” at an average of 26%, although lower in Nevada County (17%) and notably higher in Yuba County (53%).

In every County, at least one-third and as many as two-thirds of respondents indicated social engagement was a problem for them in the last 12 months.

2024 Town Hall Meetings

When AAA4 drafts a new 4-year Plan, it is customary for Public Meetings to be conducted in each of the seven Counties to allow all interested parties to provide input. From early March to mid-April fifteen (15) such meetings were held. The Dobbins meeting and all four Yolo meetings were hosted by third party agencies, thus those events flowed somewhat differently from the other ten meetings that were arranged by AAA4 and were hosted by local County Supervisors. Summaries of each meeting are shown below.

2024 Town Hall Meeting Summary: Page 1	
NEVADA COUNTY Hosted by: Supervisor Swarthout Venue: Virtual via Zoom	• 28 people joined - 7 AAA staff - 1 County Supervisor - Mayor Jan Arbuckle • No feedback forms for this meeting • Roundtable discussion - Transportation was a top priority discussed - Respite for caregivers - Providing caregivers with more resources, statistics was provided that 48% of caregivers pass before the person they are caring for - Need for case managers that handle everything for the person they work with.
PLACER COUNTY Hosted by: Supervisor Jones Venue: Maidu Community Center, Roseville	• 22 attendees/community members, 13 of those attendees were staff from various agencies • 7 feedback forms collected. These are the findings. - A need for these programs to be advertised more, so people are aware of the program - Need more programs with a focus on adults with developmental disabilities - Find a way to make all residents aware of 211 and other resources that are available to seniors. This would include paper resources for those without the internet. Post and leave copies of resources at care homes, churches, libraries and advertise in local newspapers - Community Centers in all rural areas with affordable and reliable transportation is a big topic. This is more than just a regular bus service. It is more about services that are door-to-door. • Roundtable discussion - Agencies need to continue to provide paper versions of materials - Help people plan for “rainy days” and inform them of the programs available before they are already in need of them - A need to share resources that ensure people everywhere are getting the information, maybe place it all in one location. Example resource guide or website. - More caregivers and respite for those already in place, especially aging parents who are caring for their adult children with developmental disabilities. - Placer County’s need for affordable housing was discussed, including regular housing Assisted Living, RCFEs and Home Share.

2024 Town Hall Meeting Summary: Page 2	
SACRAMENTO COUNTY Hosted by: Supervisor Kennedy Venue: ACC Senior Services, Sacramento	• 52 providers/community members attended, 4 of them were presenters • 11 feedback forms collected. These are the findings. - Need more programs that help prevent isolation - More safety programs to prevent scams and homelessness - Programs that keep people active and in the community. - Programs that are multigenerational where one generation can teach another. - Affordable housing • Roundtable discussion - A need for doctors that knew how to treat conditions that older adults are living with - Affordable senior housing - Affordable long term health care - Programs to teach older adults how to use technology in a way that will allow them to retain the information - Reliable transportation - Need for more caregivers
SACRAMENTO COUNTY Hosted by: Supervisor Hume Venue: Senior Center of Elk Grove	• 24 attendees/ community members, including 8 staff members from various agencies • 15 feedback forms collected. These are the findings. - Affordable housing opportunities for older adults and adults living with disabilities - More outreach has to be done so people are aware of the programs available - Equity gap that doesn't allow for older adults to afford aging - Age friendly technology - Transportation - Need for utility assistance • Roundtable discussion. - Affordable housing - More locations where older adults can receive meals and a choice of where they can go. - Programs that help close the digital divide - Affordable housing specific for older adults was also discussed. - More caregivers for those who need it and more respite for the caregivers that are already in place - Need for more program for adults with developmental disabilities. - Those present mentioned that they were seeing a lot of the "Sandwich generation" meaning lots of people are caring for an older parent and a disabled adult child at the same time. - They mentioned that both older adults and adult children with disabilities were fighting to get the same services. - Talked about how the cost of living is not reasonable when you are on a fixed income.

2024 Town Hall Meeting Summary: Page 3	
SACRAMENTO COUNTY Hosted by: Supervisor Serna Venue: Hart Senior Center, Sacramento	• 40 attendees/community members, including 8 staff members from various agencies • 10 feedback forms collected. These are the findings. - Housing - Transportation • Round table discussion. - Need for more caregivers and providing those caregivers fair wages - Programs and information has to be culturally acceptable - Language is a barrier for many, sometimes not just with getting the information about the program but having someone who speaks their language pick up the phone and assist them. - Income Support systems - Volunteer Program for Income Tax Assistance - Legal - Utilities - Individual or Family - There is a care gap
SACRAMENTO COUNTY Hosted by: Supervisor Desmond Venue: Gibbons Community Center, Carmichael	• 50+ people were present • Of them 7 were providers and AAA4 staff • 11 Feedback forms were collected. These are the findings. - Affordable housing - Affordable living in all areas not just housing but food, transportation and other necessities - Need more programs for people who are single, aging and have no family near by and how they can plan - Need a central website where one person can find everything - Older adults need someone who can assist them in everyday items like paying bills and non-medical needs - More senior housing - Assistance for veterans - More welfare checks on older adults - Need to provide the information in other languages - More food through meals on wheels - Better roads and transportation • Roundtable discussion. - Reliable transportation - Affordable housing - Better pay for caregivers - Unobstructed sidewalks - Affordable housing for older adults

2024 Town Hall Meeting Summary: Page 4	
SACRAMENTO COUNTY Hosted by: Supervisor Frost Venue: Orangevale Community Center	• 20 people total - 2 older adults of the community - 18 care providers • No feedback forms were returned • Roundtable discussion modified to represent the people present. - The group discussed ways to get people out to community events. Contacting churches Facebook Newspaper ads Provide transportation Material in other languages Target caregivers Provide food Put flyers at Senior living locations Do events on the weekends Make the event for their community in their -community Connect with schools Snail mail "Inreach" instead of outreach sk PG&E and SMUD to see if they would distribute a flyer out to their consumers about the event.
SIERRA COUNTY Hosted by: Supervisor Dryden Venue: Loyalton Senior Center	• 21 people present, including: • 3 AAA staff • 2 county supervisors • 8 feedback forms collected. These are the findings. - Need more IHSS workers - Food that can be distributed to the persons home - Respite or any other form of relief for caregivers - more support from the state to help the county of Sierra move forward - need for a senior day care - Assistance for veterans - Home care assistance for older adults • Roundtable discussion. - Need for transportation - Need for caregiver respite - Need for trainings on how to care for older adults diagnosed with Alzheimer's - Need for traveling nurses that could come to Loyalton - Need for a day care in place of respite, or any other way a caregiver can get their own health checked and still ensure the person they are caring for is being cared for. - More assistance for the high percentage of veterans in the area without having to travel two hours. - Many older adults are dealing with food insecurities.

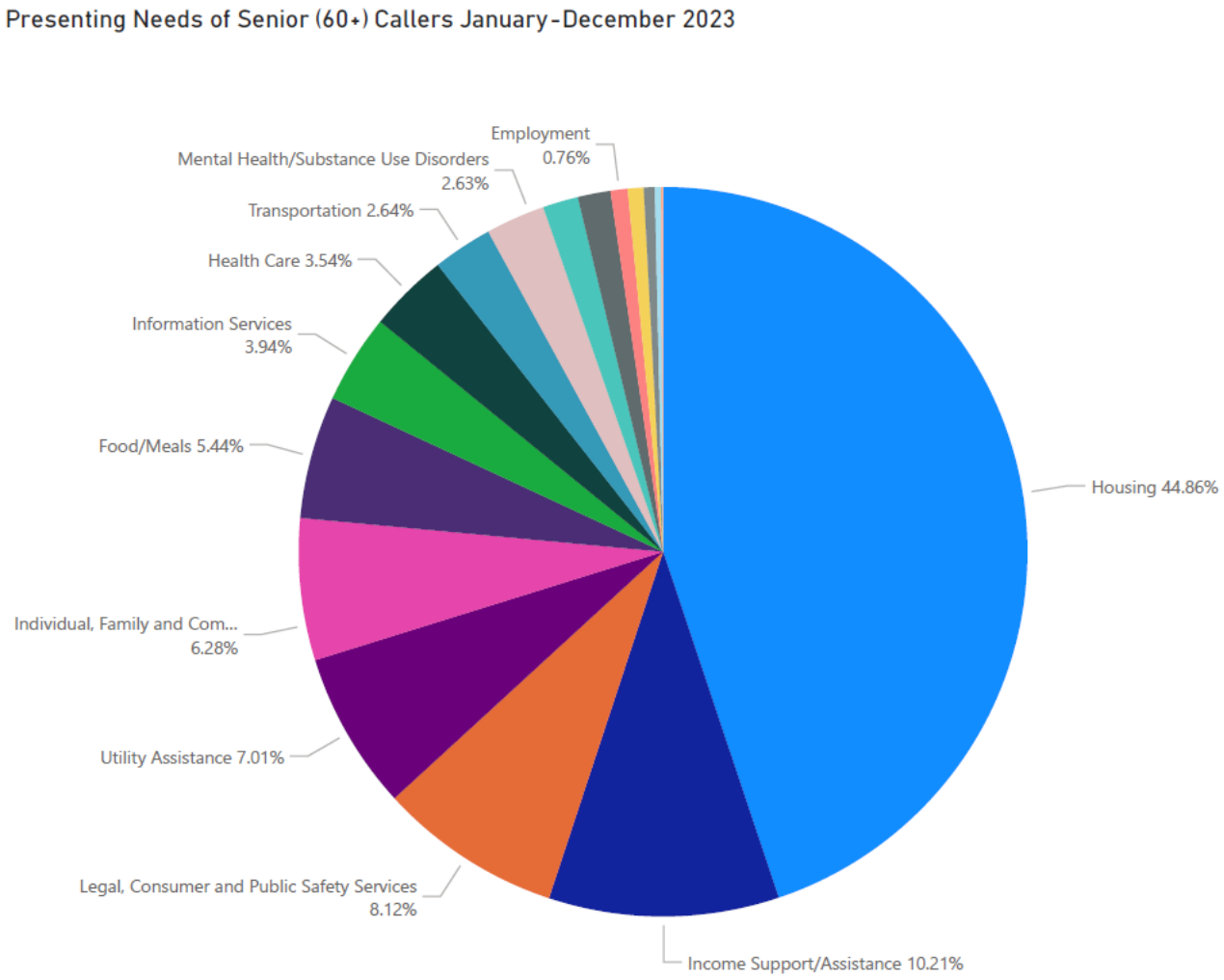
2024 Town Hall Meeting Summary: Page 5	
YOLO COUNTY Hosted by: Yolo Healthy Aging Alliance Venue: Woodland Community Center	• 18 providers/community members attended, including 6 staff members present • No feedback forms. • Round table discussion - Half of the attendees were familiar with the MPA. - All attendees knew MOW, 2-1-1, LSNC - Concerns about middle class not being able to afford insurance and also not qualifying for Medi-Cal were discussed. This also brought about the talk of being able to afford in-home care, and personal items. - Need for medical professionals trained in geriatrics. - Importance in marketing all programs and the need to collaborate amongst each other so all programs are being talked about and those who need the services are getting them. - The rise in people experiencing first time homelessness, and the fact that the population experiencing it is the middle class. - Home Safe through APS was discussed. - A program similar to “American River Home Share” was also mentioned.
YOLO COUNTY Hosted by: Yolo Healthy Aging Alliance Venue: Veteran’s Community Hall, Davis	• 15 Participants 8 of which were staff/providers • No feedback forms • Roundtable discussion. - Affordable assisted living facilities - Affordable and reliable transportation - Health care needs and how do we keep people outside of hospitals. Question remained unanswered - The issue with Medi-Cal and Dignity Health contract ending was discussed and brought to everyone’s attention.
YOLO COUNTY Hosted by: Yolo Healthy Aging Alliance Venue: West Sacramento Community Center	• 15 people present about 10 were staff • No feedback forms were distributed • Roundtable discussion. - Older adults are food insecure - Transportation that is affordable and reliable - Housing, affordable, and for older adults - One person discussed that she wanted to be able to be an advocate for her friends and neighbors. The discussion went to how can community members get back to service providers and county supervisors about what they are seeing within the community and their families and friends. - Health care needs and affordability was also mentioned.

2024 Town Hall Meeting Summary: Page 6	
YOLO COUNTY Hosted by: Yolo Healthy Aging Alliance Venue: Winters Opera House	• 17 people were present, only 1 community member. The rest were service providers or county workers. • No feedback forms were distributed • Roundtable discussions. - Need for transportation - Health care needs and costs, issue with insurance and Dignity Health being able to see those consumers - The need to include people with disabilities was mentioned. The community member mentioned there are adults under 60 that benefit and could use some of the services that older adults receive but they are not always asked what they need. - The need for care coordination was discussed - Affordable housing for all - Need for long term care planning, not everyone thinks they will need it so they don't plan for it. Explain to people why they could benefit from it
YUBA COUNTY Hosted by: Seniors on the Go Luncheon Venue: Dobbins Seventh-Day Adventist Church	• 46 attendees • 9 feedback forms were collected. These are the findings. - low-income senior housing - reliable/accessible transportation - Affordable handy man - community weather updates - keeping landline (telephone services) and getting broadband - affordable fire insurance - people said they had never heard of any of the programs in the goals. - A few provide their contact info. • Round table discussion - The topics mentioned in the forms were also talked about during the discussion. - Participants mentioned they are not satisfied with the current transportation programs available. The ones mentioned were Dial-a-ride and FREED's transportation. The Hilltop Gang recently stopped their transportation program.

2024 Town Hall Meeting Summary: Page 7	
YUBA COUNTY Hosted by: Supervisor Blaser Venue: Yuba County Government Center, Marysville	• 32 people present • 7 were AAA4 staff • 16 feedback forms were collected. These are the findings. - Transportation - More services that are accessible to those that live up in the hill and not in local county area like meal assistance - Rehoming/placement assistance for older adults that cannot live at home anymore - Equity with the delivery of programs - More health care workers and caregivers - Housing • Roundtable discussion - Need for transportation - Affordable housing - Many older adults living with food insecurity - Need for reliable forms of communication - Need more IHSS workers - Need more doctors and health care professionals trained in Geriatric Care - Breakdown of families as a root cause of many problems
SUTTER COUNTY Hosted by: Supervisors Conant & Ziegenmeyer Venue: Yuba City Senior Center	• 24 people present, including 12 employees/service providers • 8 feedback forms collected. These are the findings. - Respite care - Better way to communicate to the community that these programs exist - The CASOA survey should have been done for people living with disabilities as well. • Roundtable discussion. - High need for public transportation - Affordable housing - Older Adults are living with food insecurity - Respite care for caregivers - Adult day cares as another form to relieve caregivers - Older adults need a navigator to help them through the system, the ADRC was mentioned and what their case managers can do - More housing developments for older adults - Need more programs for mental health - Long term care burn out and how it can lead to spousal abuse was also discussed. - The need for paper copies of all material - Need for a “wanderer” program for people with a form of dementia that leaves the home and cannot find their way back

Call Data from Senior Information & Assistance Programs

AAA4 funds Title III-B Senior Information & Assistance (I&A) in every County except Sierra. In Nevada, Sacramento and Yolo, the funded I&A provider is also the designated 211 provider. Across Planning & Service Area 4 (PSA 4), the most common reason folks are calling Senior I&A programs is for housing-related concerns. The need is most pronounced in Sacramento County, as evidenced in the chart below from 211 Sacramento. In 2023, there were more calls about housing (16,277) than in the next seven highest-ranking categories combined!



Further analysis of these Housing calls reveals the largest portion of these calls (46%) were from people inquiring about residential housing options (i.e., market-rate housing). The second largest portion (18%) were from folks asking specifically for help with a housing search. The third largest group of calls (15%) were regarding emergency shelters, at-risk/homeless programs or transitional housing for older adults.

Most of the Senior I&A providers in PSA 4 partner with the Volunteer Income Tax Assistance program each Spring to schedule one-on-one appointments. This creates seasonal spikes in call data. In 2023, 211 Sacramento took over 3,000 tax preparation calls.

Wait-Listed Programs

Arguably, the most compelling indicator of unmet need is wait list numbers. In most cases, these are pre-qualified individuals who should be receiving services, but they are not because the service provider lacks sufficient resources to serve them. Although AA4 has never been able to meet the demand for caregiver respite, the number of families requesting it now far exceeds the number of families who actually receive it in any given year.

As of May 10, 2024, the following AAA4-Funded Programs had exceeded their maximum capacity and have either waived a Waiting List or have an active Waiting List:

- AAA4 Dine Around Town: Wait List Waived
- AAA4 Yuba-Sutter Meals on Wheels:
    - Yuba County: 40 people waiting
    - Sutter County: 42 people waiting
- Del Oro Caregiver Resource Center; Respite Care:
    - Placer County: 225 people waiting
    - Sacramento County: 550 people waiting
    - Yolo County: 48 people waiting
- Dignity Health (Yolo County); Transportation: 17 people waiting
- FREED (Yuba-Sutter); Transportation: 11 & 38 people waiting, respectively
- Gold Country Community Services - HDM (W. Nevada County): 2 people waiting
- Meals on Wheels by ACC (Sacramento County): 151 people waiting
- Meals on Wheels Yolo County: 79 people waiting
- PIRS (Placer County); Minor Home Modifications: 10 people waiting
- Seniors First; Transportation: 4 people waiting

The 2022-23 Strengths Assessment

The CDA-funded CASOA satisfied AAA4's obligation to perform a comprehensive survey of all older adults residing in the seven-county service area. This enabled Agency Staff to focus instead on the first ever Strengths Assessment. In March of 2022 the Governing Board and the Advisory Council began hosting guest speakers on existing successful approaches that directly relate to the 23 Strategies in the Master Plan. To keep the project at a manageable scale, topics were restricted to local efforts being spearheaded by AAA4 itself, by one of the seven Counties, or by one of the independent living centers. The guest presentations were meant to spark discussion about how to enhance the effectiveness of these efforts through local leadership and advocacy.

The Board focused on administrative, fiscal and policy solutions. To encourage a fruitful discussion from the start, key County Staff and County Commissions were invited to attend and share their expertise and knowledge. The Advisory Council looked at programmatic solutions, especially around overcoming barriers to service such as: access, awareness, culture, language, resistance to change, stigma and technology. Subject Experts and key Service Providers were invited to enrich these discussions.

The chart on the following pages summarizes the results. Going forward, the Agency seeks to support and leverage these successful programs and initiatives to address unmet needs in each of the seven counties.

Successful MPA-Related Programs & Initiatives (Featured at AAA4 Board & Council Meetings *or Elsewhere*)

Goal #1		Goal #2		Goal #3		Goal #4		Goal #5	
HOUSING for ALL AGES & STAGES		**HEALTH REIMAGINED**		**INCLUSION & EQUITY, NOT ISOLATION**		**CAREGIVING that WORKS**		**AFFORDING AGING**	
MPA Strategy	**Lead: Program**	**MPA Strategy**	**Lead: Program**	**MPA Strategy**	**Lead: Program**	**MPA Strategy**	**Lead: Program**	**MPA Strategy**	**Lead: Program**
A. Housing Options as We Age	*AAA4: HomeShare American River*	A. Bridging Health Care & Home/Community	Placer ADRC: Care Transitions Interventions	A. Equity & Inclusion in Aging	*AAA4: Diversity, Equity, Inclusion & Accessibility Work*	A. Family & Friend Caregiving	Del Oro: CareNav Online Portal	A. No Older Homeless	*Yuba County: Tiny Homes*
	Yuba County: ADU Workbook	B. Health Coverage & Care for All	N/A	B. Closing the Digital Divide	AAA4: Digital Connections Program	B. Direct Care Jobs	ACC: Bridge to Healthy Families	B. Income Security as We Age	*AAA4: "Elder Index" Figures*
B. Transportation Beyond Cars	*Yolo County: YoloBus BeeLine Rideshare Service*	C. Lifelong Healthy Aging	Sac County Public Health: Stop Falls Coalition		Yuba County: Broadband Internet Plan		FREED: ILC Caregiver Registries		*LSNC: Pension Rights Project*
C. Outdoor & Community Spaces for All Ages	N/A	D. Geriatric Medicine	N/A	C. Opportunities to Work	AAA4: Mature Edge Job Readiness		Sutter IHSS Public Authority: Caregiver Resistries	C. Protection from Poverty & Hunger	Seniors First: Empty Bowls Fundraiser
D. Emergency Preparedness	LSNC: Disaster Line	E. Dementia in Focus	Sac County Public Health: Healthy Brain Initiative		Yolo County: YoloWorks!	C. Virtual Care	CFILC: Internet Discount Programs		MOW by ACC: "Dishes" Restaurant Meals
E. Climate Readiness	Nevada-Sierra Air Quality District: Electric Vehicles		Yuba-Sutter Counties: Blue Zones Project	D. Opportunities to Volunteer & Engage	Sac County Senior & Adult: Volunteer Services				MOW by ACC: Japanese-Inspired Meals
		F. Nursing Home Quality	AAA4: LTC Ombudsman Culture Change	E. Protection from Abuse, Neglect & Exploitation	Placer County: Home Safe Program				

Unmet Consumer Needs Information from Local ADRCs

As mentioned previously, there are five separate Aging and Disability Resource Connections (ADRCs) operating within AAA4's seven-county service area. The following excerpts are from the 2025-26 ADRC Annual Plans.

NEVADA COUNTY ADRC:

"In our rural county, public transportation only services a couple very small in-town areas, and the rest of the county suffers from a lack of reliable transport, especially to medical appointments. The managed care transportation contracts have been inconsistent and caused some consumers to miss important appointments and therapies, and has increased the risk of hospitalization and institutionalization."

"One other significant unmet needs is a shortage of in-home caregivers. The ADRC funds One Source Empowering Caregivers (OSEC), a volunteer caregiver respite organization to support enhancing availability of some service for overwhelmed families. OSEC has two Options Counseling trained staff and are getting volunteers trained regularly. The county still has a shortage of IHSS workers available, and it is especially a challenge for individuals who live far from town, in our outlying rural areas."

"Nevada County does not offer the Multipurpose Senior Services Program (MSSP) which could enable eligible older adults to remain in their own homes and prevent or delay institutionalization. Nevada County also does not have access to the Assisted Living Waiver, so low income individuals who need assisted living have no local options for affordable board and care."

"The Housing crisis continues to impact people with disabilities and older adults, and it is the number one request for services from the ADRC."

"Partnership Health Plan is the only MediCal managed care plan available in Nevada County, and they do not offer 2 important Community Supports: Transitions Services and Home Modifications. With the ending of the DOR's Community Living Fund, and the end of the OAA funding for Fix-it Services in Nevada County, financial assistance for home modifications and transitions will be completely unavailable, leaving people stuck in institutions."

PLACER COUNTY ADRC:

"Funding for critical services remains insufficient, limiting the ability of providers to meet the growing community needs. There is a shortage of qualified IHSS caregivers."

SACRAMENTO COUNTY ADRC:

"1. Individual and Family Housing
2. Transportation
3. Communication and Information
4. Health Services and Community Supports
5. Social Participation
6. Outdoor Spaces and Buildings
7. Civic Participation and Employment
8. Respect and Social Inclusion"

YOLO COUNTY ADRC:
“- Shortage of caregivers for IHSS and private pay
- Lack of caregiver training
- Lack of funding for diversion transition services (home modifications) to make home accessible
- Limited housing opportunities for those who are extremely low-income
- Finding affordable and accessible housing for those with physical disabilities
- Access to reliable mental health providers and/or individualized person-centered mental health services.
- Frequent mental health provider turn over”

YUBA & SUTTER COUNTIES ADRC:
“Older adults and individuals with disabilities in the Yuba-Sutter region continue to experience significant unmet needs across multiple areas. Key gaps include:
Transportation: Rural transportation options are extremely limited
Senior Center Access: The region has only one senior center serving one city.
Assisted Living Waiver Access: There is no ALW
Information and Referral Systems: The region does not have a 211 system”

Defining Those with the Greatest Economic Need

Table C (below) illustrates the number and proportion of older adults with greatest economic need in each of the seven counties. At 10.5%, Sutter County has the highest poverty rate among Older Adults in PSA 4; it is followed closely by Sacramento and Yolo (both 10.3%). Placer has the lowest poverty rate at 7.3%.

The poverty rates in Table C include the year 2021. At that time, the federal government defined poverty as having an annual income below $12,880 for a single person or below $17,420 for a couple. Presently (2025), the poverty level for a single person is $15,650; for a couple it is $21,150.

As is true in the general population, a disproportionate number of ethnic elders are in poverty. The percentage of impoverished Black seniors is more than double the figure for White seniors (16.9% vs. 7.8%). The poverty rates for all other older adults of color in our area are high as well.

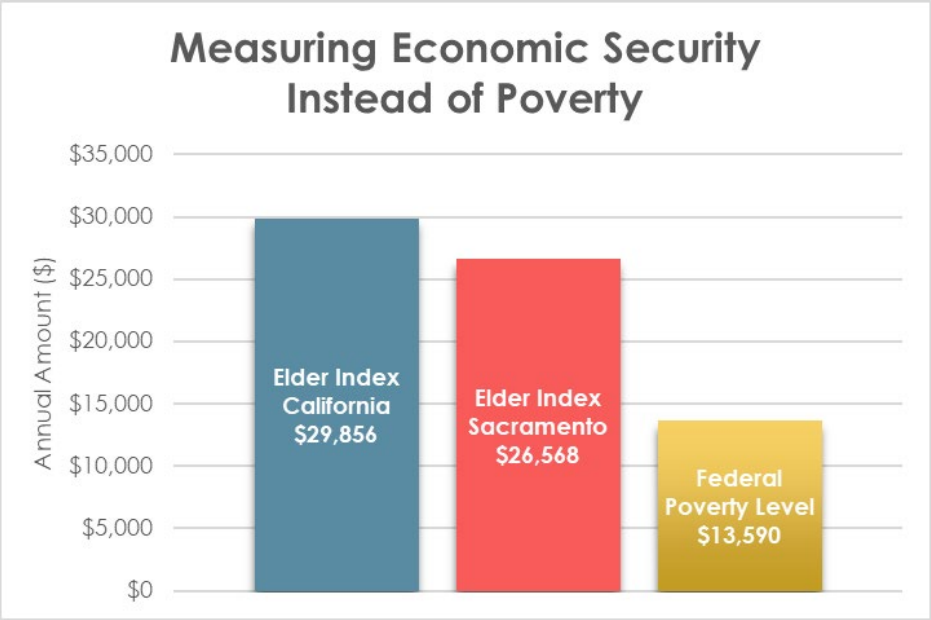
Table C: Greatest Economic Need by County (Estimated Figures for 2025)

Older Adults (60+) in Greatest Economic Need (100% Poverty)	**PSA 4**	Nevada	Placer	Sacramento	Sierra	Sutter	Yolo	Yuba
TOTAL (count) [1]	**58,408**	3,616	8,850	36,749	140	2,491	4,854	1,594
Poverty Rate [2]	**9.6%**	8.7%	7.3%	10.3%	9.0%	10.5%	10.3%	9.7%
Poverty Rate by Ethnic Group [2]								
American Indian	**16.7%**	---	12.6%	17.6%	---	19.3%	---	27.0%
Asian	**11.2%**	---	5.3%	5.3%	n/a	8.2%	13.7%	---
Black	**16.9%**	n/a	17.2%	17.1%	n/a	---	23.1%	---
Hispanic/Latino	**13.1%**	16.6%	14.6%	13.0%	n/a	14.3%	13.3%	4.5%
Pacific Islander	**10.7%**	n/a	---	11.5%	n/a	---	n/a	---
Multi-Racial/Other	**13.7%**	25.3%	9.3%	14.1%	n/a	---	---	n/a
White	**7.8%**	8.0%	6.5%	8.0%	9.1%	9.9%	8.4%	10.1%

[1] *Imputed from 2025 California Department of Finance Population Projections by County (July 2023 release)*
[2] *Data taken from 2017-21 American Community Survey Special Tabulation on Aging (5-year estimate)*
"---" Indicates that accurate estimations cannot be made due to very small sample sizes

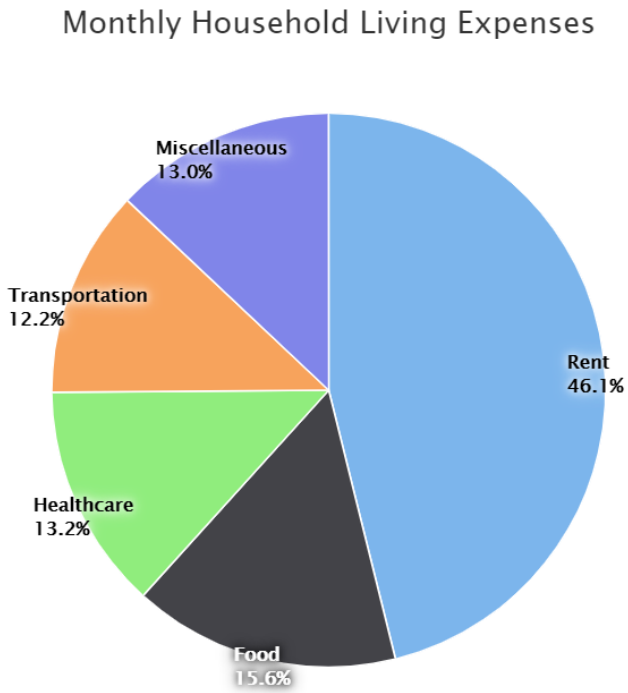
The "Hidden Poor"

Since 2008, UCLA's Center for Health Policy Research has been counting how many Older Californians (age 65+) are not officially considered poor but are not able to make ends meet either. Using a tool called the Elder Economic Security Standard Index (Elder Index or EI), the Center has consistently found that the median cost of living for older people around the State is about twice the Federal Poverty Level.



The simple bar chart to the right shows the median costs for a single renter in 2022 in California and in Sacramento County. The chart below shows what the $26,568 Elder Index includes in Sacramento, based upon a modest household budget. In PSA 4, the cost of living for single renters is highest in Nevada County ($29,988) and lowest in Yuba County ($26,448).

Deeper examination of Elder Index data too complex to fully describe here reveals that the amount of money needed to meet one's basic needs varies widely based upon the size of the household (single person vs. couple), the housing type (owner vs. renter), and housing costs (mortgage vs. no mortgage). The last of these, housing costs, are the single largest expense for everyone except those without a mortgage, and the housing item accounts for all of the cost variation within the "person" and the "couple" categories. Thus when it comes to costs, having housing that is less than 30% of one's annual earnings is truly (empirically) the key to economic security for older Californians.



On the other side of the ledger, median Social Security payments in the Sacramento area are $13,215 for a single renter (about 59% of the median cost of living) and $20,646 for a renting couple (about 67% of the median cost of living). Without significant streams of revenue from other sources, many older folks will struggle to make ends meet.

Based on its research, UCLA (2016) has estimated that 24.2% of all Californians age 65+ are among the "**hidden poor**" – above the poverty line but below the Elder Index.

Additional information about the Elder Index, including a county dashboard, may be available at: https://healthpolicy.ucla.edu/programs/health-disparities/elder-health/elder-index-data/Pages/elder-index-data.aspx

Defining Those with the Greatest Social Need

The number and proportion of older adults with the greatest social need is shown in Table D below. Because the characteristics are not mutually exclusive, a total figure cannot be calculated.

Table D: Greatest Social Need by County for People 60+

Older Adults In Greatest Social Need Categories	**PSA 4**	Nevada	Placer	Sacramento	Sierra	Sutter	Yolo	Yuba
Lives in a Remote Rural Area (Geographically Isolated)[1]	**41,636**	11,707	12,428	6,251	1,020	2,905	3,110	4,215
% of Population	**7.3%**	31.4%	10.8%	1.9%	75.0%	13.4%	7.3%	27.5%
Ethnic Minority[1]	**195,814**	3,363	23,436	140,002	145	8,929	15,353	4,586
% of Population	**34.4%**	9.0%	20.3%	41.7%	10.7%	41.1%	35.9%	30.0%
Non English-Speaking[1]	**17,290**	115	1,150	12,090	0	1,655	1,945	335
% of Population	**3.0%**	0.3%	1.0%	3.6%	N/A	7.6%	4.6%	2.2%
Has Any Disability	**169,789**	8,582	29,455	105,114	325	7,339	13,120	5,433
% of Population[2]	**29.8%**	23.0%	25.5%	31.3%	23.9%	33.8%	30.7%	35.5%

[1] *Data taken from the 2023 California Department of Aging Population Projections by PSA*
[2] *Data taken from the 2017-21 American Community Survey Special Tabulation on Aging (5-year estimate)*

Planning and Service Area 4 (PSA 4) has more Older Adults living in isolated rural areas than any other PSA in California. The majority of these folks live in the foothills and on either side of the Nevada-Sierra summit. About 30% of all older residents in Nevada and Yuba counties live in remote areas. If not for a Reno zip code that spills over the state border, the frontier County of Sierra would be exclusively rural. The remaining residents in this category live on or near agricultural land in the outlying portions of Sacramento County and throughout Yolo County.

The age 60+ population continues to become more ethnically diverse as the last of the Baby Boomers reach the six-decade mark this year (2024). The central valley counties are substantially more diverse than the foothills and mountains. Overall, only 3% of Older Adults do not speak English at all. Many of these folks are immigrants from parts of the world where English is neither the primary nor secondary language spoken, including portions of Southeast Asia, India/Pakistan and the former Soviet Union.

Typically, about one-third of Older Adults self-identify as having one or more disabilities, as defined by the Census Bureau. Table D shows PSA 4 is slightly below that figure. As expected, the pattern across the individual counties mirrors the poverty rate. Nevada, Placer and Sierra counties are below average while the counties in the valley are near or above average. Having a disability is associated with reduced earnings and, therefore, a greater likelihood of living in poverty, especially later in life.

Assessing the Needs of LGBTQ Individuals

The Community Assessment Survey for Older Adults (CASOA) asked respondents about their gender identity and sexual orientation. The sample for PSA 4 includes 16 Lesbians, 41 Gay men, 17 Bisexuals, 3 Transgender individuals, 2 Agender respondents and 11 people who identify with some other sexual orientation for a total of 90 out of 1,279 or 7.0%. Nationally, experts believe about 5% of ALL Americans will self-identify as LGBT in an anonymous survey. We would expect a lower percentage among people age 55+ but a higher percentage among Californians, so our sample seems representative.

Researchers at UCLA (2016) have found Older Adults who self-identify as L, G or B are more likely to be depressed and more likely to report being in poor mental and physical health than heterosexuals in the same age group.

Unfortunately, we do not have the ability to separate our CASOA by gender identity and sexual orientation, so we cannot confirm whether these findings are true in our seven-county service area.

Targeting Those with the Greatest Needs

Older Americans Act (OAA) services are available to people regardless of their gender identity, sexual orientation, race, ethnicity, citizenship, religion, political views, appearance, abilities, limitations, education, socio-economic status, or employment status. The OAA requires that special efforts be made to serve eligible individuals with the *"greatest social and economic needs."* Broadly, this term refers to people whose status or circumstance is likely to present barriers to their long term care. To help ensure consistent interpretation of this concept, AAA4 has established three priority categories as described below. A person may meet multiple criteria across and within these categories at the same time.

1) **Existing Clients**: Funded Partners SHALL evaluate the needs of any clients who had been receiving services under the same service category in the same geographic service area during the period just prior to the start of a new contract cycle. Such existing clients whose needs are equal to or greater than those of new prospective clients should be served first. Thereafter, people do not necessarily retain any priority status solely for being existing clients.

2) **Target Groups**: The Older Californians Act, the California Department of Aging and the AAA4 Area Plan identify people having certain characteristics as "target" populations. The requirements with respect to these populations vary as follows:

a) Select Funded Partners are required to serve primary target populations at least at a proportionate percentage, based upon their projected numbers within the specific geographic service area. The primary groups are people who are:
   i. Living at or below the Federal Poverty Level.
   ii. Ethnic Minorities.
   iii. Living in a rural area.

b) Select Funded Partners shall make reasonable efforts to serve secondary target populations. The secondary groups are people who:
   i. Reside at home and are at risk of institutionalization because of limitations on their ability to function independently.
   ii. Are patients in hospitals and are at risk of prolonged institutionalization.
   iii. Are patients in long-term care facilities, but who can return to their homes if community-based services can be provided to them.
   iv. Have themselves (or persons of any age who are caring for someone with) a diagnosis of Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.
   v. Are isolated (culturally, socially or physically).
   vi. Have language barriers.
   vii. Have physical or mental disabilities.

c) All Funded Partners are expected to conduct some form of outreach activity intended to reach tertiary target populations. The tertiary groups are people who:
   i. Have dementia.
   ii. Are family caregivers.
   iii. Are frail.
   iv. Are neglected or exploited.
   v. Self-identify as LGBTQ (lesbian, gay, bi-sexual, transgender and questioning/queer).
   vi. Are unemployed and seeking work.
   vii. Are Holocaust survivors.

3) **Special Circumstances**: AAA4 recognizes that in addition to the categories above, special circumstances may exist which warrant priority consideration. In extreme cases, such circumstances may include:

a) An Older Adult or the primary caregiver of an Older Adult or the live-in spouse/partner of an Older Adult has a terminal diagnosis and is actively dying.
b) An Older Adult is being released from a hospital or from a LTC facility to a home or other non-medical setting.
c) An Older Adult has no financial assets whatsoever and no means to obtain income/assets.
d) A court of law has found an Older Adult to be defrauded without gross negligence on his/her own behalf and whose unrecoverable losses have impoverished them.
e) An Older Adult is being placed in a LTC facility although the placement is not medically necessary and the individual does not pose a danger to themselves or others.
f) An Older Adult is homeless or near homeless.
g) An Older Adult has no access to food or water whatsoever.
h) An Older Adult has no means of transportation whatsoever.

SECTION 6. PRIORITY SERVICES & PUBLIC HEARINGS

2024-2028 Four-Year Planning Cycle
Funding for Access, In-Home Services, and Legal Assistance

The CCR, Article 3, Section 7312, requires the AAA to 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 funds[2] 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 and the Percentage of Title III B Funds expended in/or to be expended in FY 2024-25 through FY 2027-2028

Access:

Transportation, Assisted Transportation, Case Management, Information and Assistance, Outreach, Comprehensive Assessment, Health, Mental Health, and Public Information

2024-25 30 % 25-26 30 % 26-27_____% 27-28_____%

In-Home Services:

Personal Care, Homemaker, Chore, Adult Day / Health Care, Alzheimer's Day Care Services, Residential Repairs/Modifications

2024-25 4 % 25-26 ~~Four~~ 3 % 26-27_____% 27-28_____%

Legal Assistance Required Activities:[3]

Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar

2024-25 10% 25-26 10 % 26-27_____% 27-28_____%

Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA.

These percentages arise from the Community-Centered process described in Section 4, meaning they are calculated *after* county-level funding decisions have been made, and they are intended to remain constant throughout the 4-year RFP cycle. However, variations can occur over time due to changes in the availability of funding or the discontinuation of service categories. If they are significant enough, these variations will trigger a "mid-stream" adjustment to the percentages so that minimum levels are maintained.

[2] Minimum percentages of applicable funds are calculated on the annual Title IIIB baseline allocation, minus Title IIIB administration and minus Ombudsman. At least one percent of the final Title IIIB calculation must be allocated for each "Priority Service" category or a waiver must be requested for the Priority Service category(s) that the AAA does not intend to fund.

[3] Legal Assistance must include all the following activities: Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar.

PUBLIC HEARING: At least one public hearing must be held each year of the four-year planning cycle. CCR Title 22, Article 3, Section 7302(a)(10) and Section 7308, Older Americans Act Reauthorization Act of 2020, Section 314(c)(1).

Fiscal Year	Date	Location	Number of Attendees	Presented in languages other than English?[4] Yes or No	Was hearing held at a Long- Term Care Facility?[5] Yes or No
2024-2025	5/16/2024	Agency on Aging Area 4 1401 El Camino Ave. Sacramento, CA	19	No	No
2025-2026	4/11/2025	Agency on Aging Area 4 1401 El Camino Ave. Sacramento, CA	26	No	No
2026-2027					
2027-2028					

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

1. Summarize the outreach efforts used in seeking input into the Area Plan from institutionalized, homebound, and/or disabled older individuals.
   A notice appeared in the Sacramento Bee, the meeting was featured on the A4AA website and e-mails were sent out to all A4AA-funded service providers. A4AA also welcomes written input.

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

   ☒ Yes. Go to question #3

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

3. Summarize the comments received concerning proposed expenditures for PD and/or C.
   The following regarding Placer County Coordination Objective 4.3(b)1 Family & Friends Caregiving Support, "I was excited to see the statement, *'Explore development of an Adult Day Care program in Western Placer County, by conducting a feasibility study in partnership with the County of Placer and the Placer ADRC.'* I have been advocating for the need for Adult Day Care programs since the loss of two programs during COVID. Several entities, including the Lincoln Hills Foundation, Eskaton, and Placer County, have expressed interest in supporting the formation of a new program. I look forward to continued discussions on this important initiative and appreciate the efforts to explore its feasibility."

4. Attendees were provided the opportunity to testify regarding setting minimum percentages of Title III B program funds to meet the adequate proportion of funding for Priority Services

   ☒ Yes. Go to question #5

   ☐ No, Explain:

5. Summarize the comments received concerning minimum percentages of Title IIIB funds to meet the adequate proportion of funding for priority services.

   No comments were received on this subject.

6. List any other issues discussed or raised at the public hearing.
   There was some discussion about why poverty levels appear to have changed at different rates across the 7-county service area.

7. Note any changes to the Area Plan that were a result of input by attendees.
   None of this input has resulted in changes to the Area Plan itself.

4 A translator is not required unless the AAA determines a significant number of attendees require translation services.

5 AAAs are encouraged to include individuals in LTC facilities in the planning process, but hearings are not required to be held in LTC facilities.

SECTION 7. AREA PLAN NARRATIVE GOALS & OBJECTIVES

Aligning the Area Plan Goals with the Master Plan for Aging

This 2024-28 Area Plan contains seven sets of goals: one for each County (except for Yuba & Sutter which are combined), and one for Planning and Service Area 4 (PSA 4) as a region. Within each of these sets, we have adopted the 5 bold goals from the Master Plan for Aging.

GEOGRAPHY	GOAL #1 HOUSING	GOAL #2 HEALTH	GOAL #3 INCLUSION	GOAL #4 CAREGIVING	GOAL #5 AFFORDABILITY
NEVADA	Objectives	Objectives	Objectives	Objectives	Objectives
PLACER	Objectives	Objectives	Objectives	Objectives	Objectives
SACRAMENTO	Objectives	Objectives	Objectives	Objectives	Objectives
SIERRA	Objectives	Objectives	Objectives	Objectives	Objectives
YOLO	Objectives	Objectives	Objectives	Objectives	Objectives
YUBA-SUTTER	Objectives	Objectives	Objectives	Objectives	Objectives
PSA 4	Objectives	Objectives	Objectives	Objectives	Objectives

Nevada, Sacramento and Yuba-Sutter have each developed their own Local Aging & Disability Action Plans which aim to advance goals that are compatible with the Governor's Master Plan for Aging.

The Nevada Playbook (2021-26) and Implementation Plan were developed by the County Adult Services Department and the Nevada ADRC. Agency on Aging Area 4 (AAA4) is a core partner of the Nevada ADRC along with the FREED Center for Independent Living which is also the fiscal/administrative agent. The County of Nevada and/or FREED are the lead agencies for most of the strategies in the Nevada Implementation Plan. This Area Plan references strategies where AAA4 or a funded partner of AAA4 is the lead agency.

The Sacramento Action Plan (2025-30) was developed by the County Department of Child, Family and Adult Services with input from various community partners, including AAA4. Specific strategies to implement the Action Plan are still in development at this time (September 2025). Four workgroups are developing specific strategies.

The Yuba-Sutter Aging and Disability Action Plan (2025-2030) and Implementation Playbook were developed by the Yuba-Sutter ADRC. AAA4 is a core partner and the fiscal agent for the Yuba-Sutter ADRC. Implementation work is happening in parallel with this Area Plan.

The Governor's Master Plan for Aging: Five Bold Goals for 2030

GOAL #1: HOUSING FOR ALL AGES AND STAGES

"We will live where we choose as we age in communities that are age-, disability-, and dementia-friendly and climate- and disaster-ready."

The Master Plan for Aging calls upon local communities to join the State in adopting the following strategies to advance Goal #1:

> More Housing Options as We Age

"California communities are increasingly developing more affordable housing options to meet the needs of all stages of life for all people, regardless of age, race, income, ability, or household size. The production, protection, and preservation of affordable housing, including Accessory Dwelling Units and Residential Care Facilities of all sizes, will support older adults, caregivers, and response families."

> Transportation Beyond Cars

"Age- and disability-friendly transportation networks can be strengthened through improved community walkability and expansion of bus and transit stops, transit rider education and subsidies, seamless paratransit across transit district lines, and driver safety education."

> Outdoor & Community Spaces

"All Californians can benefit from more convenient park access within a ten-minute walk or less, co-location of parks with community centers offering programming for all ages, and incorporation of smart park technologies."

> Emergency Preparedness & Response

"Preparation and planning with and for older adults and people with disabilities is especially important to prioritize, given the higher risk of death or harm due to emergencies and disasters. Improving technologies and communications that address the access and functional needs of residents during disasters can also improve preparedness and response to these growing populations."

> Climate-Friendly Aging

"Age-friendly communities are naturally in alignment with environmentally friendly initiatives, including low-emissions transportation systems; walkable and low vehicle-miles-traveled (VMT) neighborhoods and cities; and in-home energy-saving modifications. Community planning can factor in climate impact and safety, including disaster resiliency, in new, updated, and rebuilt housing and transportation."

GOAL #2: HEALTH REIMAGINED

"We will have access to the services we need to live at home in our communities and to optimize our health and quality of life."

The Master Plan for Aging calls upon local communities to join the State in adopting the following strategies to advance Goal #2:

> Bridging Health Care & Home/Community
"Through innovative partnerships with the federal government, health plans, health systems, and community-based organizations, California can innovate and test new models of health care delivery that maximize access to services – and, as a result, avoid unnecessary institutionalization."

> Health Coverage and Care for All
"California can continue to lead the nation in pursuing strategies to increase access across the spectrum of health care services, including modernizing Medicare counseling services and developing new generic drug manufacturing partnerships, to improve access and care options."

> Lifelong Healthy Aging
"By fostering healthy environments beginning at birth, expanding access to prevention programs, and developing culturally competent public health educational tools and services, California communities can reduce some of the greatest and most inequitable health disparities."

> Geriatric Medicine
"California is home to some of the foremost geriatric experts in the country. Expanding Geriatric Emergency Department certification and increasing geriatric training opportunities will ensure our health care system is staffed by teams including geriatricians and gerontologists, as well as nurses and social workers with geriatric training."

> Dementia in Focus
"California can lead the nation in both preventing cognitive impairment and improving the lives of Californians living with dementia through comprehensive and coordinated strategies on research, brain health awareness, public information portals and hotlines, standards of care for dementia, and dementia-friendly communities, among other forward-leaning recommendations from the Governor's Task Force on Alzheimer's."

> Nursing Home Quality
"California can emerge from the COVID-19 pandemic with renewed commitment to innovation in quality care, including such areas as value-based payment and architectural redesign to smaller, more home-like environments."

GOAL #3: INCLUSION AND EQUITY, NOT ISOLATION

"We will have lifelong opportunities for work, volunteering, engagement, and leadership and will be protected from isolation, discrimination, abuse, neglect, and exploitation."

The Master Plan for Aging calls upon local communities to join the State in adopting the following strategies to advance Goal #3:

> Inclusion & Equity in Aging

"As the most racially, ethnically, and linguistically diverse state in the nation, California can lead in combatting ageism, ableism, racism, xenophobia, sexism, homophobia, and all prejudices and in expanding opportunities for all older adults and people with disabilities to be economically, civically, and socially engaged, without experiencing discrimination or bias. California's aging and disability leaders, providers, and partners are committed to becoming increasingly culturally responsive through strategies including trainings, data collection, public campaigns (including with partners in California's entertainment industry), and targeted equity and inclusion goals in workforce, service planning, and service delivery."

> Closing the Digital Divide

"In August 2020, Governor Gavin Newson signed Executive Order N-73-20 to deploy affordable and reliable broadband throughout the state. Closing the digital divide by increasing access to the internet and digital devices will improve the ability of older adults and people with disabilities to connect to family and friends, health care providers, and to access additional support during the COVID-19 pandemic and beyond."

> Opportunities to Work

"Scaling flexible work and education models, including virtual options, and preventing age discrimination in the workplace, can increase the inclusion of older adults and people with disabilities and harness all of California's talent, professionalism, knowledge, and expertise."

> Opportunities to Volunteer & Engage Across Generations

"Volunteer programs for community priorities can intentionally and effectively recruit, support, and connect adults of all ages through volunteer centers, schools, community sites, libraries, and more."

> Protection from Abuse, Neglect & Exploitation

"Through new statewide coordinated efforts focused on prevention and equity, California can strengthen prevention and responses to elder abuse, neglect, exploitation, and fraud with person-centered, data-driven, and culturally competent approaches."

GOAL #4: CAREGIVING THAT WORKS

“We will be prepared for and supported through the rewards and challenges of caring for aging loved ones.”

The Master Plan for Aging calls upon local communities to join the State in adopting the following strategies to advance Goal #4:

> Family and Friends Caregiving Support

“Family caregivers need supports – such as paid family leave, multilingual training resources, virtual care options, and respite – so that the role remains rewarding and caregivers can maintain health, well-being, and income while caring for a loved one. Given that lower-income women, particularly women of color, disproportionately provide family caregiving, resources and support should be tailored and prioritized accordingly.”

> Good Caregiving Jobs Creation

“The caregiving workforce can be grown through caregiver training and professional development opportunities, along with livable wages, job placement support, and improved job quality. Higher wages will help paid caregivers work toward financial security, alleviate economic disparities, and better reflect the true value of their work.”

> Virtual Care Expansion

“New technologies, many pioneered in California, are paving the way for innovations in personal devices, smart home and community design, telehealth and more, and have the potential to help support caregiving and aging well across the state, nation, and globe.”

GOAL #5: AFFORDING AGING

“We will have economic security for as long as we live.”

The Master Plan for Aging calls upon local communities to join the State in adopting the following strategies to advance Goal #5:

> End Homelessness for Older Adults

“California will continue to invest in innovative solutions to prevent older adult homelessness, reduce barriers to accessing housing programs and services, and promote the transition of those experiencing homelessness to affordable and accessible housing models, with supportive services.”

> Income Security as We Age

“Challenges require multiple approaches: For income, California will pursue partnerships to assess and strengthen all three sources – individual savings, employer-based retirement, and Social Security – and to expand employment opportunities and economic security at all ages. For expenses, reducing housing and health costs (as discussed in goal one and two) will increase elder economic security.”

> Protection from Poverty and Hunger

“The federal/State safety net for older adults and people with disabilities, Supplemental Security Income/State Supplementary Payment (SSI/SSP), has not kept up with poverty levels. A recent state budget agreement proposes to begin to address the SSP in January 2022. The hunger and nutritional needs of older Californians need greater assessment and coordination to provide affordable and culturally appropriate foods through CalFresh (SNAP), food banks, meal delivery at home, congregate meals at day centers and long-term care facilities, farmers markets, and medically tailored meals, among others.”

AAA4's 2024 – 2028 Strategic Area Plan:

NEVADA COUNTY, California

The local access point to a "No Wrong Door" system where people of all incomes and ages can turn for the full range of long-term support options and smooth access to public programs and benefits.

ADRC of Nevada County	7/25 to 6/26	ADRC

The Nevada County ADRC will continue to lead by bringing together diverse community partners to improve service delivery for older adults and people with disabilities, and to promote ease of access to resources available.

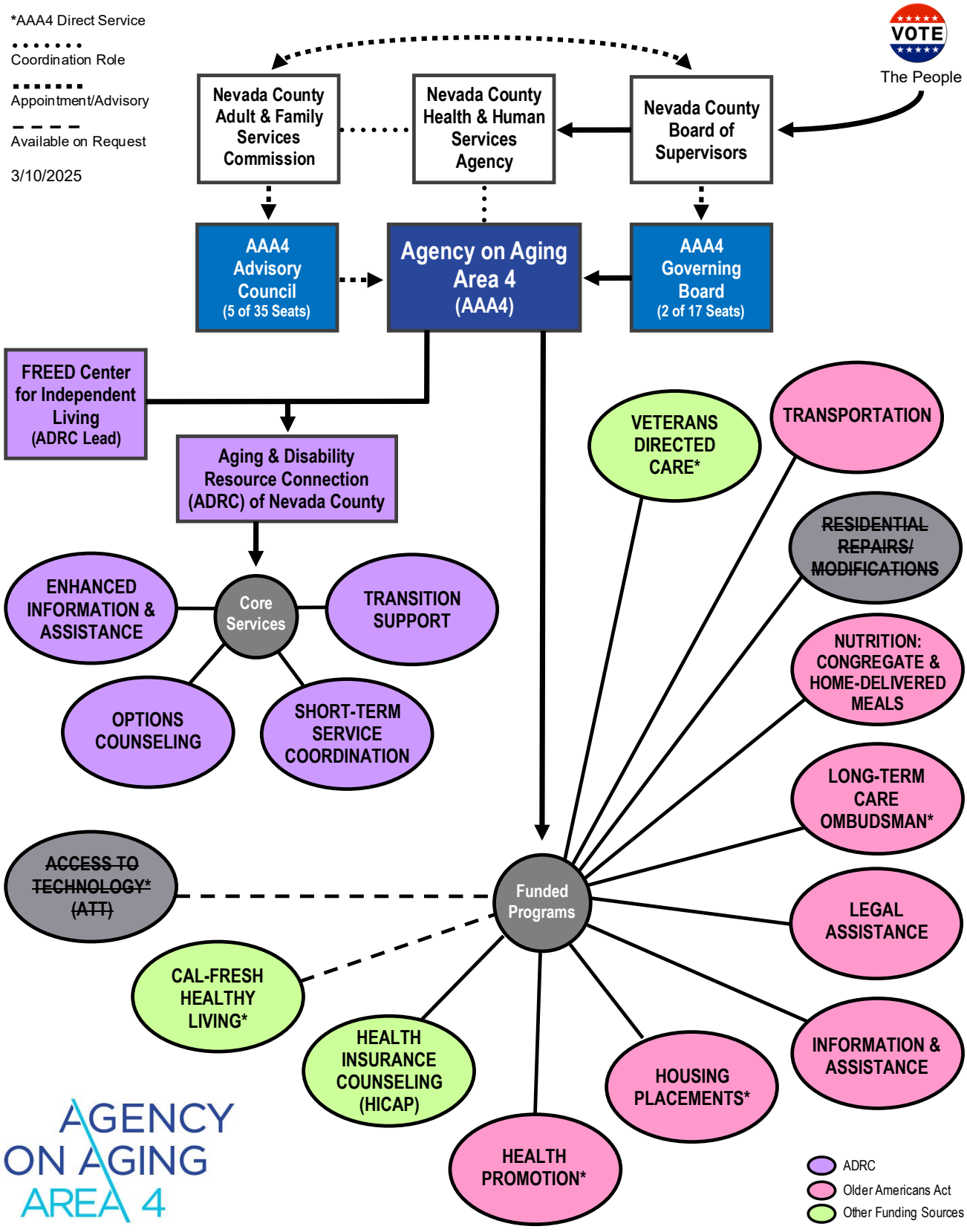
- Enhanced Information & Assistance – ADRC Core Service
  Provides comprehensive information to people of any age, disability type and income level/source. Includes a warm hand off and follow-up to ensure quality referrals.
- Person Centered Options Counseling – ADRC Core Service
  Personal interview to discover the consumers' strengths, values, and preferences; decision support including fact finding and the weighing of pros and cons resulting in facilitated decision making; personalized action steps detailing consumers goals; and, follow-up to evaluate action plan success or the need for changes/plan adjustments.
- Short-Term Service Coordination – ADRC Core Service
  Personalized service coordination (usually 90 days or less) for the purpose of stabilizing a situation for individuals whose health, safety and welfare are at risk; and assistance to prevent unnecessary admittance to emergency department or institutional placement.
- Transition Support – ADRC Core Service
  Support a person with information, decision support and coordination of multiple services in order to successfully move from a health care facility back to a community home.
  Includes both hospital/acute care to home, as well as nursing facility to home.

Additional goals for SFY 2025-26 include:

- ❖ Increasing visibility of the ADRC and public awareness of programs and services available to older adults and people with disabilities in Nevada County.
- ❖ Understanding gaps in services and consumer satisfaction with ADRC services.
- ❖ Collaborating with partners to identify and pursue additional grants and funding opportunities to expand its capacity to provide the core services of the ADRC.

FREED Center for Independent Living
https://freed.org/adrc/adrc-nevada-county/ or (530) 477-3333

Aging Services Network: Nevada County



NEVADA COUNTY, California

GOAL #1: HOUSING FOR ALL AGES AND STAGES

"We will live where we choose as we age in communities that are age-, disability-, and dementia-friendly and climate- and disaster-ready."

1.1 NEVADA: Provide Services that Advance Goal #1

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Information & Assistance – Title III-B Supportive Service
211 Nevada County, a program of Connecting Point
https://211connectingpoint.org/ or 2-1-1 or (833) 342-5211
Provides individuals with information on services available within their communities.

2) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.

~~3) Residential Repairs/Modifications – Title III-B Supportive Service~~
~~*Fix It*, a program of FREED Center for Independent Living~~

4) Transportation – Title III-B Supportive Service
Hospitality House
https://hhshelter.org/transportation/ or (530) 271-7144
Offer rides to and from local medical offices, shopping centers, and senior centers, with priority given to unhoused and at-risk older adults.

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) Veterans-Directed Care
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/ or (800) 211-4545
Note: Individuals must first be referred by a physician at a VA Medical Center.
With the help of an options counselor, veterans at risk of institutionalization manage their own flexible budgets, decide what mix of goods and services best meet their needs, and hire and supervise their own care workers, thus allowing them to continue living at home.

Staff Lead: VDC Program Manager (Liz)

1.2 NEVADA: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

Support Nevada County's Local Playbook (Strategy 5.3) by:

Committing resources to the development of a new volunteer-based transportation program.

- Year 1 (**2025-26**): Develop a sustainable business plan in partnership with the County of Nevada and the Nevada ADRC
- Year 2 (**2026-27**): Launch the pilot project (if determined feasible)
- Year 3 (**2027-28**): Evaluate the project, make improvements and prepare for transition to a standalone program or an ongoing Older Americans Act Program

Staff Lead: Regional Services Specialists –Rebecca

1.3 NEVADA: Coordinate with Community Partners on Goal #1

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #1 strategies, including but not limited to the following.

1) Nevada County Adult & Family Services Commission
2) Nevada County Planning Commission
3) Nevada County Social Services Transportation Advisory Council (SSTAC)
4) Northern Sierra Air Quality District
5) Operational Area Emergency Services Council (Nevada County)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

1.3 NEVADA: Coordinate with Community Partners on Goal #1 (continued)		
(B) Engage with Lead Organizations & Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #1 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "More Housing Options as We Age"
   a) Regional Housing Authority (Sutter, Yuba, Colusa & Nevada Counties)
   b) Nevada County Habitat for Humanity
   c) Nevada County Health & Human Services – Housing Programs
2) "Transportation Beyond Cars"
   a) Nevada County Transportation Commission
   b) Nevada County Transit Services Division (Nevada County Connects)
   c) Tahoe Transportation District
   d) Tahoe Truckee Area Regional Transportation (TART)
3) "Outdoor & Community Spaces" – Parks & Recreation
   a) City of Grass Valley
   b) City of Nevada City
   c) County of Nevada
   d) Town of Truckee
   e) Nevada City Senior Apartments
   f) Truckee Donner Senior Apartments
4) "Emergency Preparedness & Response"
   a) Nevada County Office of Emergency Services (OES)
   b) Fire Safe Council of Nevada County
   c) Nevada County Public Health, Emergency Preparedness Program
   d) Nevada County Relief Fund
5) "Climate-Friendly Aging"
   a) Nevada County Environmental Health Department
   b) Northern Sierra Air Quality District
   c) Climate Transformation Alliance (CTA)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

1.4 NEVADA: Recommendations regarding the Strategies under Goal #1

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "More Housing Options as We Age"	7/25 to 6/26	R
To be determined.		
(B) "Transportation Beyond Cars"	7/25 to 6/28	R
Support Nevada County's Local Playbook (Strategy 5.4) by: 1) Encouraging Nevada County Connects and other stakeholders to work with 211 Connecting Point to coordinate outreach to older adults and people with disabilities regarding transportation service opportunities, including travel training.		
(C) "Outdoor and Community Spaces"	7/25 to 6/26	R
To be determined.		
(D) "Emergency Preparedness & Response"	7/25 to 6/26	R
To be determined.		
(E) "Climate-Friendly Aging"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #2: HEALTH REIMAGINED

"We will have access to the services we need to live at home in our communities and to optimize our health and quality of life."

2.1 NEVADA: Provide Services that Advance Goal #2

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Health Promotion (Evidence-Based) – Title III-D Services
Diabetes Education & Empowerment Program (DEEP) and
Matter of Balance (MOB), programs of AAA4
https://agencyonaging4.org/wellness/ or (916) 486-1876
Evidence based health promotion programs to help manage chronic disease and to prevent injuries due to falls.

2) Information & Assistance – Title III-B Supportive Service
211 Nevada County, a program of Connecting Point
https://211connectingpoint.org/ or 2-1-1 or (833) 342-5211
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing health benefits including MediCal and Covered California.

4) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

Staff Lead: Health Promotion Manager (Brittany), Intake Ombudsman (Anne & La'Sharae), and Regional Services Specialist (Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and III-C services open for competitive bid for SFY 25-26 and beyond. III-D and Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) Health Insurance Counseling & Advocacy Program (HICAP)
HICAP Services of Northern California, a program of LSNC
https://www.hicapservices.net/ or (530) 258-6827
Provides free, unbiased and confidential Medicare counseling and advocacy services.

Staff Lead: Regional Services Specialist (Rebecca)

HICAP services open for competitive bid for April 1, 2027 and beyond. Contact AAA4 for details.

2.2 NEVADA: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

2.3 NEVADA: Coordinate with Community Partners on Goal #2

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #2 strategies, including but not limited to the following.

1) Emergency Medical Care Committee (Nevada County)
2) Mental Health & Substance Use Advisory Board (Nevada County)
3) Nevada County Adult & Family Services Commission
4) Partnership Health Plan of California Commission

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

2.3 NEVADA: Coordinate with Community Partners on Goal #2 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #2 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Bridging Health Care with Home" (Cross-Sector Partnerships)
   a) Nevada County Behavioral Health – CalAIM Lead Agency
   b) Nevada County Veterans Services
   c) Gold Country Community Services
   d) Hospitality House
   e) Sierra Nevada Memorial Hospital
   f) Tahoe Forest Hospital
2) "Health Care as We Age" (Affordable Prescription Drugs)
   a) Sierra Nevada Memorial Hospital Foundation
   b) Tahoe Forest Health System Foundation
3) "Lifelong Healthy Aging"
   a) Falls Prevention Coalition of Nevada County
   b) Nevada County Public Health – Senior Outreach Nurses
   c) Nevada County Public Health Department
4) "Geriatric Care Expansion"
   a) Geriatric Care Manager Educational Consulting
   b) Sierra College – Nursing Program
5) "Dementia in Focus"
   a) Sierra Nevada Memorial Hospital Foundation, Alzheimer's Outreach Program
6) "Nursing Home Innovation"
   a) 211 Connecting Point (Nevada)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

2.4 NEVADA: Recommendations regarding the Strategies under Goal #2

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "Bridging Health Care with Home" (Cross-Sector Partnership)	7/25 to 6/28	R
Support Nevada County's Local Playbook (Strategy 2.1) by: 1) Encouraging the Homeless Resource Council and other stakeholders to work with Hospitality House to identify a funding stream to support additional recuperative care beds for individuals experiencing homelessness and identifying needed professional medical personnel if additional beds are secured.		
(B) "Health Care as We Age" (including Affordable Prescription Drugs)	7/25 to 6/28	R
Support Nevada County's Local Playbook (Strategy 6.4) by: 1) Encouraging the Elder Care Provider Coalition and other stakeholders to work with 211 Connecting Point to coordinate with local programs and services to continue development of a community data exchange.		
(C) "Lifelong Healthy Aging"	7/25 to 6/26	R
To be determined.		
(D) "Geriatric Care Expansion"	7/25 to 6/26	R
To be determined.		
(E) "Dementia in Focus"	7/25 to 6/26	R
To be determined.		
(F) "Nursing Home Innovation"	7/25 to 6/26	R
To be determined.		
(G) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

NEVADA COUNTY, California

GOAL #3: INCLUSION AND EQUITY, NOT ISOLATION

"We will have lifelong opportunities for work, volunteering, engagement, and leadership and will be protected from isolation, discrimination, abuse, neglect, and exploitation."

3.1 NEVADA: Provide Services that Advance Goal #3

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Information & Assistance – Title III-B Supportive Service
211 Nevada County, a program of Connecting Point
https://211connectingpoint.org/ or 2-1-1 or (833) 342-5211
Provides individuals with information on services available within their communities.

2) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing employment benefits.

3) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

Staff Lead: Intake Ombudsman (Anne & La'Sharae) and Regional Services Specialist (Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	~~7/24 to 6/25~~	S

~~1) Access to Technology (ATT)~~
~~Digital Inclusion Program, a program of AAA4~~

3.2 NEVADA: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

3.3 NEVADA: Coordinate with Community Partners on Goal #3

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers, particularly around employment and protection from abuse. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #3 strategies, including but not limited to the following.

1) Nevada County Consolidated Veterans Council
2) Nevada County Economic Resource Council (NCERC)
3) Nevada County Adult & Family Services Commission
4) Northern Rural Training Employment Consortium (NORTEC)
5) Planning Commission (Nevada County)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

3.3 NEVADA: Coordinate with Community Partners on Goal #3 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #3 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Inclusion & Equity in Aging"
   a) Color Me Human
   b) California Heritage Indigenous Research Project (CHIRP)
   c) Tahoe Truckee Community Collaborative
2) "Closing the Digital Divide"
   a) Gold Country Broadband Consortium
   b) Nevada County General and Information Services – Broadband Initiatives
3) "Opportunities to Work"
   a) FREED Center for Independent Living
   b) Nevada County Business and Career Network
   c) Pride Industries
4) "Opportunities to Volunteer"
   a) Connecting Point – Volunteer Hub
   b) Give Back Tahoe
5) "Protection from Abuse, Neglect & Exploitation"
   a) Nevada County Adult Protective Services (APS)
   b) Nevada County District Attorney – Victim/Witness Program
   c) Community Beyond Violence

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

3.4 NEVADA: Recommendations regarding the Strategies under Goal #3

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "Inclusion & Equity in Aging"	7/25 to 6/26	R
To be determined.		
(B) "Closing the Digital Divide"	7/25 to 6/26	R
To be determined.		
(C) "Opportunities to Work"	7/25 to 6/26	R
To be determined.		
(D) "Opportunities to Volunteer & Engage"	7/25 to 6/28	R
Support Nevada County's Local Playbook (Strategy 1.1) by: 1) Encouraging the City of Grass Valley and other stakeholders to work with Gold Country Senior Services to develop a Senior Center in Western Nevada County. 2) Encouraging the Town of Truckee and other stakeholders to work with Sierra Senior Services to develop a Senior Center in Eastern Nevada County.		
(E) "Protection from Abuse, Neglect & Exploitation"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #4: CAREGIVING THAT WORKS

"We will be prepared for and supported through the rewards and challenges of caring for aging loved ones."

4.1 NEVADA: Provide Services that Advance Goal #4

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Information & Assistance – Title III-B Supportive Service
211 Nevada County, a program of Connecting Point
https://211connectingpoint.org/ or 2-1-1 or (833) 342-5211
Provides individuals with information on services available within their communities.

Staff Lead: Regional Services Specialist (Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

Not applicable.

4.2 NEVADA: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

4.3 NEVADA: Coordinate with Community Partners on Goal #4

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #4 strategies, including but not limited to the following.

1) Nevada County Adult & Family Services Commission

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #4 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Family & Friends Caregiving Support"
   a) Del Oro Caregiver Resource Center
   b) Alta California Regional Center
   c) One Source, Empowering Caregivers
   d) Golden Crossroads Care Management
   e) Helping Hands Adult Day Program
2) "Good Caregiving Jobs Creation"
   a) Connecting Point – IHSS Public Authority
   b) Connecting Point – IHSS Caregiver Registry
   c) Sierra College – Nursing Assistant Training Program
3) "Virtual Care Expansion"
   a) FREED Center for Independent Living – Assistive Technology
   b) Chapa-De Indian Health – Telehealth Program
   c) Nevada County Behavioral Health – Telehealth Services
   d) Sierra Nevada Memorial Hospital – Video Visits
   e) Tahoe Forest Health System – Telemedicine

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

4.4 NEVADA: Recommendations regarding the Strategies under Goal #4

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "Family & Friends Caregiving Support"	7/25 to 6/26	R
To be determined.		
(B) "Good Caregiving Jobs Creation"	7/25 to 6/28	R
Support Nevada County's Local Playbook (Strategy 3.1) by: 1) Encouraging Sierra College and other stakeholders to work with 211 Connecting Point to develop and promote a community college-to-caregiver pipeline. Support Nevada County's Local Playbook (Strategy 3.3) by: 2) Encouraging United Domestic Workers and other stakeholders to work with 211 Connecting Point to determine local barriers to obtaining an IHSS caregiver for those who quality. Support Nevada County's Local Playbook (Strategy 3.5) by: 3) Encouraging the California Department of Social Services and other stakeholders to work with 211 Connecting Point to advocate for standardizing IHSS caregiver pay across the State.		
(C) "Virtual Care Expansion"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

NEVADA COUNTY, California

GOAL #5: AFFORDING AGING

"We will have economic security for as long as we live."

5.1 NEVADA: Provide Services that Advance Goal #5

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Housing – Title III-B Supportive Service
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/ or (916) 486-1876
Seeks to facilitate housing placement among existing clients of AAA4.

2) Information & Assistance – Title III-B Supportive Service
211 Nevada County, a program of Connecting Point
https://211connectingpoint.org/ or 2-1-1 or (833) 342-5211
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.

4) Nutrition: Congregate & Home-Delivered Meals – Title III-C Nutrition
Congregate meals are provided at designated "senior lunch sites," and Home-Delivered Meals (aka Meals on Wheels) are provided to "homebound" older adults where they live.

a) Eastern Nevada County
Sierra Senior Services (SSS)
https://www.sierraseniors.org/meal-delivery/ or (530) 550-7600

b) Western Nevada County
Gold Country Community Services (GCCS)
https://www.goldcountryservices.org/senior-nutrition-program/ or (530) 273-4961

Staff Lead: Program Developer (Julie) and Regional Services Specialists (Clayton & Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and III-C services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) CalFresh Healthy Living
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/wellness/ or (800) 211-4545
Provides classes and information to help low-income older adults lead a healthy lifestyle. This program provides activities to: Eat healthy on a budget, Live a healthy lifestyle, Eat a balanced diet.

Staff Lead: Health Promotion Manager (Brittany)

5.2 NEVADA: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

5.3 NEVADA: Coordinate with Community Partners on Goal #5

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #5 strategies, including but not limited to the following.

1) Mental Health & Substance Use Advisory Board (Nevada County)
2) Nevada County Adult & Family Services Commission
3) Nevada County Economic Resource Council

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

5.3 NEVADA: Coordinate with Community Partners on Goal #5 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #5 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "End Homelessness for Older Adults"
   a) Nevada County Regional Continuum of Care
   b) 211 Connecting Point – Coordinated Entry Point
   c) Homeless Resource Council of the Sierras
   d) Hospitality House
   e) Nevada County Health & Human Services – Better Together: Homelessness Initiative
2) "Income Security as We Age"
   a) FREED Center for Independent Living
   b) Legal Services of Northern California – Western States Pension Assistance Project
   c) Nevada County Business and Career Network
3) "Protection from Poverty & Hunger"
   a) Nevada County Health & Human Services – CalFresh Food Assistance
   b) Nevada County Health & Human Services – General Assistance
   c) Food Bank of Nevada County
   d) Gold Country Community Services
   e) Interfaith Food Ministries
   f) Seventh Day Adventist Church
   g) Sierra Senior Services
   h) The Salvation Army

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

5.4 NEVADA: Recommendations regarding the Strategies under Goal #5

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "End Homelessness for Older Adults"	7/25 to 6/26	R
To be determined.		
(B) "Income Security as We Age"	7/25 to 6/26	R
To be determined.		
(C) "Protection from Poverty & Hunger"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

AAA4's 2024 – 2028 Strategic Area Plan:

PLACER COUNTY, California

The local access point to a "No Wrong Door" system where people of all incomes and ages can turn for the full range of long-term support options and smooth access to public programs and benefits.

ADRC of Placer County	7/25 to 6/26	ADRC

The ADRC of Placer County will continue to lead by bringing together diverse community partners to improve service delivery for older adults and people with disabilities, and to promote ease of access to resources available.

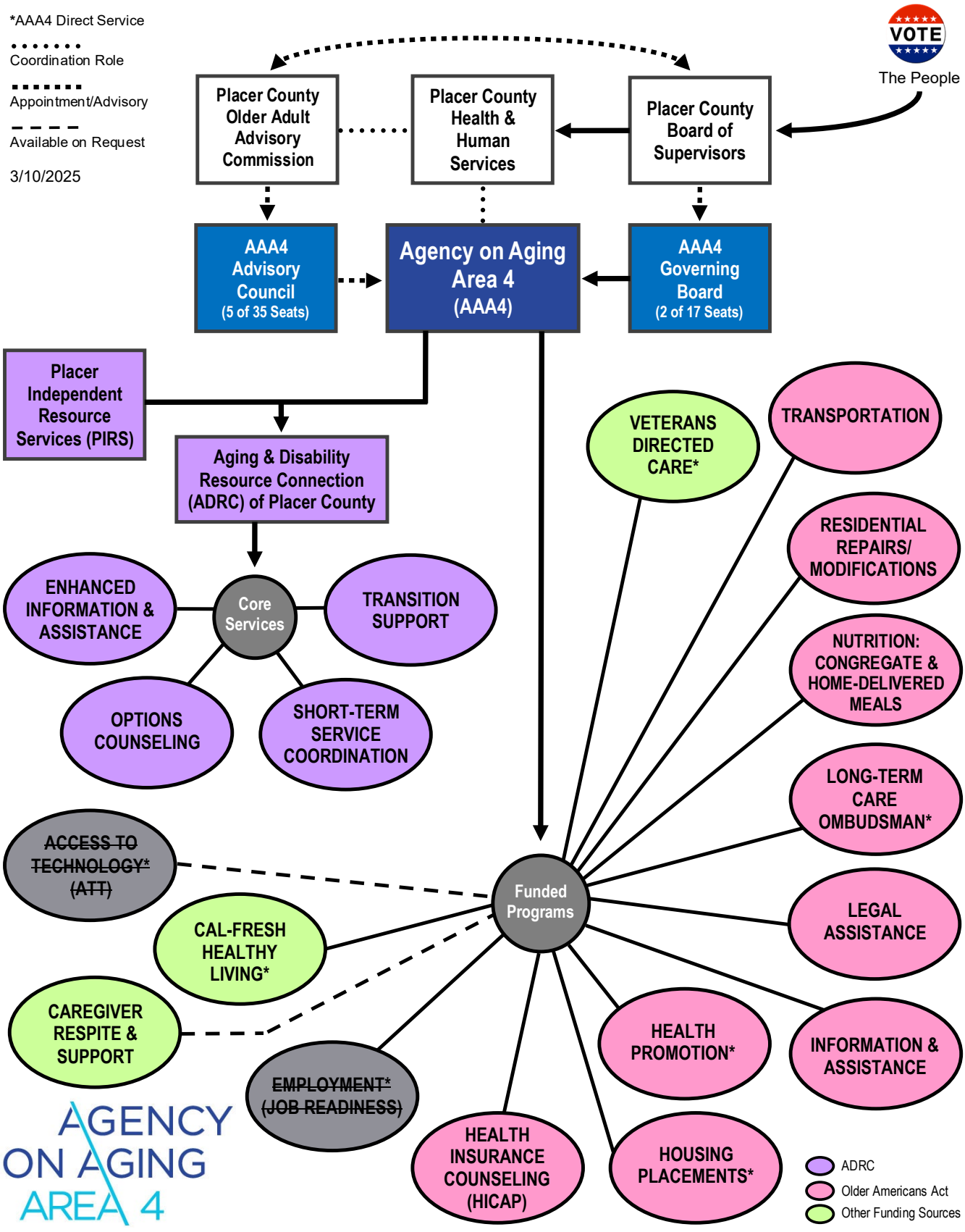
- Enhanced Information & Assistance – ADRC Core Service
  Provides comprehensive information to people of any age, disability type and income level/source. Includes a warm hand off and follow-up to ensure quality referrals.
- Person Centered Options Counseling – ADRC Core Service
  Personal interview to discover the consumers' strengths, values, and preferences; decision support including fact finding and the weighing of pros and cons resulting in facilitated decision making; personalized action steps detailing consumers goals; and, follow-up to evaluate action plan success or the need for changes/plan adjustments.
- Short-Term Service Coordination – ADRC Core Service
  Personalized service coordination (usually 90 days or less) for the purpose of stabilizing a situation for individuals whose health, safety and welfare are at risk; and assistance to prevent unnecessary admittance to emergency department or institutional placement.
- Transition Support – ADRC Core Service
  Support a person with information, decision support and coordination of multiple services in order to successfully move from a health care facility back to a community home.
  Includes both hospital/acute care to home, as well as nursing facility to home.

Additional goals for SFY 2025-26 include:

- ❖ Increasing partner engagement and community awareness of the ADRC within the public through coordinated outreach efforts, including non-English speaking communities.
- ❖ Increasing the knowledge of potential funding options for ADRC core services, including Medi-Cal reimbursement.
- ❖ Establishing connections with elected officials to investigate funding support and raise awareness of the Placer ADRC with government entities.

Agency on Aging Area 4 (AAA4)
https://adrc4.org/sacramento-county/ or (800) 211-4545

Aging Services Network: Placer County



GOAL #1: HOUSING FOR ALL AGES AND STAGES

"We will live where we choose as we age in communities that are age-, disability-, and dementia-friendly and climate- and disaster-ready."

1.1 PLACER: Provide Services that Advance Goal #1

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Information & Assistance – Title III-B Supportive Service
Seniors First
https://seniorsfirst.org/sf-programs/information-assistance-2/ or (530) 889-9500
Provides individuals with information on services available within their communities.

2) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.

3) Residential Repairs/Modifications – Title III-B Supportive Service
Placer Independent Resource Services (PIRS)
https://pirs.org/services/ or (530) 885-6100
Offers minor repairs/renovations and equipment to meet safety, health issues, and code standards (e.g., grab bars, smoke detectors, small ramps).

4) Transportation – Title III-B Supportive Service
Placer Rides, a Program of Seniors First
https://seniorsfirst.org/sf-programs/transportation/ or (530) 889-9500
Offers rides for older adults with critical health needs to and from medical appointments.

Staff Lead: Regional Services Specialists (Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) Veterans-Directed Care
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/ or (800) 211-4545
Note: Individuals must first be referred by a physician at a VA Medical Center.
With the help of an options counselor, veterans at risk of institutionalization manage their own flexible budgets, decide what mix of goods and services best meet their needs, and hire and supervise their own care workers, thus allowing them to continue living at home.

Staff Lead: VDC Program Manager – Liz

1.2 PLACER: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

1.3 PLACER: Coordinate with Community Partners on Goal #1

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #1 strategies, including but not limited to the following.

1) Placer County Older Adult Advisory Commission (OAAC)
2) Placer County Housing Development Advisory Task Force
3) Placer County Parks Commission
4) Placer County Planning Commission
5) Social Services Transportation Advisory Council (SSTAC)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

1.3 PLACER: Coordinate with Community Partners on Goal #1 (continued)		
(B) Engage with Lead Organizations & Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #1 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "More Housing Options as We Age"
   a) Regional Housing Authority (Sutter, Yuba, Colusa & Placer Counties)
   b) Foothills Habitat for Humanity
   c) Placer County Community Development Resource Agency – Housing Programs
2) "Transportation Beyond Cars"
   a) Placer County Transportation Planning Agency (PCTPA)
   b) Tahoe Regional Planning Agency
   c) Placer County Transit
   d) Tahoe Transportation District
   e) Tahoe Truckee Area Regional Transportation (TART)
3) "Outdoor & Community Spaces" – Parks & Recreation
   a) City of Auburn
   b) City of Colfax
   c) City of Lincoln
   d) City of Rocklin
   e) City of Roseville
   f) County of Placer
   g) Town of Loomis
   h) Auburn Senior Center
   i) Lincoln Senior Center
   j) Maidu Community Center
4) "Emergency Preparedness & Response"
   a) Placer County Office of Emergency Services (OES)
   b) Placer County Fire Safe Alliance
   c) Placer County Disaster Relief Program
5) "Climate-Friendly Aging"
   a) Placer County Air Pollution Control District
   b) Placer County Environmental Health Department
   c) Placer County Community Development – Sustain Placer
   d) Project Go, Inc.

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

1.4 PLACER: Recommendations regarding the Strategies under Goal #1 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "More Housing Options as We Age"	7/25 to 6/26	R
To be determined.		
(B) "Transportation Beyond Cars"	7/25 to 6/26	R
To be determined.		
(C) "Outdoor and Community Spaces"	7/25 to 6/26	R
To be determined.		
(D) "Emergency Preparedness & Response"	7/25 to 6/26	R
To be determined.		
(E) "Climate-Friendly Aging"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #2: HEALTH REIMAGINED

"We will have access to the services we need to live at home in our communities and to optimize our health and quality of life."

2.1 PLACER: Provide Services that Advance Goal #2

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Health Promotion (Evidence-Based) – Title III-D Services
Bingocize, Diabetes Education & Empowerment Program (DEEP) and
Matter of Balance (MOB), programs of AAA4
https://agencyonaging4.org/wellness/ or (916) 486-1876
Evidence based health promotion programs to facilitate exercise, to help manage chronic disease and to prevent injuries due to falls.

2) Information & Assistance – Title III-B Supportive Service
Seniors First
https://seniorsfirst.org/sf-programs/information-assistance-2/ or (530) 889-9500
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing health benefits including MediCal and Covered California.

4) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

Staff Lead: Health Promotion Manager (Brittany), Intake Ombudsman (Anne & La'Sharae) and Regional Services Specialist (Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and III-C services open for competitive bid for SFY 25-26 and beyond. III-D and Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) Health Insurance Counseling & Advocacy Program (HICAP)
HICAP Services of Northern California, a program of LSNC
https://www.hicapservices.net/ or (800) 434-0222
Provides free, unbiased and confidential Medicare counseling and advocacy services.

Staff Lead: Regional Services Specialist (Rebecca)

HICAP services open for competitive bid for April 1, 2027 and beyond. Contact AAA4 for details.

2.2 PLACER: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

2.3 PLACER: Coordinate with Community Partners on Goal #2

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #2 strategies, including but not limited to the following.

1) Emergency Medical Care Committee (Placer County)
2) Mental Health, Alcohol and Drug Advisory Board (Placer County)
3) Placer County Older Adult Advisory Commission (OAAC)
4) Partnership Health Plan of California Commission
5) Veterans Advisory Council (Placer County)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

2.3 PLACER: Coordinate with Community Partners on Goal #2 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #2 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Bridging Health Care with Home" (Cross-Sector Partnerships)
   a) Placer County Behavioral Health – CalAIM Lead Agency
   b) Placer County Veterans Service Office
   c) Kaiser Permanente Roseville Medical Center
   d) Sierra Foothills VA Clinic
   e) Sutter Auburn Faith Hospital
   f) Sutter Roseville Medical Center
2) "Health Care as We Age" (Affordable Prescription Drugs)
   a) Sierra Community Medical Foundation
3) "Lifelong Healthy Aging"
   a) Campaign for Community Wellness
   b) Placer County Public Health – Home Visitation Program
4) "Geriatric Care Expansion"
   a) Sierra College – Nursing Program
   b) Silver Pathways
5) "Dementia in Focus"
   a) Placer County Healthy Brain Initiative
   b) Sierra Placer Memorial Hospital Foundation, Alzheimer's Outreach Program
6) "Nursing Home Innovation"
   a) 211 Connecting Point (Placer)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

2.4 PLACER: Recommendations regarding the Strategies under Goal #2

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "Bridging Health Care with Home" (Cross-Sector Partnership)	7/25 to 6/26	R
To be determined.		
(B) "Health Care as We Age" (Affordable Prescription Drugs)	7/25 to 6/26	R
To be determined.		
(C) "Lifelong Healthy Aging"	7/25 to 6/26	R
To be determined.		
(D) "Geriatric Care Expansion"	7/25 to 6/26	R
To be determined.		
(E) "Dementia in Focus"	7/25 to 6/26	R
To be determined.		
(F) "Nursing Home Innovation"	7/25 to 6/26	R
To be determined.		
(G) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

PLACER COUNTY, California

GOAL #3: INCLUSION AND EQUITY, NOT ISOLATION

"We will have lifelong opportunities for work, volunteering, engagement, and leadership and will be protected from isolation, discrimination, abuse, neglect, and exploitation."

3.1 PLACER: Provide Services that Advance Goal #3

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

~~1) Employment – Title III-B Supportive Service~~
~~*Mature Edge Job Readiness*, a Program of AAA4~~
~~https://agencyonaging4.org/mature-edge-job-readiness-program/ or (916) 486-1876~~
~~Offers a series of interactive job readiness sessions preparing the mature worker for a productive and successful job search.~~

2) Information & Assistance – Title III-B Supportive Service
Seniors First
https://seniorsfirst.org/sf-programs/information-assistance-2/ or (530) 889-9500
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing employment benefits.

4) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

Staff Lead: Job Readiness Coordinator (Bobby), Intake Ombudsman (Anne & La'Sharae) and Regional Services Specialist (Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:		S

~~1) Access to Technology (ATT)~~
~~Digital Inclusion Program, a program of AAA4~~
~~https://agencyonaging4.org/ or (916) 486-1876~~
~~Provides older adults and adults with disabilities with mobile computer devices and digital skills training to keep them engaged with their communities.~~

~~Staff Lead: Program Administrator (Nancy)~~

3.2 PLACER: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

3.3 PLACER: Coordinate with Community Partners on Goal #3

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers, particularly around employment and protection from abuse. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #3 strategies, including but not limited to the following.

1) Placer County Economic Development Board
2) Placer County Older Adult Advisory Commission (OAAC)
3) Planning Commission (Placer County)
4) Veterans Advisory Council (Placer County)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

3.3 PLACER: Coordinate with Community Partners on Goal #3 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #3 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Inclusion & Equity in Aging"
   a) Placer Race, Equity, Access, Diversity & Inclusion (READI)
   b) Sierra Business Council
   c) Tahoe Truckee Community Collaborative
2) "Closing the Digital Divide"
   a) Gold Country Broadband Consortium
   b) Placer County Information Technology – Broadband Equity Program
3) "Opportunities to Work"
   a) AARP Roseville – Senior Community Service Employment Program
   b) Auburn Connections
   c) Connections One-Stop Roseville
   d) FREED Center for Independent Living
   e) Golden Sierra Job Training Agency
   f) Placer Business Resource Center
   g) Pride Industries
4) "Opportunities to Volunteer"
   a) 211 Placer – Volunteer Opportunities
   b) Give Back Tahoe
   c) Seniors First – Senior Information & Assistance
5) "Protection from Abuse, Neglect & Exploitation"
   a) Placer County Adult Protective Services (APS)
   b) Placer County District Attorney – Victim Services
   c) Stand Up Placer

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

3.4 PLACER: Recommendations regarding the Strategies under Goal #3		
The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Inclusion & Equity in Aging"	7/25 to 6/26	R
To be determined.		
(B) "Closing the Digital Divide"	7/25 to 6/26	R
To be determined.		
(C) "Opportunities to Work"	7/25 to 6/26	R
To be determined.		
(D) "Opportunities to Volunteer"	7/25 to 6/26	R
To be determined.		
(E) "Protection from Abuse, Neglect & Exploitation"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #4: CAREGIVING THAT WORKS

"We will be prepared for and supported through the rewards and challenges of caring for aging loved ones."

4.1 PLACER: Provide Services that Advance Goal #4

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Caregiver Assessment, Case Management & Respite – Title III-E Services
   Del Oro Caregiver Resource Center
   https://www.deloro.org/services or (916) 728-9333
   Provides an assessment of caregiver needs along with ongoing consultation, case management as needed, and respite care as available. A limited amount of caregiver respite is available to some families.
2) Information & Assistance – Title III-B Supportive Service
   Seniors First
   https://seniorsfirst.org/sf-programs/information-assistance-2/ or (530) 889-9500
   Provides individuals with information on services available within their communities.

Staff Lead: Regional Services Specialist (Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. III-E services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

Not applicable.

4.2 PLACER: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

4.3 PLACER: Coordinate with Community Partners on Goal #4

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #4 strategies, including but not limited to the following.

1) In-Home Supportive Services Advisory Committee
2) Placer County Older Adult Advisory Commission (OAAC)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #4 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Family & Friends Caregiving Support"
   Explore development of an Adult Day Care program in Western Placer County, by conducting a feasibility study in partnership with the County of Placer and the Placer ADRC. – *As initially proposed by the local Ad Hoc Workgroup*
   a) Placer County Adult System of Care – Senior Peer Counseling
   b) The Arc of Placer County
2) "Good Caregiving Jobs Creation"
   a) Placer County Adult System of Care – IHSS Public Authority
   b) PIRS – Caregiver Registry
   c) Sierra College – Nursing Assistant Training Program
3) "Virtual Care Expansion"
   a) PIRS – Assistive Technology
   b) Chapa-De Indian Health – Telehealth Program
   c) Dignity Health – Telemedicine Network
   d) Kaiser Permanente – Telehealth
   e) Placer County Adults System of Care – Telehealth for Substance Use Treatment
   f) Sutter Health – Video Visits
   g) UC Davis Health – Telehealth Express Care

Staff Lead: Regional Services Specialists (Rebecca)

4.4 PLACER: Recommendations regarding the Strategies under Goal #4		
The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Family & Friends Caregiving Support"	7/25 to 6/26	R
To be determined.		
(B) "Good Caregiving Jobs Creation"	7/25 to 6/26	R
To be determined.		
(C) "Virtual Care Expansion"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #5: AFFORDING AGING

"We will have economic security for as long as we live."

5.1 PLACER: Provide Services that Advance Goal #5

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Housing – Title III-B Supportive Service
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/ or (916) 486-1876
Seeks to facilitate housing placement among existing clients of AAA4.

2) Information & Assistance – Title III-B Supportive Service
Seniors First
https://seniorsfirst.org/sf-programs/information-assistance-2/ or (530) 889-9500
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.

4) Nutrition: Congregate & Home-Delivered Meals – Title III-C Nutrition
Congregate meals are provided at designated "senior lunch sites," and Home-Delivered Meals (aka Meals on Wheels) are provided to "homebound" older adults where they live.

a) Eastern Placer County
Sierra Senior Services (SSS)
https://www.sierraseniors.org/meal-delivery/ or (530) 550-7600

b) Western Placer County
Gold Country Community Services (GCCS)
https://www.goldcountryservices.org/senior-nutrition-program/ or (530) 273-4961

Staff Lead: Program Developer (Julie) and Regional Services Specialists (Clayton & Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and III-C services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) CalFresh Healthy Living
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/wellness/ or (800) 211-4545
Provides classes and information to help low-income older adults lead a healthy lifestyle. This program provides activities to: Eat healthy on a budget, Live a healthy lifestyle, Eat a balanced diet.

Staff Lead: Health Promotion Manager (Brittany)

5.2 PLACER: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

5.3 PLACER: Coordinate with Community Partners on Goal #5

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #5 strategies, including but not limited to the following.

1) Mental Health, Alcohol and Drug Advisory Board (Placer County)
2) Placer County Economic Development Board
3) Placer County Older Adult Advisory Commission (OAAC)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

5.3 PLACER: Coordinate with Community Partners on Goal #5 (continued)

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #5 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "End Homelessness for Older Adults"
   a) Placer County Continuum of Care
   b) 211 Connecting Point – Coordinated Entry Point
   c) AMI Housing, Inc.
   d) Everyone Matters Ministries
   e) Homeless Resource Council of the Sierras
   f) Placer County Adult System of Care: APS – Home Safe
   g) Placer County Health & Human Services – Homeless Services
   h) The Gathering Inn
2) "Income Security as We Age"
   a) FREED Center for Independent Living
   b) Legal Services of Northern California – Western States Pension Assistance Project
   c) Placer County Business Advantage Network
3) "Protection from Poverty & Hunger"
   a) Placer County Health & Human Services – CalFresh (Food Stamps)
   b) Placer County Health & Human Services – General Relief / General Assistance
   c) Antelope Springs Church
   d) Auburn Interfaith Food Closet
   e) First United Methodist Church of Roseville
   f) Harvest Community Church
   g) Loomis Basin Food Pantry
   h) Placer Food Bank
   i) Rhema Christian Center
   j) Saint Vincent De Paul – Bags Program
   k) Seniors First
   l) Seventh Day Adventist Church
   m) Sierra Community House
   n) Sierra Reach Ministries
   o) Sierra Senior Services
   p) The Salt Mine
   q) The Salvation Army
   r) Twin Lakes Food Bank
   s) What Would Jesus Do? Inc.

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

5.4 PLACER: Recommendations regarding the Strategies under Goal #5		
The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "End Homelessness for Older Adults"	7/25 to 6/26	R
To be determined.		
(B) "Income Security as We Age"	7/25 to 6/26	R
To be determined.		
(C) "Protection from Poverty & Hunger"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

AAA4's 2024 – 2028 Strategic Area Plan:

SACRAMENTO COUNTY, California

The local access point to a "No Wrong Door" system where people of all incomes and ages can turn for the full range of long-term support options and smooth access to public programs and benefits.

ADRC of Sacramento County	7/25 to 6/26	ADRC

The ADRC of Sacramento County will continue to lead by bringing together diverse community partners to improve service delivery for older adults and people with disabilities, and to promote ease of access to resources available.

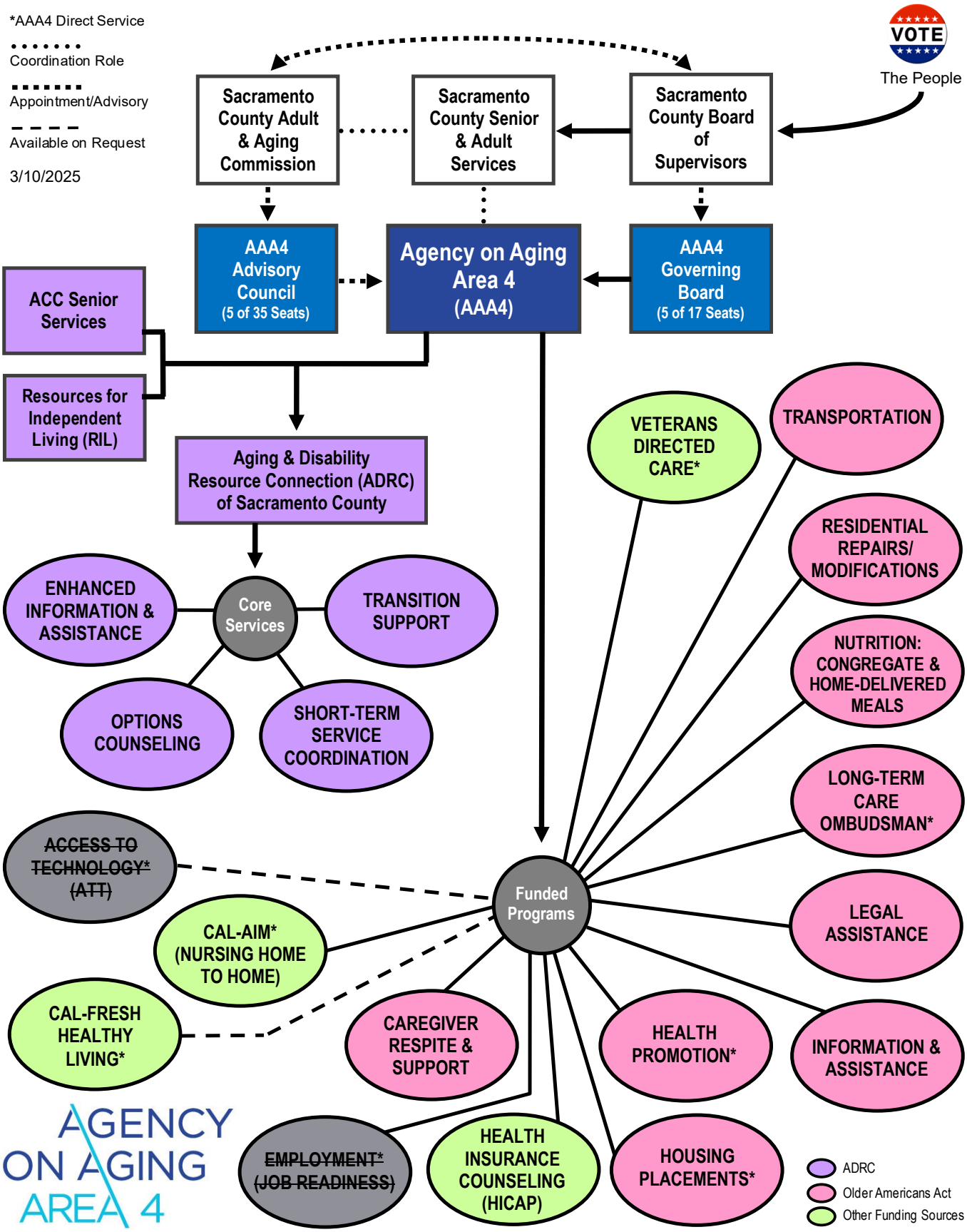
- Enhanced Information & Assistance – ADRC Core Service
  Provides comprehensive information to people of any age, disability type and income level/source. Includes a warm hand off and follow-up to ensure quality referrals.
- Person Centered Options Counseling – ADRC Core Service
  Personal interview to discover the consumers' strengths, values, and preferences; decision support including fact finding and the weighing of pros and cons resulting in facilitated decision making; personalized action steps detailing consumers goals; and, follow-up to evaluate action plan success or the need for changes/plan adjustments.
- Short-Term Service Coordination – ADRC Core Service
  Personalized service coordination (usually 90 days or less) for the purpose of stabilizing a situation for individuals whose health, safety and welfare are at risk; and assistance to prevent unnecessary admittance to emergency department or institutional placement.
- Transition Support – ADRC Core Service
  Support a person with information, decision support and coordination of multiple services in order to successfully move from a health care facility back to a community home.
  Includes both hospital/acute care to home, as well as nursing facility to home.

Additional goals for SFY 2025-26 include:

- ❖ Increasing engagement from community partners and the public to raise awareness of the ADRC and its role as a No Wrong Door provider in Sacramento County.
- ❖ Increasing the knowledge of potential funding options for ADRC core services including Medi-Cal reimbursement.
- ❖ Establishing connections with elected officials to investigate funding support and raise awareness of the Sacramento ADRC with government entities.

Agency on Aging Area 4 (AAA4)
https://adrc4.org/sacramento-county/ or (800) 211-4545

Aging Services Network: Sacramento County



GOAL #1: HOUSING FOR ALL AGES AND STAGES

"We will live where we choose as we age in communities that are age-, disability-, and dementia-friendly and climate- and disaster-ready."

1.1 SACRAMENTO: Provide Services that Advance Goal #1

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Information & Assistance – Title III-B Supportive Service
2-1-1 Sacramento, a program of Community Link Capitol Region
https://www.211sacramento.org/211/ or 211 or (916) 498-1000
Provides individuals with information on services available within their communities.

2) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (916) 551-2150
Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.

3) Residential Repairs/Modifications – Title III-B Supportive Service
Rebuilding Together Sacramento
https://www.rebuildingtogethersacramento.org/ or (916) 415-1880
Offers minor repairs/renovations and equipment to meet safety, health issues, and code standards (e.g., grab bars, smoke detectors, small ramps).

4) Transportation – Title III-B Supportive Service
   a) ACC Rides, a program of ACC Senior Services
   https://www.accsv.org/services/transportation/ or (916) 393-9026 ext. 333
   In the Pocket area, Elk Grove and the Delta, provides door-to-door transportation service to nutrition sites, senior centers, medical and dental appointments, grocery shopping, field trips, and other errands.

   b) Stanford Settlement Neighborhood Center
   https://www.stanfordsettlement.org/program-details.html or (916) 927-1303
   In the City of Sacramento, provides door-to-door transportation services to medical appointments; for nearby residents, also offers rides to and from the Senior Center and other destinations.

Staff Lead: Regional Services Specialists (Rebecca & Sara)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

1.1 SACRAMENTO: Provide Services that Advance Goal #1 (continued)		
(B) Other Programs:	7/25 to 6/26	S

1) Veterans-Directed Care
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/ or (800) 211-4545
Note: Individuals must first be referred by a physician at a VA Medical Center.
With the help of an options counselor, veterans at risk of institutionalization manage their own flexible budgets, decide what mix of goods and services best meet their needs, and hire and supervise their own care workers, thus allowing them to continue living at home.

Staff Lead: VDC Program Manager – Liz

1.2 SACRAMENTO: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

1.3 SACRAMENTO: Coordinate with Community Partners on Goal #1

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #1 strategies, including but not limited to the following.

1) Sacramento County Adult & Aging Commission (AAC)
2) Sacramento County Bicycle Advisory Committee
3) Sacramento County Disability Advisory Commission (DAC)
4) Sacramento County Human Services Coordinating Council
5) Sacramento County Planning Commission
6) Sacramento County Recreation and Park Commission
7) Sacramento County Veterans Advisory Commission
8) Sacramento Environmental Commission
9) Sacramento Housing and Redevelopment Commission
10) Sacramento Regional Transit Mobility Advisory Council

Staff Lead: Regional Services Specialists (Clayton & Sara)

1.3 SACRAMENTO: Coordinate with Community Partners on Goal #1 (continued)

(B) Engage with Lead Organizations & Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #1 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "More Housing Options as We Age"
   a) Sacramento Housing & Redevelopment Agency (SHRA)
   b) Habitat for Humanity of Greater Sacramento
   c) Mercy Housing
   d) Mutual Housing California
   e) Sacramento County Community Development – Planning & Environmental Review
   f) Sacramento Renters Helpline
   g) Urban Land Institute Sacramento
2) "Transportation Beyond Cars"
   a) Sacramento Transportation Authority (STA)
   b) Paratransit, Inc.
   c) Sacramento Regional Transit District (SacRT)
3) "Outdoor & Community Spaces" – Parks & Recreation
   a) City of Citrus Heights
   b) City of Elk Grove
   c) City of Folsom
   d) City of Galt
   e) City of Isleton
   f) City of Rancho Cordova
   g) City of Sacramento
   h) County of Sacramento
   i) ACC Senior Services
   j) Chabolla Community Center
   k) Ethel McLeod Hart Multipurpose Senior Center
   l) Gibbons Community Center
   m) Neil Orchard Senior Activities Center
   n) Senior Center of Elk Grove
   o) Samuel C. Pannel Meadowview Community Center
   p) Stanford Settlement Neighborhood Center
4) "Emergency Preparedness & Response"
   a) Sacramento County Office of Emergency Services (OES)
   b) American River Parkway Foundation Fire Safe Council
   c) City of Folsom Fire Safe Council
   d) Rancho Murrieta Fire Safe Council
   e) Sacramento County Disaster/Calamity Relief
5) "Climate-Friendly Aging"
   a) Sacramento Metropolitan Air Quality Management District
   b) Sacramento County Environmental Management
   c) Breathe California Sacramento Region
   d) Sacramento Tree Foundation
   e) Sacramento Municipal Utility District (SMUD)

Staff Lead: Regional Services Specialists (Clayton & Sara)

1.4 SACRAMENTO: Recommendations regarding the Strategies under Goal #1 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "More Housing Options as We Age"	7/25 to 6/26	R
To be determined.		
(B) "Transportation Beyond Cars"	7/25 to 6/26	R
To be determined.		
(C) "Outdoor and Community Spaces"	7/25 to 6/26	R
To be determined.		
(D) "Emergency Preparedness & Response"	7/25 to 6/26	R
To be determined.		
(E) "Climate-Friendly Aging"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #2: HEALTH REIMAGINED

"We will have access to the services we need to live at home in our communities and to optimize our health and quality of life."

2.1 SACRAMENTO: Provide Services that Advance Goal #2

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Health Promotion (Evidence-Based) – Title III-D Services
Bingocize, Diabetes Education & Empowerment Program (DEEP) and
Matter of Balance (MOB), programs of AAA4
https://agencyonaging4.org/wellness/ or (916) 486-1876
Evidence based health promotion programs to facilitate exercise, to help manage chronic disease and to prevent injuries due to falls.

2) Information & Assistance – Title III-B Supportive Service
2-1-1 Sacramento, a program of Community Link Capitol Region
https://www.211sacramento.org/211/ or 211 or (916) 498-1000
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (916) 551-2150
Legal help by an attorney or person acting under the supervision of an attorney with accessing health benefits including MediCal and Covered California.

4) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

Staff Lead: Health Promotion Manager (Brittany), Intake Ombudsman (Anne & La'Sharae) and Regional Services Specialists (Rebecca & Sara)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and III-C services open for competitive bid for SFY 25-26 and beyond. III-D and Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

2.1 SACRAMENTO: Provide Services that Advance Goal #2 (continued)

(B) Other Programs:	7/25 to 6/26	S

1) CalAIM Community Supports: Nursing Facility Transition to Home
Agency on Aging Area 4
https://agencyonaging4.org/ or (916) 486-1876
For eligible members of Anthem Blue Cross, works to transition individuals from skilled nursing facilities to home environments.

2) Health Insurance Counseling & Advocacy Program (HICAP)
HICAP Services of Northern California, a program of LSNC
https://www.hicapservices.net/ or (800) 434-0222
Provides free, unbiased and confidential Medicare counseling and advocacy services.

Staff Lead: CalAIM Program Manager (Liz) and Regional Services Specialist (Rebecca)

HICAP services open for competitive bid for April 1, 2027 and beyond. Contact AAA4 for details.

2.2 SACRAMENTO: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

2.3 SACRAMENTO: Coordinate with Community Partners on Goal #2

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #2 strategies, including but not limited to the following.

1) Sacramento County Adult & Aging Commission (AAC)
2) Sacramento County Alcohol and Drug Advisory Board
3) Sacramento County Developmental Disabilities Planning and Advisory Council
4) Sacramento County Disability Advisory Commission (DAC)
5) Sacramento County Emergency Medical Advisory Group (EMAG)
6) Sacramento County Health Authority Commission
7) Sacramento County Human Services Coordinating Council
8) Sacramento County Mental Health Board
9) Sacramento County Public Health Advisory Board
10) Sacramento County Veterans Advisory Commission
11) Sacramento Medi-Cal Managed Care Stakeholder Advisory Committee

Staff Lead: Regional Services Specialists (Clayton & Sara)

2.3 SACRAMENTO: Coordinate with Community Partners on Goal #2 (continued)

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #2 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Bridging Health Care with Home" (Cross-Sector Partnerships)
   a) Sacramento County Department of Health Services – CalAIM Lead Agency
   b) Sacramento County Veterans Services
   c) Adventist Health
   d) Community HealthWorks (formerly Sacramento Covered)
   e) Dignity Health
   f) Kaiser Permanente
   g) Molina Health Care
   h) Sutter Health
   i) UC Davis Health System
   j) VA Northern California Health Care System
2) "Health Care as We Age" (Affordable Prescription Drugs)
   a) One Community Health
3) "Lifelong Healthy Aging"
   a) Sacramento County Public Health
   b) City of Sacramento Older Adult Services – 50+ Wellness Program
   c) El Hogar Community Services, Inc.
   d) StopFalls Sacramento
   e) UC Davis Health – Healthy Aging Clinic
4) "Geriatric Care Expansion"
   a) UC Davis Health – Geriatric Fellowship Programs
   b) California Northstate University – College of Medicine
   c) Sacramento State University – School of Nursing
   d) Sutter SeniorCare PACE
   e) Sutter Health – Senior Services and Geriatric Care
5) "Dementia in Focus"
   a) Alzheimer's Association of Northern California
   b) Sacramento County Alzheimer's Disease Program
   c) Alzheimer's Aid Society
   d) Del Oro Caregiver Resource Center
   e) UC Davis Health – Alzheimer's Disease Center
6) "Nursing Home Innovation"
   a) California Advocates of Nursing Home Reform (CANHR)
   b) California Healthcare Foundation – Innovation Fund
   c) Foundation Aiding the Elderly (FATE)

Staff Lead: Regional Services Specialists (Clayton & Sara)

2.4 SACRAMENTO: Recommendations regarding the Strategies under Goal #2 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Bridging Health Care with Home" (Cross-Sector Partnership)	7/25 to 6/26	R
To be determined.		
(B) "Health Care as We Age" (Affordable Prescription Drugs)	7/25 to 6/26	R
To be determined.		
(C) "Lifelong Healthy Aging"	7/25 to 6/26	R
To be determined.		
(D) "Geriatric Care Expansion"	7/25 to 6/26	R
To be determined.		
(E) "Dementia in Focus"	7/25 to 6/26	R
To be determined.		
(F) "Nursing Home Innovation"	7/25 to 6/26	R
To be determined.		
(G) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

SACRAMENTO COUNTY, California

GOAL #3: INCLUSION AND EQUITY, NOT ISOLATION

"We will have lifelong opportunities for work, volunteering, engagement, and leadership and will be protected from isolation, discrimination, abuse, neglect, and exploitation."

3.1 SACRAMENTO: Provide Services that Advance Goal #3

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

~~1) Employment – Title III-B Supportive Service~~
~~*Mature Edge Job Readiness*, a Program of AAA4~~
~~https://agencyonaging4.org/mature-edge-job-readiness-program/ or (916) 486-1876~~
~~Offers a series of interactive job readiness sessions preparing the mature worker for a productive and successful job search.~~

2) Information & Assistance – Title III-B Supportive Service
2-1-1 Sacramento, a program of Community Link Capitol Region
https://www.211sacramento.org/211/ or 211 or (916) 498-1000
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (916) 551-2150
Legal help by an attorney or person acting under the supervision of an attorney with accessing employment benefits.

4) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

Staff Lead: Job Readiness Coordinator (Bobby), Intake Ombudsman (Anne & La'Sharae) and Regional Services Specialists (Rebecca & Sara)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:		S

~~1) Access to Technology (ATT)~~
~~Digital Inclusion Program, a program of AAA4~~
~~https://agencyonaging4.org/ or (916) 486-1876~~
~~Provides older adults and adults with disabilities with mobile computer devices and digital skills training to keep them engaged with their communities.~~

~~Staff Lead: Program Administrator (Nancy)~~

3.2 SACRAMENTO: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

3.3 SACRAMENTO: Coordinate with Community Partners on Goal #3

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers, particularly around employment and protection from abuse. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #3 strategies, including but not limited to the following.

1) Greater Sacramento Economic Council – Competitiveness Council
2) Sacramento County Adult & Aging Commission (AAC)
3) Sacramento County Commission on the Status of Women and Girls
4) Sacramento County Disability Advisory Commission (DAC)
5) Sacramento County Equal Employment Opportunity Advisory Committee
6) Sacramento County Human Services Coordinating Council
7) Sacramento County Racial Equity Policy Cabinet
8) Sacramento County Veterans Advisory Commission

Staff Lead: Regional Services Specialists (Clayton & Sara)

3.3 SACRAMENTO: Coordinate with Community Partners on Goal #3 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #3 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Inclusion & Equity in Aging"
   a) City of Sacramento – Office of Diversity and Equity
   b) County of Sacramento – Racial Equity Officer
   c) City of Sacramento, Older Adult Services – Caring Neighborhoods
   d) Government Alliance on Race and Equity (Sacramento)
   e) Sacramento Area Congregations Together
   f) Sacramento County Public Health – Stop Stigma Sacramento Speakers Bureau
   g) Sacramento LGBT Community Center – Golden Grounds
   h) Servant Hearts
   i) The Center at Sierra Health Foundation – Health Equity & Access Programs
2) "Closing the Digital Divide"
   a) Capital Region Coalition for Digital Inclusion
   b) City of Sacramento – Wi-Fi in City Parks & TechConnections Program
   c) Sacramento County – Technology Department
   d) Sacramento Public Library – Computer Access
3) "Opportunities to Work"
   a) ACC Senior Job Training Program
   b) Resources for Independent Living (RIL)
   c) Sacramento Employment & Training Agency (SETA)
   d) Sacramento Works One-Stop Career Centers
   e) City of Sacramento Office of Innovation and Economic Development
   f) LeadingAge – Workforce Development
   g) Mutual Assistance Network
   h) Pride Industries – Sacramento Employment Services
   i) Sacramento County Business Environmental Resource Center (BERC)
   j) Sacramento Public Library – Career Development
   k) Valley Vision
4) "Opportunities to Volunteer"
   a) The Regional Center for Volunteerism-HandsOn Sacramento
   b) Volunteers of America – Northern California
5) "Protection from Abuse, Neglect & Exploitation"
   a) Sacramento County Adult Protective Services (APS)
   b) McGeorge School of Law – Elder & Health Law Clinic
   c) Sacramento County District Attorney – Elder Abuse Unit
   d) Sacramento Regional Family Justice Center
   e) Volunteers of America, Northern California – Nottoli Place & Senior Safe House
   f) WEAVE (Women Escaping a Violent Environment)

Staff Lead: Regional Services Specialists (Clayton & Sara)

3.4 SACRAMENTO: Recommendations regarding the Strategies under Goal #3		
The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Inclusion & Equity in Aging"	7/25 to 6/26	R
To be determined.		
(B) "Closing the Digital Divide"	7/25 to 6/26	R
To be determined.		
(C) "Opportunities to Work"	7/25 to 6/26	R
To be determined.		
(D) "Opportunities to Volunteer"	7/25 to 6/26	R
To be determined.		
(E) "Protection from Abuse, Neglect & Exploitation"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #4: CAREGIVING THAT WORKS

"We will be prepared for and supported through the rewards and challenges of caring for aging loved ones."

4.1 SACRAMENTO: Provide Services that Advance Goal #4

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Caregiver Assessment, Case Management & Respite – Title III-E Services
   a) Bridge to Healthy Families, a program of ACC Senior Services
   https://www.accsv.org/services/bridge-to-healthy-families/ or (916) 503-5386
   Provides an assessment of caregiver needs along with ongoing consultation, case management as needed, and access to other services. A limited amount of caregiver respite is available to some families.

   b) Del Oro Caregiver Resource Center
   https://www.deloro.org/services or (916) 728-9333
   Provides an assessment of caregiver needs along with ongoing consultation, case management as needed, and respite care as available.

2) Information & Assistance – Title III-B Supportive Service
   2-1-1 Sacramento, a program of Community Link Capitol Region
   https://www.211sacramento.org/211/ or 211 or (916) 498-1000
   Provides individuals with information on services available within their communities.

Staff Lead: Regional Services Specialist (Rebecca & Sara)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. III-E services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

Not applicable.

4.2 SACRAMENTO: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

4.3 SACRAMENTO: Coordinate with Community Partners on Goal #4

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #4 strategies, including but not limited to the following.

1) Sacramento County Adult & Aging Commission (AAC)
2) Sacramento County Disability Advisory Commission (DAC)
3) Sacramento County Developmental Disabilities Planning and Advisory Council
4) Sacramento County Human Services Coordinating Council
5) Sacramento County In-Home Supportive Services Advisory Committee
6) Sacramento County Mental Health Board
7) Sacramento County Veterans Advisory Commission

Staff Lead: Regional Services Specialists (Clayton & Sara)

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #4 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Family & Friends Caregiving Support"
   a) City of Sacramento, Older Adult Services – Triple-R Adult Day Program
   b) ACC Senior Services – Senior Companionship Program
   c) Alzheimer's Aid Society
   d) The Arc California
   e) UC Davis – Family Caregiving Institute
2) "Good Caregiving Jobs Creation"
   a) Sacramento County Senior and Adult Services Division – IHSS Public Authority
   b) Futuro Health – CalGrows Training Courses
   c) LeadingAge California – Workforce Initiatives
   d) RIL – Caregiver Registry
3) "Virtual Care Expansion"
   a) RIL – Assistive Technology
   b) California Foundation for Independent Living Centers – Ability Tools
   c) Dignity Health – Telemedicine Network
   d) Kaiser Permanente – Telehealth
   e) LeadingAge California's Innovation Showcase Challenge
   e) Sutter Health – Video Visits
   f) UC Davis Health – Telehealth Express Care

Staff Lead: Regional Services Specialists (Clayton & Sara)

4.4 SACRAMENTO: Recommendations regarding the Strategies under Goal #4 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Family & Friends Caregiving Support"	7/25 to 6/26	R
To be determined.		
(B) "Good Caregiving Jobs Creation"	7/25 to 6/26	R
To be determined.		
(C) "Virtual Care Expansion"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #5: AFFORDING AGING

"We will have economic security for as long as we live."

5.1 SACRAMENTO: Provide Services that Advance Goal #5

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Housing – Title III-B Supportive Service
   Agency on Aging Area 4 (AAA4)
   https://agencyonaging4.org/ or (916) 486-1876
   Seeks to facilitate housing placement among existing clients of AAA4.
2) Information & Assistance – Title III-B Supportive Service
   2-1-1 Sacramento, a program of Community Link Capitol Region
   https://www.211sacramento.org/211/ or 211 or (916) 498-1000
   Provides individuals with information on services available within their communities.
3) Legal Assistance – Title III-B Supportive Service
   Legal Services of Northern California (LSNC)
   https://lsnc.net/ or (916) 551-2150
   Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.
4) Nutrition: Congregate & Home-Delivered Meals – Title III-C Nutrition
   All Seasons Cafés, a program of MOW by ACC
   https://www.mowsac.org/our-meals/our-cafes/ or (916) 444-9533
   A Traditional Congregate program where meals are provided at senior lunch sites.

   Meals on Wheels (MOW) by ACC
   https://www.mowsac.org/our-meals/home-delivery/ or (916) 444-9533
   A Traditional Home-Delivered program where meals are provided to "homebound" older adults where they live.

   The Restaurant Program, from MOW by ACC
   https://www.mowsac.org/restaurant-program/ or (916) 444-9533
   A Non-Traditional Congregate program where participants can use a meal card to order any item off the MoW Senior menu at participating restaurants.

Staff Lead: Program Developer (Julie) and Regional Services Specialists (Clayton, Rebecca & Sara)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and III-C services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

5.1 SACRAMENTO: Provide Services that Advance Goal #5 (continued)

(B) Other Programs:	7/25 to 6/26	S

1) CalFresh Healthy Living
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/wellness/ or (800) 211-4545
Provides classes and information to help low-income older adults lead a healthy lifestyle. This program provides activities to: Eat healthy on a budget, Live a healthy lifestyle, Eat a balanced diet.

Staff Lead: Health Promotion Manager (Brittany)

5.2 SACRAMENTO: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

5.3 SACRAMENTO: Coordinate with Community Partners on Goal #5

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #5 strategies, including but not limited to the following.

1) Sacramento County Adult & Aging Commission (AAC)
2) Sacramento County Alcohol and Drug Advisory Board
3) Sacramento County Disability Advisory Commission (DAC)
4) Sacramento County Housing and Redevelopment Commission
5) Sacramento County Human Services Coordinating Council
6) Sacramento County Mental Health Board
7) Sacramento County Veterans Advisory Commission

Staff Lead: Regional Services Specialists (Clayton & Sara)

5.3 SACRAMENTO: Coordinate with Community Partners on Goal #5 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

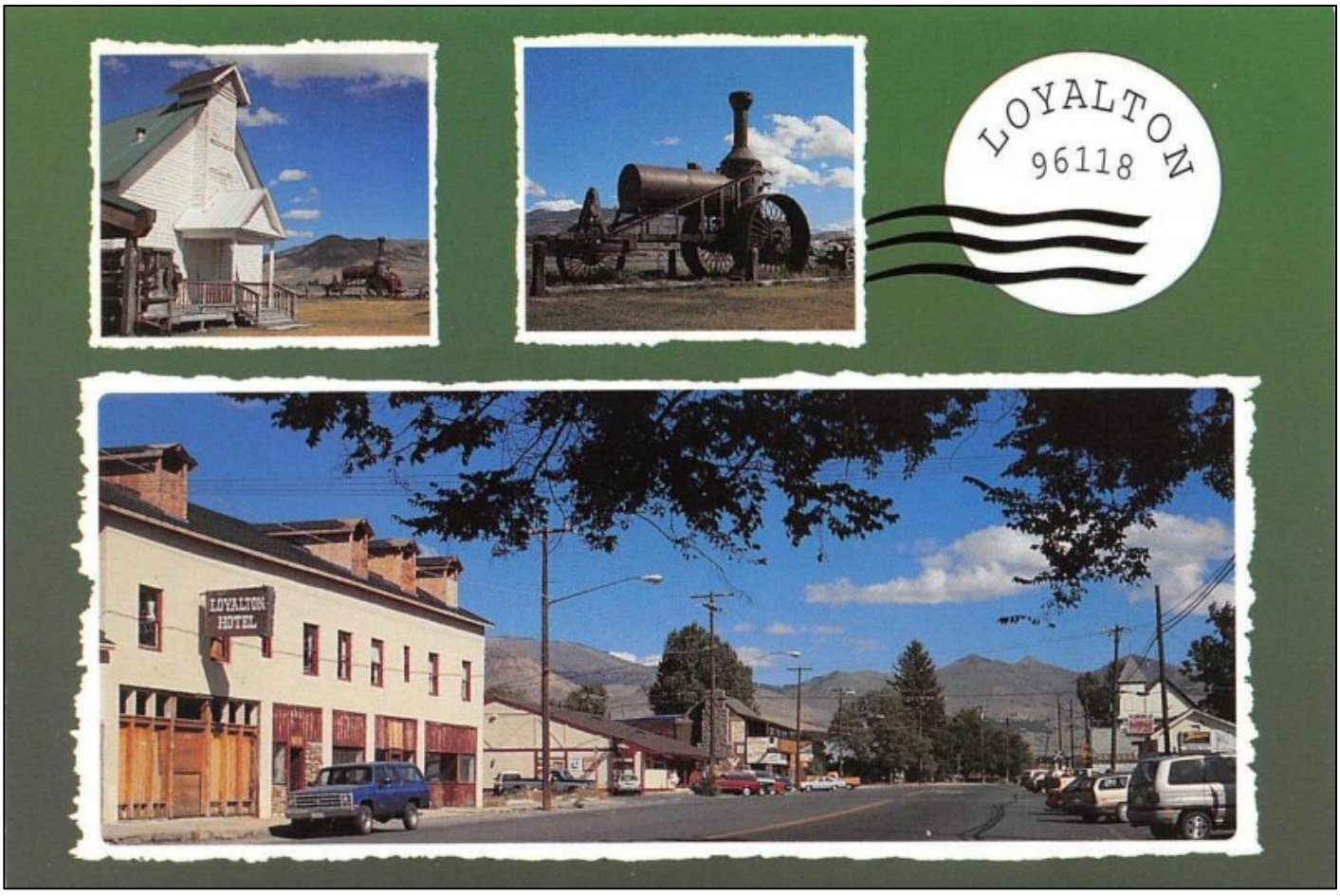
Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #5 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "End Homelessness for Older Adults"
   a) 2-1-1 Sacramento – Coordinated Access System
   b) Sacramento Steps Forward – Continuum of Care
   c) Citrus Heights HART
   d) El Hogar Community Services – Connections Lounge
   e) HART (North Sacramento & South Sacramento locations)
   f) Loaves and Fishes – Maryhouse
   g) Next Move Homeless Services
   h) Sacramento County Behavioral Health – Homeless Response & Engagement Team
   i) Sacramento County Department of Health – Healthcare for the Homeless
   j) Sacramento County Homeless Services and Housing
   k) Sacramento County Senior and Adult Services Division: APS – Home Safe
   l) Saint John's Lutheran Church – Pilgrimage Sacramento
   m) Union Gospel Mission Sacramento
   n) VA Northern California Health Care System – Homeless Veterans Drop-In Services
   o) Volunteers of America, Northern California – Nottoli Place & Senior Safe House
2) "Income Security as We Age"
   a) Resources for Independent Living (RIL)
   b) Legal Services of Northern California – Western States Pension Assistance Project
   c) Sacramento Employment & Training Agency (SETA)
   d) United Way California Capital Region – Guaranteed Income Program
3) "Protection from Poverty & Hunger"
   a) Sacramento County Dept. of Human Assistance – CalFresh & General Assistance
   b) Atonement Lutheran Church – Central Downtown Food Basket
   c) Carmichael Presbyterian Church – Food Closet
   d) Daughters of Zion Enterpryz – Food and Clothing Closet
   e) Elk Grove Food Bank Services
   f) Gurdwara Sant Sagar – Senior Meal Program
   g) MOW by ACC
   h) Powerhouse Ministries Folsom – Crisis and Community Care Center
   i) Rancho Cordova Food Locker
   j) River City Food Bank
   k) Sacramento Food Bank and Family Services
   l) Sacramento Interfaith Partnership Food Closet
   m) Saint Paul Baptist Church – Food Box Giveaway
   n) Saint Philomene's Catholic Church – Food Closet
   o) Saint Vincent De Paul, Sacramento Council
   p) Seventh Day Adventist Church (multiple locations)
   q) South Sacramento Interfaith Partnership – Food Closet
   r) South County Services – Family Services
   s) Sunrise Christian Food Ministry
   t) The Salvation Army (multiple locations)
   u) Union Gospel Mission Sacramento – Food Box Program

Staff Lead: Regional Services Specialists (Clayton & Sara)

5.4 SACRAMENTO: Recommendations regarding the Strategies under Goal #5		
The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "End Homelessness for Older Adults"	7/25 to 6/26	R
Develop screening questions to identify individuals at risk of losing their housing for the purposes of early intervention and diversion. – *As initially proposed by the local Ad Hoc Workgroup*		
(B) "Income Security as We Age"	7/25 to 6/26	R
To be determined.		
(C) "Protection from Poverty & Hunger"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

AAA4's 2024 – 2028 Strategic Area Plan:
SIERRA COUNTY, California



Aging Services Network: Sierra County

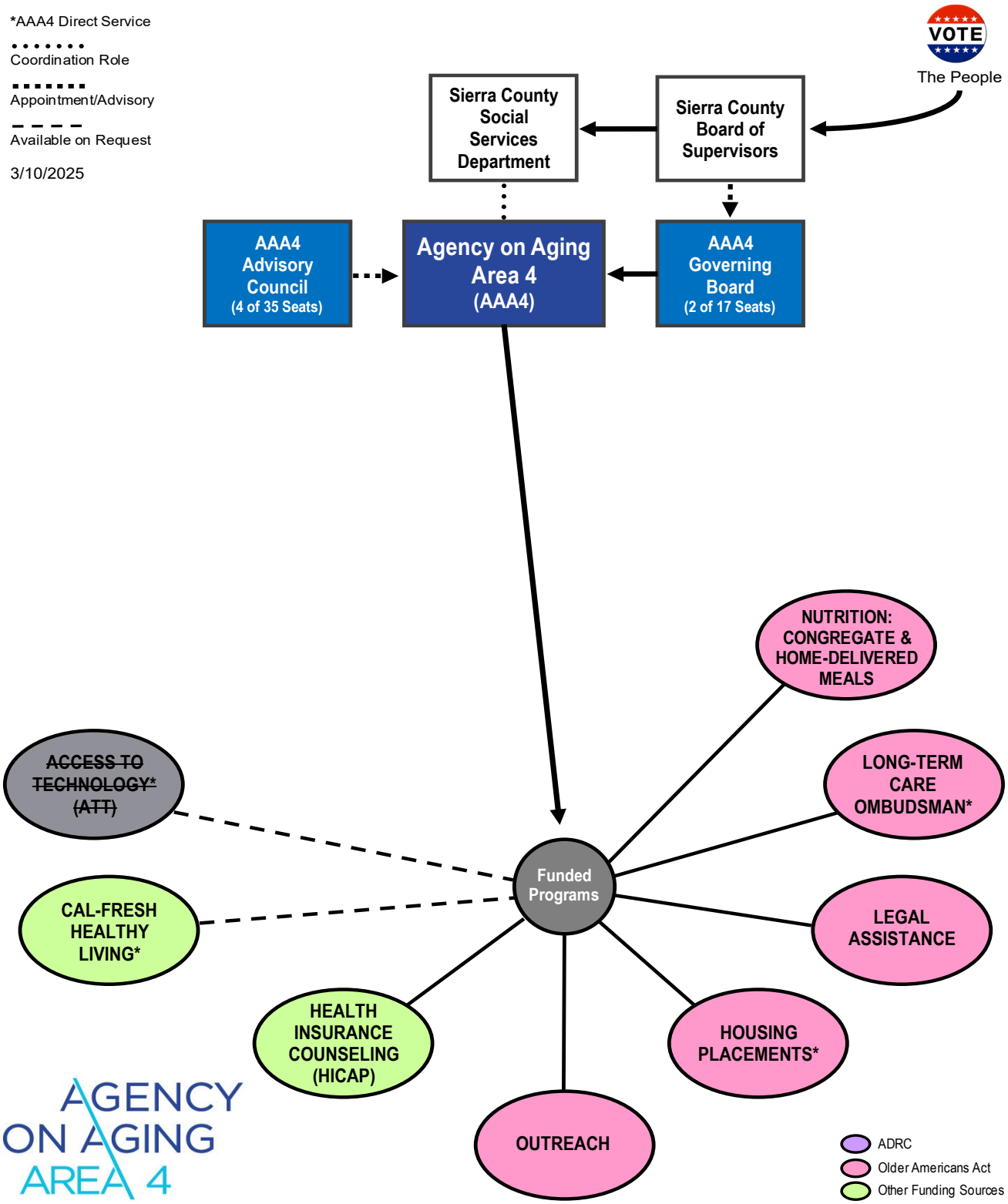
*AAA4 Direct Service

Coordination Role

Appointment/Advisory

Available on Request

3/10/2025



NOTE: Sierra County is a Frontier community with a total senior population of 1,530 people. In the unlikely event that a resident of Sierra County urgently needs to speak to I&A on a weekend or after hours, they are welcome to call the neighboring program in Nevada County. This is so unusual that there is no scope of service for this purpose

GOAL #1: HOUSING FOR ALL AGES AND STAGES

"We will live where we choose as we age in communities that are age-, disability-, and dementia-friendly and climate- and disaster-ready."

1.1 SIERRA: Provide Services that Advance Goal #1

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Legal Assistance – Title III-B Supportive Service
   Legal Services of Northern California (LSNC)
   https://lsnc.net/ or (530) 823-7560
   Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.
2) Outreach – Title III-B Supportive Service
   Inc. Senior Citizens of Sierra County
   (530) 477-3333
   One-on-one contacts with individuals to identify potential clients (or their age 60+ caregivers) and to encourage their use of existing services and benefits.

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

Not applicable.

1.2 SIERRA: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

1.3 SIERRA: Coordinate with Community Partners on Goal #1

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #1 strategies, including but not limited to the following.

1) Northern Sierra Air Quality District
2) Sierra County Disaster Council / Health Care Coalition
3) Sierra County Planning Commission

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

(B) Engage with Lead Organizations & Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #1 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "More Housing Options as We Age"
   a) Sierra County Planning Department
   b) Plumas County Community Development Commission – Housing Programs
2) "Transportation Beyond Cars"
   a) Sierra County Transportation Commission (SCTC)
   b) Sierra County Department of Transportation
   c) Golden Rays Senior Citizens of Sierra County – West County Transit
   d) Inc. Senior Citizens of Sierra County – East County Transit
3) "Outdoor & Community Spaces" – Parks & Recreation
   a) County of Sierra
   b) Loyalton Senior Center
4) "Emergency Preparedness & Response"
   a) Sierra County Office of Emergency Services (OES)
   b) Fire Safe Sierra County
   c) Sierra County Public Health – Emergency Preparedness
5) "Climate-Friendly Aging"
   a) Northern Sierra Air Quality District
   b) Sierra County Department of Environmental Health

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

1.4 SIERRA: Recommendations regarding the Strategies under Goal #1 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "More Housing Options as We Age"	7/25 to 6/26	R
To be determined.		
(B) "Transportation Beyond Cars"	7/25 to 6/26	R
To be determined.		
(C) "Outdoor and Community Spaces"	7/25 to 6/26	R
To be determined.		
(D) "Emergency Preparedness & Response"	7/25 to 6/26	R
To be determined.		
(E) "Climate-Friendly Aging"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

SIERRA COUNTY, California

GOAL #2: HEALTH REIMAGINED

"We will have access to the services we need to live at home in our communities and to optimize our health and quality of life."

2.1 SIERRA: Provide Services that Advance Goal #2

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing health benefits including MediCal and Covered California.

2) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

3) Outreach – Title III-B Supportive Service
Inc. Senior Citizens of Sierra County
(530) 477-3333
One-on-one contacts with individuals to identify potential clients (or their age 60+ caregivers) and to encourage their use of existing services and benefits.

Staff Lead: Intake Ombudsman (Anne & La'Sharae), and Regional Services Specialists (Clayton & Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and services open for competitive bid for SFY 25-26 and beyond. III-D and Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

2) Health Insurance Counseling & Advocacy Program (HICAP)
HICAP Services of Northern California, a program of LSNC
https://www.hicapservices.net/ or (530) 258-6827
Provides free, unbiased and confidential Medicare counseling and advocacy services.

Staff Lead: Regional Services Specialist (Rebecca)

HICAP services open for competitive bid for April 1, 2027 and beyond. Contact AAA4 for details.

2.2 SIERRA: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

2.3 SIERRA: Coordinate with Community Partners on Goal #2

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #2 strategies, including but not limited to the following.

1) Behavioral Health Advisory Board (Sierra County)
2) Partnership Health Plan of California Commission

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

2.3 SIERRA: Coordinate with Community Partners on Goal #2 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #2 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Bridging Health Care with Home" (Cross-Sector Partnerships)
   a) Sierra County Health Care Coalition
2) "Health Care as We Age" (Affordable Prescription Drugs)
   a) Eastern Plumas Health Care – Loyalton Medical Clinic
   b) Western Sierra Medical Clinic – Downieville
3) "Lifelong Healthy Aging"
   a) Sierra County Public Health Department
4) "Geriatric Care Expansion"
   a) Not Applicable
5) "Dementia in Focus"
   a) Not Applicable
6) "Nursing Home Innovation"
   a) Eastern Plumas Health Care – Loyalton Skilled Nursing Facility

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

2.4 SIERRA: Recommendations regarding the Strategies under Goal #2

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "Bridging Health Care with Home" (Cross-Sector Partnership)	7/25 to 6/26	R
To be determined.		
(B) "Health Care as We Age" (Affordable Prescription Drugs)	7/25 to 6/26	R
To be determined.		
(C) "Lifelong Healthy Aging"	7/25 to 6/26	R
To be determined.		
(D) "Geriatric Care Expansion"	7/25 to 6/26	R
To be determined.		
(E) "Dementia in Focus"	7/25 to 6/26	R
To be determined.		
(F) "Nursing Home Innovation"	7/25 to 6/26	R
To be determined.		
(G) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #3: INCLUSION AND EQUITY, NOT ISOLATION

"We will have lifelong opportunities for work, volunteering, engagement, and leadership and will be protected from isolation, discrimination, abuse, neglect, and exploitation."

3.1 SIERRA: Provide Services that Advance Goal #3

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing employment benefits.

2) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

3) Outreach – Title III-B Supportive Service
Inc. Senior Citizens of Sierra County
(530) 477-3333
One-on-one contacts with individuals to identify potential clients (or their age 60+ caregivers) and to encourage their use of existing services and benefits.

Staff Lead: Intake Ombudsman (Anne & La'Sharae) and Regional Services Specialists (Clatyon & Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:		S

~~1) Access to Technology (ATT)~~
~~Digital Inclusion Program, a program of AAA4~~
~~https://agencyonaging4.org/ or (916) 486-1876~~
~~Provides older adults and adults with disabilities with mobile computer devices and digital skills training to keep them engaged with their communities.~~

~~Staff Lead: Program Administrator (Nancy)~~

3.2 SIERRA: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

3.3 SIERRA: Coordinate with Community Partners on Goal #3

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers, particularly around employment and protection from abuse. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #3 strategies, including but not limited to the following.

1) Economic and Business Development Committee (Sierra County)
2) Northern Rural Training Employment Consortium (NORTEC)
3) Planning Commission (Sierra County)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

3.3 SIERRA: Coordinate with Community Partners on Goal #3 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #3 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Inclusion & Equity in Aging"
   a) Not Applicable
2) "Closing the Digital Divide"
   a) Gold Country Broadband Consortium
   b) Sierra County Information Systems Department
3) "Opportunities to Work"
   a) FREED Center for Independent Living
   b) Alliance for Workforce Development
4) "Opportunities to Volunteer"
   a) County of Sierra
5) "Protection from Abuse, Neglect & Exploitation"
   a) Sierra County Adult Protective Services (APS)
   b) Sierra County District Attorney – Victim & Witness Services
   c) Sierra SAFE Program

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

3.4 SIERRA: Recommendations regarding the Strategies under Goal #3

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "Inclusion & Equity in Aging"	7/25 to 6/26	R
Establish a service provider collaborative for local organizations that serve older adults for the purposes of networking and information-sharing. – *As initially proposed by the local Ad Hoc Workgroup* UPDATE: A collaborative has been established.		
(B) "Closing the Digital Divide"	7/25 to 6/26	R
To be determined.		
(C) "Opportunities to Work"	7/25 to 6/26	R
To be determined.		
(D) "Opportunities to Volunteer"	7/25 to 6/26	R
To be determined.		
(E) "Protection from Abuse, Neglect & Exploitation"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #4: CAREGIVING THAT WORKS

"We will be prepared for and supported through the rewards and challenges of caring for aging loved ones."

4.1 SIERRA: Provide Services that Advance Goal #4

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Outreach – Title III-B Supportive Service
   Inc. Senior Citizens of Sierra County
   (530) 477-3333
   One-on-one contacts with individuals to identify potential clients (or their age 60+ caregivers) and to encourage their use of existing services and benefits.

Staff Lead: Regional Services Specialist (Clayton)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

Not applicable.

4.2 SIERRA: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

4.3 SIERRA: Coordinate with Community Partners on Goal #4

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #4 strategies, including but not limited to the following.

1) Not Applicable

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #4 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Family & Friends Caregiving Support"
   a) Del Oro Caregiver Resource Center
2) "Good Caregiving Jobs Creation"
   a) Connecting Point – IHSS Public Authority
   b) Connecting Point – IHSS Caregiver Registry
3) "Virtual Care Expansion"
   a) FREED Center for Independent Living – Assistive Technology

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

4.4 SIERRA: Recommendations regarding the Strategies under Goal #4 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Family & Friends Caregiving Support"	7/25 to 6/26	R
To be determined.		
(B) "Good Caregiving Jobs Creation"	7/25 to 6/26	R
To be determined.		
(C) "Virtual Care Expansion"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #5: AFFORDING AGING

"We will have economic security for as long as we live."

5.1 SIERRA: Provide Services that Advance Goal #5

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Housing – Title III-B Supportive Service
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/ or (916) 486-1876
Seeks to facilitate housing placement among existing clients of AAA4.

2) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 823-7560
Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.

3) Nutrition: Congregate & Home-Delivered Meals – Title III-C Nutrition
Inc. Senior Citizens of Sierra County
Sierra Senior Services (SSS)
(530) 477-3333
Congregate meals are provided at the Loyalton Senior Center and Home-Delivered Meals (aka Meals on Wheels) are provided to "homebound" older adults where they live.

4) Outreach – Title III-B Supportive Service
Inc. Senior Citizens of Sierra County
(530) 477-3333
One-on-one contacts with individuals to identify potential clients (or their age 60+ caregivers) and to encourage their use of existing services and benefits.

Staff Lead: Program Developer (Julie) and Regional Services Specialists (Clayton & Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and III-C services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) CalFresh Healthy Living
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/wellness/ or (800) 211-4545
Provides classes and information to help low-income older adults lead a healthy lifestyle. This program provides activities to: Eat healthy on a budget, Live a healthy lifestyle, Eat a balanced diet.

Staff Lead: Health Promotion Manager (Brittany)

5.2 SIERRA: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

5.3 SIERRA: Coordinate with Community Partners on Goal #5

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #5 strategies, including but not limited to the following.

1) Behavioral Health Advisory Board (Sierra County)
2) Northern Rural Training Employment Consortium (NORTEC)

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

5.3 SIERRA: Coordinate with Community Partners on Goal #5 (continued)

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #5 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "End Homelessness for Older Adults"
   a) Plumas-Sierra Counties Continuum of Care
   b) Plumas County Community Development Commission – Housing Programs
2) "Income Security as We Age"
   a) Alliance for Workforce Development
   b) FREED Center for Independent Living
   c) Legal Services of Northern California – Western States Pension Assistance Project
3) "Protection from Poverty & Hunger"
   a) Sierra County Public Assistance – CalFresh Food Assistance
   b) Sierra County Public Assistance – General Assistance
   c) Alleghany Fire Station – Food Commodities
   d) Calpine Community Hall – Food Commodities
   e) Golden Rays of Sierra County
   f) Immaculate Conception Catholic Church – Food Commodities
   g) Inc. Senior Citizens of Sierra County
   h) Loyalton Food Bank
   i) Sierra City – Food Commodities

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

5.4 SIERRA: Recommendations regarding the Strategies under Goal #5

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "End Homelessness for Older Adults"	7/25 to 6/26	R
To be determined.		
(B) "Income Security as We Age"	7/25 to 6/26	R
To be determined.		
(C) "Protection from Poverty & Hunger"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

AAA4's 2024 – 2028 Strategic Area Plan:

YUBA & SUTTER COUNTIES, California

The local access point to a "No Wrong Door" system where people of all incomes and ages can turn for the full range of long-term support options and smooth access to public programs and benefits.

ADRC of Yuba-Sutter Counties	7/25 to 6/26	ADRC

The ADRC of Yuba and Sutter counties will continue to lead by bringing together diverse community partners to improve service delivery for older adults and people with disabilities, and to promote ease of access to resources available.

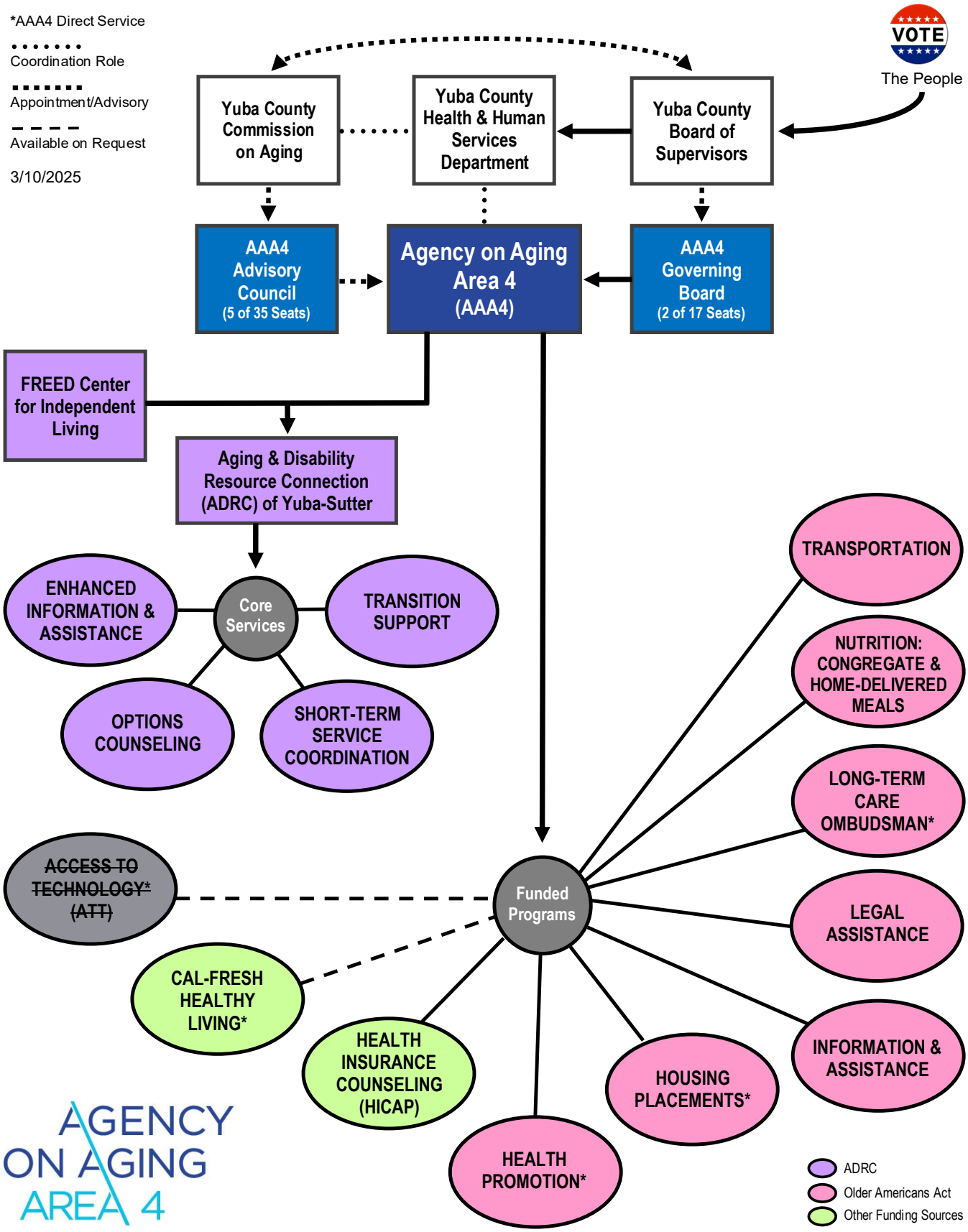
- Enhanced Information & Assistance – ADRC Core Service
  Provides comprehensive information to people of any age, disability type and income level/source. Includes a warm hand off and follow-up to ensure quality referrals.
- Person Centered Options Counseling – ADRC Core Service
  Personal interview to discover the consumers' strengths, values, and preferences; decision support including fact finding and the weighing of pros and cons resulting in facilitated decision making; personalized action steps detailing consumers goals; and, follow-up to evaluate action plan success or the need for changes/plan adjustments.
- Short-Term Service Coordination – ADRC Core Service
  Personalized service coordination (usually 90 days or less) for the purpose of stabilizing a situation for individuals whose health, safety and welfare are at risk; and assistance to prevent unnecessary admittance to emergency department or institutional placement.
- Transition Support – ADRC Core Service
  Support a person with information, decision support and coordination of multiple services in order to successfully move from a health care facility back to a community home.
  Includes both hospital/acute care to home, as well as nursing facility to home.

Additional goals for SFY 2025-26 include:

- ❖ Increasing engagement from community partners and the public to raise awareness of the Yuba Sutter ADRC and its role as a No Wrong Door provider.
- ❖ Collaborating with partners to identify and pursue additional grants and funding opportunities to expand its capacity to provide the core services of the ADRC.
- ❖ Establishing connections with elected officials to investigate funding support and raise awareness of the ADRC of Yuba and Sutter Counties with government entities.

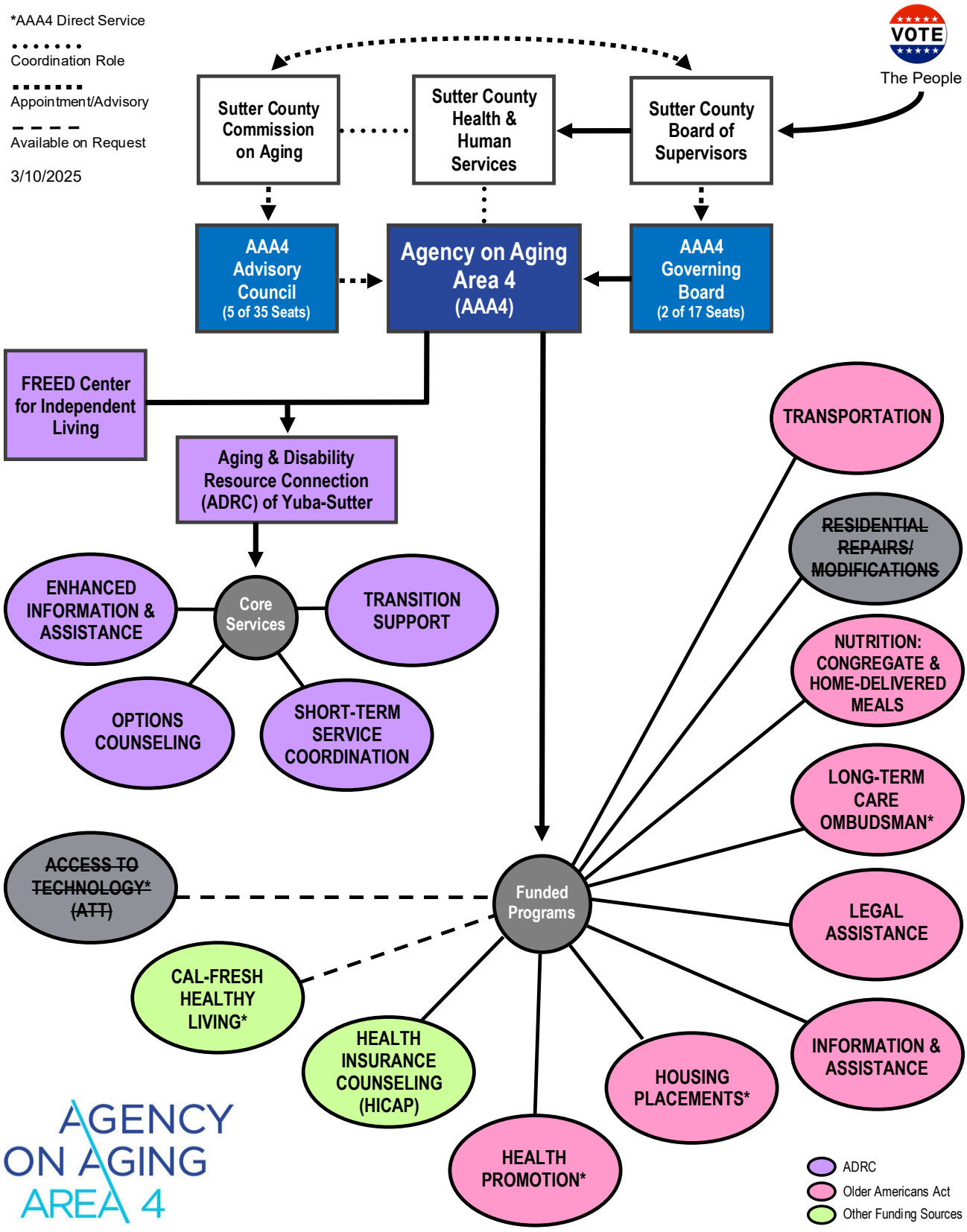
FREED Center for Independent Living
https://freed.org/adrc/adrc-yuba-sutter/ or (530) 742-4474

Aging Services Network: Yuba County



AGENCY ON AGING AREA 4

Aging Services Network: Sutter County



GOAL #1: HOUSING FOR ALL AGES AND STAGES

"We will live where we choose as we age in communities that are age-, disability-, and dementia-friendly and climate- and disaster-ready."

1.1 YUBA-SUTTER: Provide Services that Advance Goal #1

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Information & Assistance – Title III-B Supportive Service
   FREED Center for Independent Living
   https://freed.org/aging-disability-resources/ or (530) 742-4474
   Provides individuals with information on services available within their communities.
2) Legal Assistance – Title III-B Supportive Service
   Yuba Sutter Legal Center for Seniors
   https://yubasutterlegalcenter.business.site/?utm_source=gmb&utm_medium=referral or (530) 742-8289
   Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.
3) ~~Residential Repairs/Modifications – Title III-B Supportive Service [Sutter County Only]~~
   ~~*Fix It*, a program of FREED Center for Independent Living~~
   ~~https://freed.org/services/independent-living/fix-it-program/ or (530) 742-4474~~
   ~~Offers minor repairs/renovations and equipment to meet safety, health issues, and code standards (e.g., grab bars, smoke detectors, small ramps).~~
4) Transportation – Title III-B Supportive Service
   Senior Transportation Voucher Program, by FREED Center for Independent Living
   https://freed.org/services/independent-living/senior-transportation-voucher-program/ or (530) 742-4474
   Offer rides to and from local medical offices, shopping centers, and senior centers, with priority given to unhoused and at-risk older adults.

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

Not Applicable.

1.2 YUBA-SUTTER: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

1.3 YUBA-SUTTER: Coordinate with Community Partners on Goal #1

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #1 strategies, including but not limited to the following.

1) County Commissions on Aging (Yuba & Sutter)
2) County Planning Commissions (Yuba & Sutter)
3) Economic Development Committee (Sutter County)
4) Parks Advisory Commission (Sutter County)
5) Redevelopment Countywide Agency Oversight Board (Yuba County)

Staff Lead: Regional Services Specialist – Clayton

1.3 YUBA-SUTTER: Coordinate with Community Partners on Goal #1 (continued)

(B) Engage with Lead Organizations & Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #1 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "More Housing Options as We Age"
   a) Regional Housing Authority (Sutter, Yuba, Colusa & Nevada Counties)
   b) Accessory Dwelling Unit (ADU) Programs – Yuba County Planning Department
   c) Habitat for Humanity Yuba-Sutter
2) "Transportation Beyond Cars"
   a) Yuba-Sutter Transit Authority
   b) South Yuba Transportation Improvement Authority (SYTIA)
   c) Everyday Friendly Transportation Services
   d) Hilltop Gang
3) "Outdoor & Community Spaces" – Parks & Recreation
   a) City of Live Oak
   b) City of Marysville
   c) City of Wheatland
   d) City of Yuba City
   e) County of Sutter
   f) County of Yuba
   g) Yuba City Senior Center
4) "Emergency Preparedness & Response"
   a) County Offices of Emergency Services (Yuba & Sutter)
   b) American Red Cross (Yuba City Office)
   c) Sutter County Public Health, Emergency Preparedness
   d) Yuba County Assessor's Department, Disaster Relief
   e) Yuba Watershed Protection and Fire Safe Council
5) "Climate-Friendly Aging"
   a) County Environmental Health Departments (Yuba & Sutter)
   b) Feather River Air Quality Management District
   c) UC Cooperative Extension – Climate Smart Agriculture Program (Yuba City Office)
   d) Yuba-Sutter Transit – Climate Action Plan

Staff Lead: Regional Services Specialist – Clayton

1.4 YUBA-SUTTER: Recommendations regarding the Strategies under Goal #1 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "More Housing Options as We Age"	7/25 to 6/26	R
To be determined.		
(B) "Transportation Beyond Cars"	7/25 to 6/26	R
To be determined.		
(C) "Outdoor and Community Spaces"	7/25 to 6/26	R
To be determined.		
(D) "Emergency Preparedness & Response"	7/25 to 6/26	R
To be determined.		
(E) "Climate-Friendly Aging"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #2: HEALTH REIMAGINED

"We will have access to the services we need to live at home in our communities and to optimize our health and quality of life."

2.1 YUBA-SUTTER: Provide Services that Advance Goal #2

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Health Promotion (Evidence-Based) – Title III-D Services
Diabetes Education & Empowerment Program (DEEP) and
Matter of Balance (MOB), programs of AAA4
https://agencyonaging4.org/wellness/ or (916) 486-1876
Evidence based health promotion programs to help manage chronic disease and to prevent injuries due to falls.

2) Information & Assistance – Title III-B Supportive Service
FREED Center for Independent Living
https://freed.org/aging-disability-resources/ or (530) 742-4474
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Yuba Sutter Legal Center for Seniors
https://yubasutterlegalcenter.business.site/?utm_source=gmb&utm_medium=referral or (530) 742-8289
Legal help by an attorney or person acting under the supervision of an attorney with accessing health benefits including MediCal and Covered California.

4) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

Staff Lead: Health Promotion Manager (Brittany), Intake Ombudsman (Anne & La'Sharae), and Regional Services Specialist (Clayton & Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and III-C services open for competitive bid for SFY 25-26 and beyond. III-D and Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) Health Insurance Counseling & Advocacy Program (HICAP)
HICAP Services of Northern California, a program of LSNC
https://www.hicapservices.net/ or (530) 742-4474
Provides free, unbiased and confidential Medicare counseling and advocacy services.

Staff Lead: Regional Services Specialist – Rebecca

HICAP services open for competitive bid for April 1, 2027 and beyond. Contact AAA4 for details.

2.2 YUBA-SUTTER: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

2.3 YUBA-SUTTER: Coordinate with Community Partners on Goal #2

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #2 strategies, including but not limited to the following.

1) County Commissions on Aging (Yuba & Sutter)
2) Partnership Health Plan of California Commission
3) Sutter County Health and Welfare Committee
4) Sutter-Yuba Behavioral Health Advisory Board
5) Yuba-Sutter Emergency Medical Care Committee

Staff Lead: Regional Services Specialist – Clayton

2.3 YUBA-SUTTER: Coordinate with Community Partners on Goal #2 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #2 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Bridging Health Care with Home" (Cross-Sector Partnerships)
   a) Bi-County Veterans Services Office
   b) Adventist Health
   c) Ampla Health
   d) Peach Tree Health
   e) Sutter Health
   f) Yuba City VA Clinic
   g) Yuba-Sutter Healthcare Council
2) "Health Care as We Age" (Affordable Prescription Drugs)
   a) Freemont-Rideout Foundation
3) "Lifelong Healthy Aging"
   a) Sutter County Public Health Branch – Health Education and Promotion
   b) Yuba County Public Health – Nurse Home Visiting Program
4) "Geriatric Care Expansion"
   a) Bi-County Elder Services Team (BEST)
   b) Yuba College – Nursing Program
5) "Dementia in Focus"
   a) Sutter Health – Alzheimer's and Brain Health Services (Yuba City)
   b) Yuba-Sutter Blue Zones Project
6) "Nursing Home Innovation"
   a) Peach Tree Health

Staff Lead: Regional Services Specialist – Clayton

2.4 YUBA-SUTTER: Recommendations regarding the Strategies under Goal #2 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Bridging Health Care with Home" (Cross-Sector Partnership)	7/25 to 6/26	R
To be determined.		
(B) "Health Care as We Age" (Affordable Prescription Drugs)	7/25 to 6/26	R
To be determined.		
(C) "Lifelong Healthy Aging"	7/25 to 6/26	R
To be determined.		
(D) "Geriatric Care Expansion"	7/25 to 6/26	R
To be determined.		
(E) "Dementia in Focus"	7/25 to 6/26	R
To be determined.		
(F) "Nursing Home Innovation"	7/25 to 6/26	R
To be determined.		
(G) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #3: INCLUSION AND EQUITY, NOT ISOLATION

"We will have lifelong opportunities for work, volunteering, engagement, and leadership and will be protected from isolation, discrimination, abuse, neglect, and exploitation."

3.1 YUBA-SUTTER: Provide Services that Advance Goal #3

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Information & Assistance – Title III-B Supportive Service
FREED Center for Independent Living
https://freed.org/aging-disability-resources/ or (530) 742-4474
Provides individuals with information on services available within their communities.

2) Legal Assistance – Title III-B Supportive Service
Yuba Sutter Legal Center for Seniors
https://yubasutterlegalcenter.business.site/?utm_source=gmb&utm_medium=referral or (530) 742-8289
Legal help by an attorney or person acting under the supervision of an attorney with accessing employment benefits.

3) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

Staff Lead: Intake Ombudsman (Anne & La'Sharae) and Regional Services Specialists (Clayton & Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:		S

~~1) Access to Technology (ATT)~~
~~Digital Inclusion Program, a program of AAA4~~
~~https://agencyonaging4.org/ or (916) 486-1876~~
~~Provides older adults and adults with disabilities with mobile computer devices and digital skills training to keep them engaged with their communities.~~

~~Staff Lead: Program Administrator (Nancy)~~

3.2 YUBA-SUTTER: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

3.3 YUBA-SUTTER: Coordinate with Community Partners on Goal #3

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers, particularly around employment and protection from abuse. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #3 strategies, including but not limited to the following.

1) County Commissions on Aging (Yuba & Sutter)
2) County Planning Commissions (Yuba & Sutter)
3) Economic Development Committee (Sutter County)
4) North Central Counties Consortium (NCCC) Workforce Development Board
5) Redevelopment Countywide Agency Oversight Board (Yuba County

Staff Lead: Regional Services Specialists (Clayton & Rebecca)

3.3 YUBA-SUTTER: Coordinate with Community Partners on Goal #3 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #3 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Inclusion & Equity in Aging"
   a) Yuba Sutter Arts
2) "Closing the Digital Divide"
   a) Yuba County Planning Department – Broadband Projects
   b) Yuba City FiberCity
3) "Opportunities to Work"
   a) FREED Center for Independent Living
   b) Pride Industries
   c) Sutter County One Stop
   d) Yes to Yuba, Yuba County Enterprise Solutions
   e) Yuba County One Stop
   f) Yuba-Sutter Economic Development Corporation
4) "Opportunities to Volunteer"
   a) Disabled American Veterans (Yuba City Office)
   b) Just Serve, Yuba Sutter Colusa
5) "Protection from Abuse, Neglect & Exploitation"
   a) County APS: Adult Protective Services (Yuba & Sutter)
   b) County Victim Services (Yuba & Sutter)
   c) Casa De Esperanza (Yuba City Location)

Staff Lead: Regional Services Specialists (Clayton)

3.4 YUBA-SUTTER: Recommendations regarding the Strategies under Goal #3		
The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Inclusion & Equity in Aging"	7/25 to 6/26	R
To be determined.		
(B) "Closing the Digital Divide"	7/25 to 6/26	R
To be determined.		
(C) "Opportunities to Work"	7/25 to 6/26	R
To be determined.		
(D) "Opportunities to Volunteer"	7/25 to 6/26	R
To be determined.		
(E) "Protection from Abuse, Neglect & Exploitation"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #4: CAREGIVING THAT WORKS

"We will be prepared for and supported through the rewards and challenges of caring for aging loved ones."

4.1 YUBA-SUTTER: Provide Services that Advance Goal #4

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Information & Assistance – Title III-B Supportive Service
FREED Center for Independent Living
https://freed.org/aging-disability-resources/ or (530) 742-4474
Provides individuals with information on services available within their communities.

Staff Lead: Regional Services Specialist (Rebecca)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

Not applicable.

4.2 YUBA-SUTTER: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

4.3 YUBA-SUTTER: Coordinate with Community Partners on Goal #4

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #4 strategies, including but not limited to the following.

1) County Commissions on Aging (Yuba & Sutter)
2) County In-Home Supportive Services (IHSS) Advisory Committees (Yuba & Sutter)

Staff Lead: Regional Services Specialist – Clayton

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #4 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Family & Friends Caregiving Support"
   a) Del Oro Caregiver Resource Center
   b) Adventist Health + Rideout – The Gardens Adult Day Program
   c) Tri-County Respite Care Services, Inc.
2) "Good Caregiving Jobs Creation"
   a) County IHSS Public Authorities – Caregiver Registries (Yuba & Sutter)
   b) FREED Center for Independent Living – Caregiver Registry
3) "Virtual Care Expansion"
   a) FREED Center for Independent Living – Assistive Technology
   b) Peach Tree Health – Telehealth Services
   c) Sutter Health – Video Visits

Staff Lead: Regional Services Specialist – Clayton

4.4 YUBA-SUTTER: Recommendations regarding the Strategies under Goal #4 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Family & Friends Caregiving Support"	7/25 to 6/26	R
To be determined.		
(B) "Good Caregiving Jobs Creation"	7/25 to 6/26	R
To be determined.		
(C) "Virtual Care Expansion"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #5: AFFORDING AGING

"We will have economic security for as long as we live."

5.1 YUBA-SUTTER: Provide Services that Advance Goal #5

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Housing – Title III-B Supportive Service
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/ or (916) 486-1876
Seeks to facilitate housing placement among existing clients of AAA4.

2) Information & Assistance – Title III-B Supportive Service
FREED Center for Independent Living
https://freed.org/aging-disability-resources/ or (530) 742-4474
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Yuba Sutter Legal Center for Seniors
https://yubasutterlegalcenter.business.site/?utm_source=gmb&utm_medium=referral or (530) 742-8289
Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.

4) Nutrition: Congregate & Home-Delivered Meals – Title III-C Nutrition
   a) Dine Around Town, a program of Agency on Aging Area 4
   https://www.yubasuttermow.org/dine-around-town or (530) 670-0033
   A non-traditional congregate nutrition program that offers meals at local restaurants where enrolled participants can choose breakfast, lunch or dinner at no cost to them.

   b) Yuba Sutter Meals on Wheels
   https://www.yubasuttermow.org/home-delivered-meals or (530) 670-0033
   Home-Delivered Meals are provided to "homebound" older adults where they live.

Staff Lead: Program Developer (Julie), Regional Services Specialists (Clayton & Rebecca) and Nutrition Program Manager (Teja)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and III-C services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) CalFresh Healthy Living
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/wellness/ or (800) 211-4545
Provides classes and information to help low-income older adults lead a healthy lifestyle. This program provides activities to: Eat healthy on a budget, Live a healthy lifestyle, Eat a balanced diet.

Staff Lead: Health Promotion Manager (Brittany)

5.2 YUBA-SUTTER: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

5.3 YUBA-SUTTER: Coordinate with Community Partners on Goal #5

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #5 strategies, including but not limited to the following.

1) County Commissions on Aging (Yuba & Sutter)
2) Economic Development Committee (Sutter County)
3) Redevelopment Countywide Agency Oversight Board (Yuba County)
4) Sutter County Community Action Agency
5) Sutter County Health and Welfare Committee
6) Sutter County – Yuba City Best Practices Team
7) Sutter-Yuba Behavioral Health Advisory Board
8) Yuba County Community Services Commission

Staff Lead: Regional Services Specialist – Clayton

5.3 YUBA-SUTTER: Coordinate with Community Partners on Goal #5 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #5 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "End Homelessness for Older Adults"
   a) Sutter Yuba Homeless Consortium (Continuum of Care)
   b) Bi-County Homeless Services Program
   c) Bridges to Housing
   d) Habitat for Humanity Yuba-Sutter
   e) Hands of Hope
   f) Salvation Army (Yuba City Office)
   g) Sutter County Health & Human Services – Homeless Services
   h) Yuba County Health & Human Services – Housing Program
2) "Income Security as We Age"
   a) FREED Center for Independent Living
   b) Legal Services of Northern California – Western States Pension Assistance Project
   c) Yuba-Sutter Economic Development Corporation
3) "Protection from Poverty & Hunger"
   a) County Health & Human Services – CalFresh Food Assistance (Yuba & Sutter)
   b) County Health & Human Services – General Assistance (Yuba & Sutter)
   c) First Luteran Church
   d) Foothills Food Pantry
   e) FREED Center for Independent Living – Dine at Home Program
   f) Saint John's Episcopal Church
   g) Saint Vincent DePaul (Yuba City Location)
   h) Yuba City Seventh Day Adventist
   i) Yuba Sutter Food Bank
   j) Yuba Sutter Meals on Wheels

Staff Lead: Regional Services Specialist – Clayton

5.4 YUBA-SUTTER: Recommendations regarding the Strategies under Goal #5		
The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "End Homelessness for Older Adults"	7/25 to 6/26	R
To be determined.		
(B) "Income Security as We Age"	7/25 to 6/26	R
To be determined.		
(C) "Protection from Poverty & Hunger"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

AAA4's 2024 – 2028 Strategic Area Plan:

YOLO COUNTY, California

The local access point to a "No Wrong Door" system where people of all incomes and ages can turn for the full range of long-term support options and smooth access to public programs and benefits.

ADRC of Yolo County	7/25 to 6/26	ADRC

The ADRC of Yolo County will continue to lead by bringing together diverse community partners to improve service delivery for older adults and people with disabilities, and to promote ease of access to resources available.

- Enhanced Information & Assistance – ADRC Core Service
  Provides comprehensive information to people of any age, disability type and income level/source. Includes a warm hand off and follow-up to ensure quality referrals.
- Person Centered Options Counseling – ADRC Core Service
  Personal interview to discover the consumers' strengths, values, and preferences; decision support including fact finding and the weighing of pros and cons resulting in facilitated decision making; personalized action steps detailing consumers goals; and, follow-up to evaluate action plan success or the need for changes/plan adjustments.
- Short-Term Service Coordination – ADRC Core Service
  Personalized service coordination (usually 90 days or less) for the purpose of stabilizing a situation for individuals whose health, safety and welfare are at risk; and assistance to prevent unnecessary admittance to emergency department or institutional placement.
- Transition Support – ADRC Core Service
  Support a person with information, decision support and coordination of multiple services in order to successfully move from a health care facility back to a community home.
  Includes both hospital/acute care to home, as well as nursing facility to home.

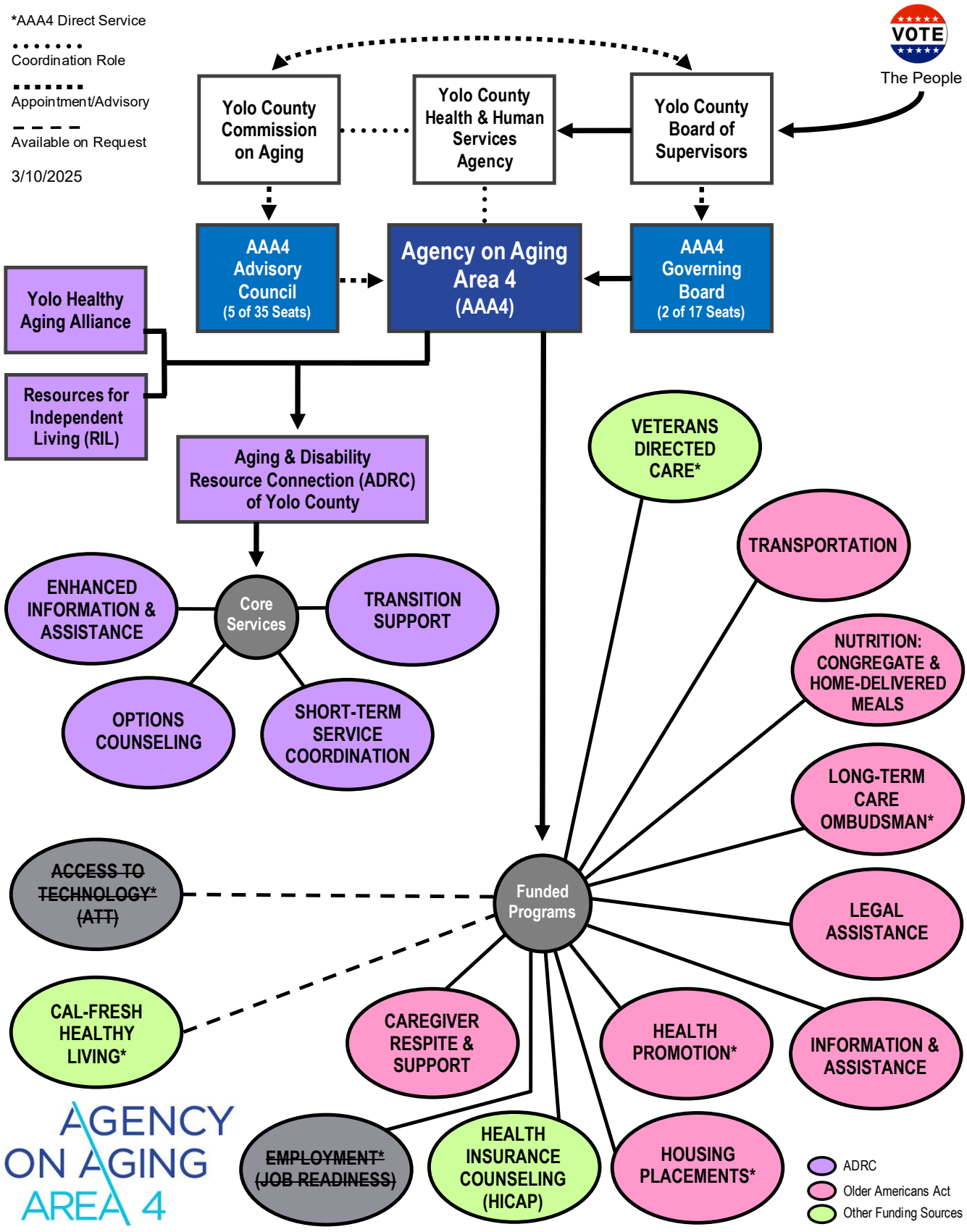
Additional goals for SFY 2025-26 include:

- ❖ Increasing partner engagement and community awareness of the ADRC within the public through coordinated outreach efforts, including non-English speaking communities.
- ❖ Collaborating with partners to identify and pursue additional grants and funding opportunities to expand its capacity to provide the core services of the ADRC.
- ❖ Educating local and state officials on the ADRC.

❖

Agency on Aging Area 4 (AAA4)
https://adrc4.org/sacramento-county/ or (530) 248-2421

Aging Services Network: Yolo County



GOAL #1: HOUSING FOR ALL AGES AND STAGES

"We will live where we choose as we age in communities that are age-, disability-, and dementia-friendly and climate- and disaster-ready."

1.1 YOLO: Provide Services that Advance Goal #1

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Information & Assistance – Title III-B Supportive Service
2-1-1 Yolo, a program of Community Link Capitol Region
https://www.211sacramento.org/211/2-1-1-yolo-county/ or 211 or (530) 392-4182
Provides individuals with information on services available within their communities.

2) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 662-1065
Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.

3) Transportation – Title III-B Supportive Service
Senior Transportation Voucher Program, by Yolo Adult Day Health Care
https://www.yolohealthyaging.org/transportation or (530) 666-8828
Provides door-to-door transportation services for medical appointments, shopping and other purposes via Yolobus Special.

Staff Lead: Regional Services Specialists (Rebecca & Sara)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) Veterans-Directed Care
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/ or (800) 211-4545
Note: Individuals must first be referred by a physician at a VA Medical Center.
With the help of an options counselor, veterans at risk of institutionalization manage their own flexible budgets, decide what mix of goods and services best meet their needs, and hire and supervise their own care workers, thus allowing them to continue living at home.

Staff Lead: VDC Program Manager – Liz

1.2 YOLO: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

1.3 YOLO: Coordinate with Community Partners on Goal #1

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #1 strategies, including but not limited to the following.

1) Yolo County Climate Action Commission
2) Yolo County Commission on Aging and Adult Services
3) Yolo County Habitat Conservancy Implementation Advisory Committee
4) Yolo County Healthcare Preparedness Coalition
5) Yolo County Housing Commission
6) Yolo County Parks, Recreation and Wildlife Advisory Committee
7) Yolo County Planning Commission
8) Yolo County Transportation Advisory Committee

Staff Lead: Regional Services Specialists (Clayton & Sara)

1.3 YOLO: Coordinate with Community Partners on Goal #1 (continued)		
(B) Engage with Lead Organizations & Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #1 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "More Housing Options as We Age"
   a) Yolo County Housing Authority
   b) City of Davis – Affordable Housing Program
   c) City of Woodland – Inclusionary Housing Policy
   d) City of Winters – Preapproved ADU Program
   e) Habitat for Humanity of Yolo County
   f) New Hope Community Development Corporation (CDC)
   g) Yolo County Building Services
2) "Transportation Beyond Cars"
   When referring consumers to services that require in-person visits, the ADRC of Yolo County shall enquire whether transportation is needed and, if so, shall endeavor to coordinate rides on consumers' behalf. – *As initially proposed by the local Ad Hoc Workgroup*
   UPDATE: A ride coordination protocol is in place.
   a) Yolo Transportation District (YoloTD)
   b) California Co-Op Cab
   c) Davis Community Transit
   d) Sacramento Regional Transit
   e) Unitrans
   f) Veterans Van
   g) Woodland Community Care Car
3) "Outdoor & Community Spaces" – Parks & Recreation
   a) City of Davis
   b) City of West Sacramento
   c) City of Winters
   d) City of Woodland
   e) County of Yolo
4) "Emergency Preparedness & Response"
   a) Yolo County Office of Emergency Services (OES)
   b) Yolo County Assessor – Calamity Claim
   c) Yolo County Fire Safe Council
   d) Yolo County Healthcare Preparedness Council
5) "Climate-Friendly Aging"
   a) Yolo-Solano Air Quality Management District
   b) Yolo County Climate Action and Sustainability Program
   c) Yolo County Environmental Health Division
   d) Tree Davis
   e) Woodland Tree Foundation
   f) Yolo Interfaith Alliance for Climate Justice

Staff Lead: Regional Services Specialists (Clayton & Sara)

1.4 YOLO: Recommendations regarding the Strategies under Goal #1 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "More Housing Options as We Age"	7/25 to 6/26	R
To be determined.		
(B) "Transportation Beyond Cars"	7/25 to 6/26	R
To be determined.		
(C) "Outdoor and Community Spaces"	7/25 to 6/26	R
To be determined.		
(D) "Emergency Preparedness & Response"	7/25 to 6/26	R
To be determined.		
(E) "Climate-Friendly Aging"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #2: HEALTH REIMAGINED

"We will have access to the services we need to live at home in our communities and to optimize our health and quality of life."

2.1 YOLO: Provide Services that Advance Goal #2

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Health Promotion (Evidence-Based) – Title III-D Services
Diabetes Education & Empowerment Program (DEEP) and
Matter of Balance (MOB), programs of AAA4
https://agencyonaging4.org/wellness/ or (916) 486-1876
Evidence based health promotion programs to facilitate exercise, to help manage chronic disease and to prevent injuries due to falls.

2) Information & Assistance – Title III-B Supportive Service
2-1-1 Yolo, a program of Community Link Capitol Region
https://www.211sacramento.org/211/2-1-1-yolo-county/ or 211 or (530) 392-4182
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 662-1065
Legal help by an attorney or person acting under the supervision of an attorney with accessing health benefits including MediCal and Covered California.

4) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

Staff Lead: Health Promotion Manager (Brittany), Intake Ombudsman (Anne & La'Sharae) and Regional Services Specialists (Rebecca & Sara)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. III-D and Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) Health Insurance Counseling & Advocacy Program (HICAP)
HICAP Services of Northern California, a program of LSNC
https://www.hicapservices.net/ or (800) 434-0222
Provides free, unbiased and confidential Medicare counseling and advocacy services.

Staff Lead: Regional Services Specialist – Rebecca

HICAP services open for competitive bid for April 1, 2027 and beyond. Contact AAA4 for details.

2.2 YOLO: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

2.3 YOLO: Coordinate with Community Partners on Goal #2

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #2 strategies, including but not limited to the following.

1) Healthy Yolo – Community Advisory Program
2) Partnership Health Plan – Consumer Advisory Committee
3) Yolo County Commission on Aging and Adult Services
4) Yolo County Emergency Medical Care Committee
5) Yolo County Health Council
6) Yolo County Local Mental Health Board
7) Yolo County Substance Use Disorder System Provider Meeting

Staff Lead: Regional Services Specialists (Clayton & Sara)

2.3 YOLO: Coordinate with Community Partners on Goal #2 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #2 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Bridging Health Care with Home" (Cross-Sector Partnerships)
   a) Yolo County Health and Human Services – CalAIM Lead Agency
   b) Yolo County Veterans Services Office
   c) CommuniCare Health Centers
   d) Dignity Health
   e) Kaiser Permanente
   f) Sutter Health
   g) UC Davis Health System
   h) VA Northern California Health Care System
   i) Winters Healthcare Foundation
2) "Health Care as We Age" (Affordable Prescription Drugs)
   a) One Community Health
3) "Lifelong Healthy Aging"
   a) Yolo County Public Health
   b) Health Education Council
   c) UC Davis Health – Healthy Aging Clinic
   d) Yolo Community Care Continuum
   e) Yolo Healthy Aging Alliance
4) "Geriatric Care Expansion"
   a) UC Davis Health – Geriatric Fellowship Programs
   b) Sutter SeniorCare PACE
   c) Sutter Health – Senior Services and Geriatric Care
5) "Dementia in Focus"
   a) Alzheimer's Association of Northern California
   b) Del Oro Caregiver Resource Center
   c) UC Davis Health – Alzheimer's Disease Center
6) "Nursing Home Innovation"
   a) YoloCares

Staff Lead: Regional Services Specialists (Clayton & Sara)

2.4 YOLO: Recommendations regarding the Strategies under Goal #2

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "Bridging Health Care with Home" (Cross-Sector Partnership)	7/25 to 6/26	R
To be determined.		
(B) "Health Care as We Age" (Affordable Prescription Drugs)	7/25 to 6/26	R
To be determined.		
(C) "Lifelong Healthy Aging"	7/25 to 6/26	R
To be determined.		
(D) "Geriatric Care Expansion"	7/25 to 6/26	R
To be determined.		
(E) "Dementia in Focus"	7/25 to 6/26	R
To be determined.		
(F) "Nursing Home Innovation"	7/25 to 6/26	R
To be determined.		
(G) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #3: INCLUSION AND EQUITY, NOT ISOLATION

"We will have lifelong opportunities for work, volunteering, engagement, and leadership and will be protected from isolation, discrimination, abuse, neglect, and exploitation."

3.1 YOLO: Provide Services that Advance Goal #3

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

~~1) Employment – Title III-B Supportive Service~~
~~*Mature Edge Job Readiness*, a Program of AAA4~~
~~https://agencyonaging4.org/mature-edge-job-readiness-program/ or (916) 486-1876~~
~~Offers a series of interactive job readiness sessions preparing the mature worker for a productive and successful job search.~~

2) Information & Assistance – Title III-B Supportive Service
2-1-1 Yolo, a program of Community Link Capitol Region
https://www.211sacramento.org/211/2-1-1-yolo-county/ or 211 or (530) 392-4182
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 662-1065
Legal help by an attorney or person acting under the supervision of an attorney with accessing employment benefits.

4) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.

Staff Lead: Job Readiness Coordinator (Bobby), Intake Ombudsman (Anne & La'Sharae) and Regional Services Specialists (Rebecca & Sara)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:		S

~~1) Access to Technology (ATT)~~
~~Digital Inclusion Program, a program of AAA4~~
~~https://agencyonaging4.org/ or (916) 486-1876~~
~~Provides older adults and adults with disabilities with mobile computer devices and digital skills training to keep them engaged with their communities.~~

~~Staff Lead: Program Administrator (Nancy)~~

3.2 YOLO: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

3.3 YOLO: Coordinate with Community Partners on Goal #3

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers, particularly around employment and protection from abuse. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #3 strategies, including but not limited to the following.

1) Greater Sacramento Economic Council – Competitiveness Council
2) Yolo County Commission on Aging and Adult Services
3) Yolo County Cultural Competence Committee
4) Yolo County Diversity and Inclusion Working Group
5) Yolo County Workforce Innovation Board

Staff Lead: Regional Services Specialists (Clayton & Sara)

3.3 YOLO: Coordinate with Community Partners on Goal #3 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #3 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Inclusion & Equity in Aging"
   a) Yolo County Administrator
   b) City of Woodland – Equity Action Plan
   c) Mercy Coalition of West Sacramento – Restorative Community Program
   d) Servant Hearts
2) "Closing the Digital Divide"
   a) Resources for Independent Living – Digital Access Project
   b) Yolo County Library – Get Connected, California!
   c) Yolo LAFCo – Broadband Strategic Plan
   d) YoloWorks! – Digital Literacy Classes
   e) Woodland Technology Alliance
3) "Opportunities to Work"
   a) Resources for Independent Living (RIL)
   b) YoloWorks!
   c) Pride Industries – Woodland Employment Services Center
   d) Yolo County Library – Job Application and Resume Assistance
4) "Opportunities to Volunteer"
   a) Volunteers of America – Northern California
   b) Yolo County Human Resources – Volunteer Opportunities
5) "Protection from Abuse, Neglect & Exploitation"
   a) Yolo County Health and Human Services – Adult Protective Services (APS)
   b) Empower Yolo – Crisis Line
   c) My Sister's House
   d) Yolo County District Attorney – Victim Services Program

Staff Lead: Regional Services Specialists (Clayton & Sara)

3.4 YOLO: Recommendations regarding the Strategies under Goal #3		
The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Inclusion & Equity in Aging"	7/25 to 6/26	R
To be determined.		
(B) "Closing the Digital Divide"	7/25 to 6/26	R
To be determined.		
(C) "Opportunities to Work"	7/25 to 6/26	R
To be determined.		
(D) "Opportunities to Volunteer"	7/25 to 6/26	R
To be determined.		
(E) "Protection from Abuse, Neglect & Exploitation"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #4: CAREGIVING THAT WORKS

"We will be prepared for and supported through the rewards and challenges of caring for aging loved ones."

4.1 YOLO: Provide Services that Advance Goal #4

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Caregiver Assessment, Case Management & Respite – Title III-E Services
   Del Oro Caregiver Resource Center
   https://www.deloro.org/services or (916) 728-9333
   Provides an assessment of caregiver needs along with ongoing consultation and case management as needed. A limited amount of caregiver respite is available to some families.
2) Information & Assistance – Title III-B Supportive Service
   2-1-1 Yolo, a program of Community Link Capitol Region
   https://www.211sacramento.org/211/2-1-1-yolo-county/ or 211 or (530) 392-4182
   Provides individuals with information on services available within their communities.

Staff Lead: Regional Services Specialist (Rebecca & Sara)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. III-E services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

Not applicable.

4.2 YOLO: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

4.3 YOLO: Coordinate with Community Partners on Goal #4

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #4 strategies, including but not limited to the following.

1) Yolo County Commission on Aging and Adult Services
2) Yolo County In-Home Supportive Services Advisory Board
3) Yolo County Local Mental Health Board

Staff Lead: Regional Services Specialists (Clayton & Sara)

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #4 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Family & Friends Caregiving Support"
   a) Co-Op Home Care
   b) Dignity Health – Yolo Adult Day Program
   c) Galileo Place – Adult Day Program
   d) Golden Days Adult Day Health
   e) UC Davis – Family Caregiving Institute
   f) YoloCares – Center for Caregiver Support
2) "Good Caregiving Jobs Creation"
   a) Yolo County IHSS Public Authority
   b) Futuro Health – CalGrows Training Courses
   c) LeadingAge California – Workforce Initiatives
   d) RIL – Caregiver Registry
   e) The Arc of California – CalGrows (workforce training and development program)
3) "Virtual Care Expansion"
   a) RIL – Assistive Technology
   b) California Foundation for Independent Living Centers – Ability Tools
   c) Dignity Health – Telemedicine Network
   d) Kaiser Permanente – Telehealth
   f) LeadingAge California's Innovation Showcase Challenge
   g) Sutter Health – Video Visits
   h) UC Davis Health – Telehealth Express Care

Staff Lead: Regional Services Specialists (Clayton & Sara)

4.4 YOLO: Recommendations regarding the Strategies under Goal #4 The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "Family & Friends Caregiving Support"	7/25 to 6/26	R
To be determined.		
(B) "Good Caregiving Jobs Creation"	7/25 to 6/26	R
To be determined.		
(C) "Virtual Care Expansion"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

GOAL #5: AFFORDING AGING

"We will have economic security for as long as we live."

5.1 YOLO: Provide Services that Advance Goal #5

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Housing – Title III-B Supportive Service
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/ or (916) 486-1876
Seeks to facilitate housing placement among existing clients of AAA4.

2) Information & Assistance – Title III-B Supportive Service
2-1-1 Yolo, a program of Community Link Capitol Region
https://www.211sacramento.org/211/2-1-1-yolo-county/ or 211 or (530) 392-4182
Provides individuals with information on services available within their communities.

3) Legal Assistance – Title III-B Supportive Service
Legal Services of Northern California (LSNC)
https://lsnc.net/ or (530) 662-1065
Legal help by an attorney or person acting under the supervision of an attorney with accessing housing benefits and with landlord/tenant disputes including evictions.

4) Nutrition: Congregate & Home-Delivered Meals – Title III-C Nutrition
Cafe Yolo – Social Dining, a program of MOW Yolo County
https://mowyolo.org/nutrition-access/cafe-yolo-social-dining-2/ or (530) 662-7035
A Traditional Congregate program where meals are provided at senior lunch sites.

Meals on Wheels (MOW) Yolo County
https://mowyolo.org/nutrition-access/home-delivered-meals/ or (530) 662-7035
A Traditional Home-Delivered program where meals are provided to "homebound" older adults where they live.

Yolo Mobile Meals for Healthy Aging, a program of Yolo Healthy Aging Alliance
https://www.yolohealthyaging.org/mobile-meals or (530) 776-5006
A Non-Traditional Congregate program where food truck meals are delivered to senior housing facilities on a regular schedule.

Staff Lead: Program Developer (Julie) and Regional Services Specialists (Clayton, Rebecca & Sara)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B and III-C services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

5.1 YOLO: Provide Services that Advance Goal #5 (continued)

(B) Other Programs:	7/25 to 6/26	S

1) CalFresh Healthy Living
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/wellness/ or (800) 211-4545
Provides classes and information to help low-income older adults lead a healthy lifestyle. This program provides activities to: Eat healthy on a budget, Live a healthy lifestyle, Eat a balanced diet.

Staff Lead: Health Promotion Manager (Brittany)

5.2 YOLO: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

5.3 YOLO: Coordinate with Community Partners on Goal #5

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #5 strategies, including but not limited to the following.

1) Yolo County Commission on Aging and Adult Services
2) Yolo County Executive Committee to Address Homelessness
3) Yolo County Health Council
4) Yolo County Housing Commission
5) Yolo County Local Mental Health Board
6) Yolo County Substance Use Disorder System Provider Meeting

Staff Lead: Regional Services Specialists (Clayton & Sara)

5.3 YOLO: Coordinate with Community Partners on Goal #5 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with local organizations that have primary responsibilities related to the Strategies under Goal #5 and with other local groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "End Homelessness for Older Adults"
   a) Yolo County Homeless and Poverty Action Coalition (HPAC) – Continuum of Care
   b) Cities of Davis, West Sacramento and Woodland
   c) CommuniCare Health Center – Davis Respite Center
   d) Davis Community Meals and Housing
   e) Empower Yolo
   f) Fourth and Hope – Emergency Shelter
   g) Short Term Emergency Aid Committee (STEAC)
   h) Yolo County Health and Human Services: APS – Home Safe
   i) Yolo County Health and Human Services – Homeless Services
2) "Income Security as We Age"
   a) Resources for Independent Living (RIL)
   b) Legal Services of Northern California – Western States Pension Assistance Project
   c) YoloWorks
3) "Protection from Poverty & Hunger"
   a) Yolo County Health and Human Services – CalFresh & General Assistance
   b) Church on the Rock – The Manna Project
   c) Davis Community Meals and Housing
   d) Fourth and Hope
   e) Manna House Food Pantry (Knights Landing Community Methodist Church)
   f) MOW Yolo County
   g) Pole Line Road Baptist Church – Food Closet
   h) Rise, Inc.
   i) Saint James Catholic Church – Saint Vincent De Paul Society
   j) Saint Martin Catholic Church – Family Assistance
   k) Shores of Hope – Outreach Center
   l) Short Term Emergency Aid Committee (STEAC) – Food Pantry
   m) The Salvation Army of Yolo County
   n) West Sacramento Baptist Church – Food Closet
   o) West Sacramento Seventh Day Adventist Church – Food Distribution Center
   p) Woodland Volunteer Food Closet
   q) Yolo Food Bank
   r) Yolo Food Security Coalition
   s) Yolo Healthy Aging Alliance

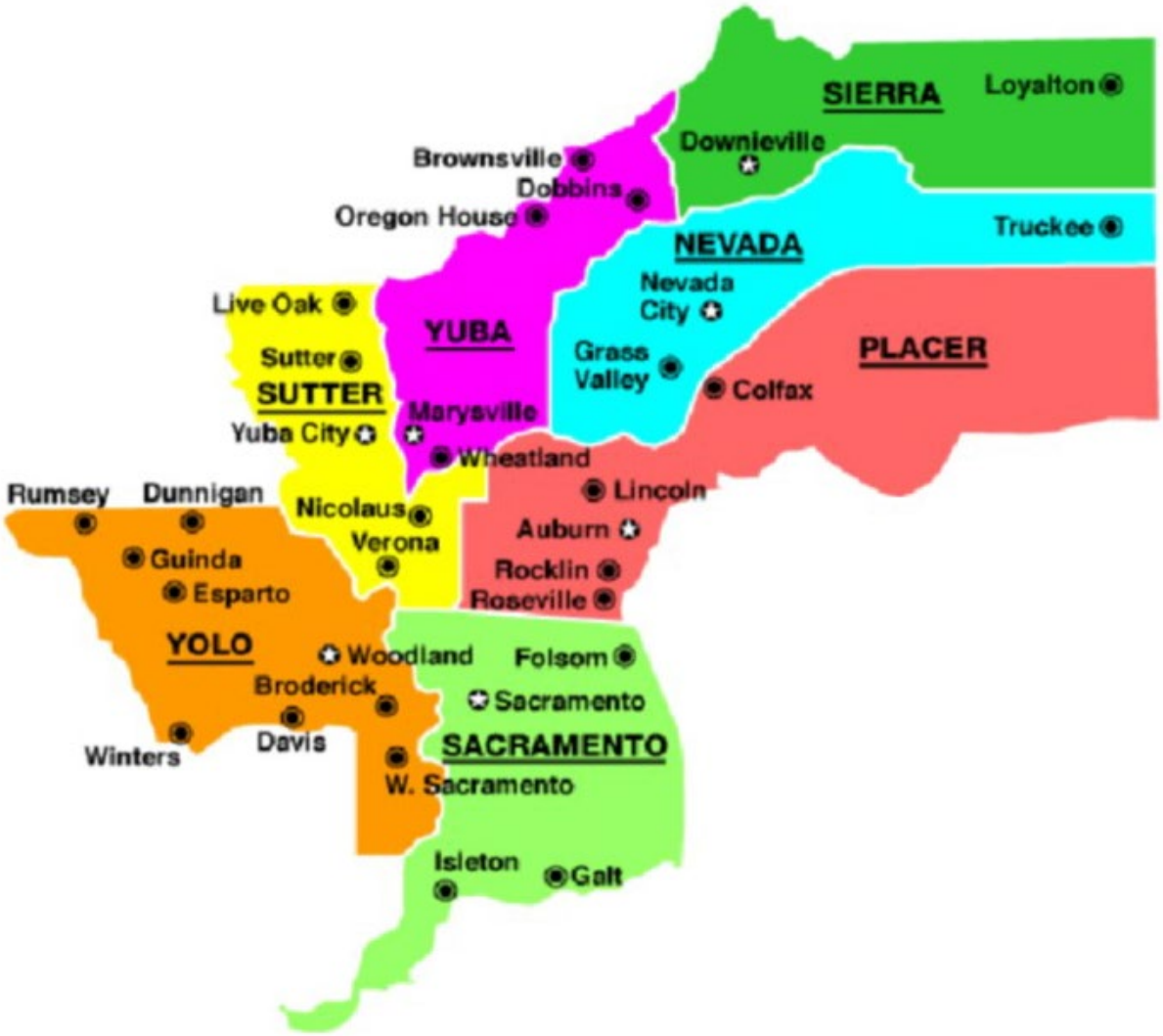
Staff Lead: Regional Services Specialists (Clayton & Sara)

5.4 YOLO: Recommendations regarding the Strategies under Goal #5		
The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.		
(A) "End Homelessness for Older Adults"	7/25 to 6/26	R
To be determined.		
(B) "Income Security as We Age"	7/25 to 6/26	R
To be determined.		
(C) "Protection from Poverty & Hunger"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

AAA4's 2024 – 2028 Strategic Area Plan:

PLANNING & SERVICE AREA 4

PSA 4



PLANNING & SERVICE AREA 4 (PSA 4)

GOAL #1: HOUSING FOR ALL AGES AND STAGES

"We will live where we choose as we age in communities that are age-, disability-, and dementia-friendly and climate- and disaster-ready."

1.1 PSA 4: Provide Services that Advance Goal #1

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Case Management – Title III-B Supportive Service
Agency on Aging Area 4 (AAA4)
https://www.agencyonaging4.org/connecting-to-resources or (800) 211-4545
Offers individualized services focused on the person's needs, encompassing both short-term and long-term support, as well as enhanced information and assistance services, and transition services, which align with the four core services of the Aging and Disability Resource Connection (ADRC) Network.
Available in Placer, Sacramento, Sutter, Yolo & Yuba counties.

Staff Lead: Case Management Program Manager – German

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) Veterans-Directed Care
Agency on Aging Area 4 (AAA4)
https://agencyonaging4.org/ or (800) 211-4545
Note: Individuals must first be referred by a physician at a VA Medical Center.
With the help of an options counselor, veterans at risk of institutionalization manage their own flexible budgets, decide what mix of goods and services best meet their needs, and hire and supervise their own care workers, thus allowing them to continue living at home.
Available in Nevada, Placer & Sacramento counties.

Staff Lead: VDC Program Manager – Liz

1.2 PSA 4: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

1.3 PSA 4: Coordinate with Community Partners on Goal #1

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with State/regional advisory bodies that have a special interest in Goal #1 strategies, including but not limited to the following.

1) California Commission on Aging (CCoA)
2) California Disability and Aging Community Living Advisory Committee
3) California Transportation Commission (CTC)

Staff Lead: Regional Services Administrator – Maggie

1.3 PSA 4: Coordinate with Community Partners on Goal #1 (continued)		
(B) Engage with Lead Organizations & Stakeholder Groups	7/25 to 6/26	C

Coordinate with State/regional organizations that have primary responsibilities related to the Strategies under Goal #1 and with other groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "More Housing Options as We Age"
   a) California Business, Consumer Services & Housing Agency
   b) AARP California
   c) Habitat for Humanity California
   d) Mercy Housing California
   e) Mutual Housing California
2) "Transportation Beyond Cars"
   a) California State Transportation Agency
   b) California Strategic Growth Council
   c) Sacramento Area Council of Governments (SACOG)
   d) AARP California
3) "Outdoor & Community Spaces" – Parks & Recreation
   a) California Natural Resources Agency
   b) AARP California
4) "Emergency Preparedness & Response"
   a) California Office of Emergency Services (CalOES)
   b) California Fire Safe Council
5) "Climate-Friendly Aging"
   a) California Environmental Protection Agency
   b) California Public Utilities Commission (CPUC)
   c) Breathe California
   d) Pacific Gas & Electric (PG&E)
   e) Sacramento Municipal Utility District (SMUD)

Staff Lead: Regional Services Administrator – Maggie

1.4 PSA 4: Recommendations regarding the Strategies under Goal #1

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "More Housing Options as We Age"	7/25 to 6/26	R
To be determined.		
(B) "Transportation Beyond Cars"	7/25 to 6/26	R
To be determined.		
(C) "Outdoor and Community Spaces"	7/25 to 6/26	R
To be determined.		
(D) "Emergency Preparedness & Response"	7/25 to 6/26	R
To be determined.		
(E) "Climate-Friendly Aging"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

PLANNING & SERVICE AREA 4 (PSA 4)

GOAL #2: HEALTH REIMAGINED

"We will have access to the services we need to live at home in our communities and to optimize our health and quality of life."

2.1 PSA 4: Provide Services that Advance Goal #2

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Health Promotion (Evidence-Based) – Title III-D Services
Bingocize, Diabetes Education & Empowerment Program (DEEP) and Matter of Balance (MOB) programs of AAA4
https://agencyonaging4.org/wellness/ or (916) 486-1876
Evidence based health promotion programs to facilitate exercise, to help manage chronic disease and to prevent injuries due to falls.
Available in all 7 counties.

2) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.
Available in all 7 counties.

Staff Lead: Health Promotion Manager (Brittany); Intake Ombudsman (Anne & La'Sharae)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-D and Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) Health Insurance Counseling & Advocacy Program (HICAP)
HICAP Services of Northern California, a program of LSNC
https://www.hicapservices.net/ or (800) 434-0222
Provides free, unbiased and confidential Medicare counseling and advocacy services.

Staff Lead: Regional Services Specialist (Rebecca)

HICAP services open for competitive bid for April 1, 2027 and beyond. Contact AAA4 for details.

2.2 PSA 4: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

2.3 PSA 4: Coordinate with Community Partners on Goal #2

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #2 strategies, including but not limited to the following.

1) California Alzheimer's Disease and Related Disorders Advisory Committee
2) California Behavioral Health Task Force
3) California Commission on Aging (CCoA)
4) California Disability and Aging Community Living Advisory Committee
5) Healthy California for All Commission

Staff Lead: Regional Services Administrator – Maggie

2.3 PSA 4: Coordinate with Community Partners on Goal #2 (continued)

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with State/regional organizations that have primary responsibilities related to the Strategies under Goal #2 and with other groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Bridging Health Care with Home"
   a) California Department of Health Services
   b) California Department of State Hospitals
   c) California Department of Veteran Affairs
   d) Adventist Health
   e) Dignity Health
   f) Kaiser Permanente
   g) Molina Health Care
   h) Sutter Health
   i) UC Davis Health System
   j) VA Northern California Health Care System
2) "Health Care as We Age"
   a) California Department of Health Care Services
3) "Lifelong Healthy Aging"
   a) California Department of Public Health
   b) StopFalls Sacramento
   c) UC Davis Health – Healthy Aging Clinic
4) "Geriatric Care Expansion"
   a) California Department of Health Care Access and Information
   b) UC Davis Health – Geriatric Fellowship Programs
   c) California Northstate University – College of Medicine
   d) Sacramento State University – School of Nursing
   e) Sutter SeniorCare PACE
   f) Sutter Health – Senior Services and Geriatric Care
5) "Dementia in Focus"
   a) Alzheimer's Association of Northern California
   b) California Department of Public Health
   c) Alzheimer's Aid Society
   d) Del Oro Caregiver Resource Center
   e) UC Davis Health – Alzheimer's Disease Center
6) "Nursing Home Innovation"
   a) California Department of Health Care Services
   b) California Department of Rehabilitation
   c) California Advocates of Nursing Home Reform (CANHR)
   d) California Healthcare Foundation – Innovation Fund
   e) Foundation Aiding the Elderly (FATE)

Staff Lead: Regional Services Administrator – Maggie

2.4 PSA 4: Recommendations regarding the Strategies under Goal #2

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "Bridging Health Care with Home" (Cross-Sector Partnership)	7/25 to 6/26	R
To be determined.		
(B) "Health Care as We Age" (Affordable Prescription Drugs)	7/25 to 6/26	R
To be determined.		
(C) "Lifelong Healthy Aging"	7/25 to 6/26	R
To be determined.		
(D) "Geriatric Care Expansion"	7/25 to 6/26	R
To be determined.		
(E) "Dementia in Focus"	7/25 to 6/26	R
To be determined.		
(F) "Nursing Home Innovation"	7/25 to 6/26	R
To be determined.		
(G) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

PLANNING & SERVICE AREA 4 (PSA 4)

GOAL #3: INCLUSION AND EQUITY, NOT ISOLATION

"We will have lifelong opportunities for work, volunteering, engagement, and leadership and will be protected from isolation, discrimination, abuse, neglect, and exploitation."

3.1 PSA 4: Provide Services that Advance Goal #3

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

~~1) Employment – Title III-B Supportive Service~~
~~*Mature Edge Job Readiness*, a Program of AAA4~~
~~https://agencyonaging4.org/mature-edge-job-readiness-program/ or (916) 486-1876~~
~~Offers a series of interactive job readiness sessions preparing the mature worker for a productive and successful job search.~~
~~Available in Placer, Sacramento and Yolo counties.~~

2) Long-Term Care Ombudsman – Title VII Service
Long-Term Care Ombudsman Program, a program of AAA4
https://agencyonaging4.org/long-term-care-ombudsman/ or (916) 376-8910
Investigates elder abuse complaints in long-term care facilities and in residential care facilities for the elderly.
Available in all 7 counties.

Staff Lead: ~~Job Readiness Coordinator (Bobby);~~ Intake Ombudsman (Anne & La'Sharae)

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Title VII services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:		S

~~1) Access to Technology (ATT)~~
~~Digital Inclusion Program, a program of AAA4~~
~~https://agencyonaging4.org/ or (916) 486-1876~~
~~Provides older adults and adults with disabilities with mobile computer devices and digital skills training to keep them engaged with their communities.~~
~~Available in Placer, Sacramento and Yolo counties.~~

~~Staff Lead: Program Administrator (Nancy)~~

3.2 PSA 4: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD
To be determined.		

3.3 PSA 4: Coordinate with Community Partners on Goal #3

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers, particularly around employment and protection from abuse. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #3 strategies, including but not limited to the following.

1) California Commission on Aging (CCoA)
2) California Disability and Aging Community Living Advisory Committee
3) California Elder and Disability Justice Coordinating Council

Staff Lead: Regional Services Administrator – Maggie

3.3 PSA 4: Coordinate with Community Partners on Goal #3 (continued)		
(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with State/regional organizations that have primary responsibilities related to the Strategies under Goal #3 and with other groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Inclusion & Equity in Aging"
   a) California Civil Rights Department
   b) County of Sacramento – Racial Equity Officer
   c) The Center at Sierra Health Foundation – Health Equity & Access Programs
2) "Closing the Digital Divide"
   a) California Department of Technology
   b) California Public Utilities Commission (CPUC)
3) "Opportunities to Work"
   a) California Department of Rehabilitation
   b) California Labor and Workforce Development Agency
   c) LeadingAge – Workforce Development
   d) Mutual Assistance Network
   e) Pride Industries – Sacramento Employment Services
   f) Valley Vision
4) "Opportunities to Volunteer"
   a) California Volunteers
   b) Volunteers of America – Northern California
5) "Protection from Abuse, Neglect & Exploitation"
   a) California Department of Justice
   b) California Department of Social Services
   c) California Office of the Attorney General
   d) McGeorge School of Law – Elder & Health Law Clinic
   e) WEAVE (Women Escaping a Violent Environment)

Staff Lead: Regional Services Administrator – Maggie

3.4 PSA 4: Recommendations regarding the Strategies under Goal #3

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "Inclusion & Equity in Aging"	7/25 to 6/26	R
To be determined.		
(B) "Closing the Digital Divide"	7/25 to 6/26	R
To be determined.		
(C) "Opportunities to Work"	7/25 to 6/26	R
To be determined.		
(D) "Opportunities to Volunteer"	7/25 to 6/26	R
To be determined.		
(E) "Protection from Abuse, Neglect & Exploitation"	7/25 to 6/26	R
To be determined.		
(F) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

PLANNING & SERVICE AREA 4 (PSA 4)

GOAL #4: CAREGIVING THAT WORKS

"We will be prepared for and supported through the rewards and challenges of caring for aging loved ones."

4.1 PSA 4: Provide Services that Advance Goal #4

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Caregiver Counseling – Title III-E Service
   Agency on Aging Area 4 (AAA4)
   https://www.agencyonaging4.org/connecting-to-resources or (800) 211-4545
   AAA4 Staff are trained in the evidence-based Benjamin Rose institute Care Consultation (BRICC) program. It is a telephone-based, personalized care-coaching program for individuals with chronic health conditions and their family or friend caregivers, especially for those living in rural areas. Available in Nevada, Placer, Sacramento, Sierra, Sutter, Yolo and Yuba counties.

   Staff Lead: BRICC Program Manager – German

   Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
   III-E services open for competitive bid for SFY 27-28 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

Not applicable.

4.2 PSA 4: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

4.3 PSA 4: Coordinate with Community Partners on Goal #4

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #4 strategies, including but not limited to the following.

1) California Commission on Aging (CCoA)
2) California Disability and Aging Community Living Advisory Committee
3) California Alzheimer's Disease and Related Disorders Advisory Committee
4) California Child Welfare Council
5) IHSS Stakeholder Advisory Committee

Staff Lead: Regional Services Administrator – Maggie

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with State/regional organizations that have primary responsibilities related to the Strategies under Goal #4 and with other groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "Family & Friends Caregiving Support"
   a) California Department of Aging
   b) Alzheimer's Aid Society
   c) The Arc California
   d) UC Davis – Family Caregiving Institute
2) "Good Caregiving Jobs Creation"
   a) California Department of Social Services
   b) California Department of Health Care Access and Information
   c) California Labor & Workforce Development Agency
   d) Futuro Health – CalGrows Training Courses
   e) LeadingAge California – Workforce Initiatives
3) "Virtual Care Expansion"
   a) California Department of Health Care Services
   b) California Department of Health Care Access and Information
   c) California Foundation for Independent Living Centers – Ability Tools
   d) Dignity Health – Telemedicine Network
   e) Kaiser Permanente – Telehealth
   c) LeadingAge California's Innovation Showcase Challenge
   f) Sutter Health – Video Visits
   g) UC Davis Health – Telehealth Express Care

Staff Lead: Regional Services Administrator – Maggie

4.4 PSA 4: Recommendations regarding the Strategies under Goal #4

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "Family & Friends Caregiving Support"	7/25 to 6/26	R
To be determined.		
(B) "Good Caregiving Jobs Creation"	7/25 to 6/26	R
To be determined.		
(C) "Virtual Care Expansion"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

PLANNING & SERVICE AREA 4 (PSA 4)

GOAL #5: AFFORDING AGING

"We will have economic security for as long as we live."

5.1 PSA 4: Provide Services that Advance Goal #5

AAA4 will use public and private funds to provide long-term services and supports (LTSS) to older adults, people with disabilities and their family caregivers.

(A) Older Americans Act (OAA) Programs:	7/25 to 6/26	S

1) Housing – Title III-B Supportive Service
   Agency on Aging Area 4 (AAA4)
   https://agencyonaging4.org/ or (916) 486-1876
   Seeks to facilitate housing placement among existing clients of AAA4.

Staff Lead: Program Developer – Nancy

Projected units of service for SFY 24-25 are listed in the Service Unit Plan (Section 8).
III-B services open for competitive bid for SFY 25-26 and beyond. Contact AAA4 for details.

(B) Other Programs:	7/25 to 6/26	S

1) CalFresh Healthy Living
   Agency on Aging Area 4 (AAA4)
   https://agencyonaging4.org/wellness/ or (800) 211-4545
   Provides classes and information to help low-income older adults lead a healthy lifestyle. This program provides activities to: Eat healthy on a budget, Live a healthy lifestyle, Eat a balanced diet.

Staff Lead: Health Promotion Manager – Brittany

5.2 PSA 4: Develop New Programs to Address Unmet Needs

Where it is warranted and when sufficient resources exist, AAA4 will develop new programs to address unmet needs among older adults, people with disabilities and their family caregivers.

(A) Start-up Project	7/25 to 6/26	PD

To be determined.

5.3 PSA 4: Coordinate with Community Partners on Goal #5

AAA4 will coordinate with advisory bodies, lead organizations and stakeholder groups that serve older adults, people with disabilities and their family caregivers. For the primary purpose of avoiding duplication of effort, validate non-OAA funded groups that represent the collective interests of people served by PSA 4 (or subgroups thereof) by publicly acknowledging and/or supporting their efforts. Seek to actively collaborate with such groups if doing so advances the goals of AAA4. Collaborations could include dedicated advocacy, promotion and training that yields tangible results for both parties.

(A) Support Advisory Bodies	7/25 to 6/26	C

Coordinate with local advisory bodies that have a special interest in Goal #5 strategies, including but not limited to the following.

1) California Behavioral Health Task Force
2) California Commission on Aging (CCoA)
3) California Disability and Aging Community Living Advisory Committee

Staff Lead: Regional Services Administrator – Maggie

(B) Engage with Lead Organizations and Stakeholder Groups	7/25 to 6/26	C

Coordinate with State/regional organizations that have primary responsibilities related to the Strategies under Goal #5 and with other groups that have a stake in those Strategies (whether or not they are actively addressing them), including but not limited to the following.

1) "End Homelessness for Older Adults"
   a) California Business, Consumer Services & Housing Agency
   b) California Department of Social Services
   c) VA Northern California Health Care System – Homeless Veterans Drop-In Services
2) "Income Security as We Age"
   a) California Labor & Workforce Development Agency
   b) CalSavers Retirement Savings Program
   c) Legal Services of Northern California – Western States Pension Assistance Project
   d) United Way California Capital Region – Guaranteed Income Program
3) "Protection from Poverty & Hunger"
   a) California Department of Food and Agriculture
   b) California Department of Social Services

Staff Lead: Regional Services Administrator – Maggie

5.4 PSA 4: Recommendations regarding the Strategies under Goal #5

The Master Plan for Aging includes many elements that are beyond the scope of AAA4 and its network of social service providers. Therefore, we offer the following recommendations to local individuals and organizations who's positions of authority allow them to take further action.

(A) "End Homelessness for Older Adults"	7/25 to 6/26	R
To be determined.		
(B) "Income Security as We Age"	7/25 to 6/26	R
To be determined.		
(C) "Protection from Poverty & Hunger"	7/25 to 6/26	R
To be determined.		
(D) OTHER (if applicable)	7/25 to 6/26	R
To be determined.		

SECTION 8. SERVICE UNIT PLAN (SUP)

TITLE III/VII SERVICE UNIT PLAN
CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) uses the Older Americans Act Performance System (OAAPS) Categories and units of service. They are defined in the OAAPS State Program Report (SPR).

For services not defined in OAAPS, refer to the Service Categories and Data Dictionary.

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

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			

Case Management (Access) Unit of Service = 1 hour

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	376	Goal 1	PSA 4: 1.1(A)1
2025-2026	376	Goal 1	PSA 4: 1.1(A)1
2026-2027			
2027-2028			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	36,623	Goal 1	Nevada, Placer, Sacramento, Sutter, Yolo & Yuba: 1.1(A); Objective numbers vary
2025-2026	36,623	Goal 1	Nevada, Placer, Sacramento, Sutter, Yolo & Yuba: 1.1(A); Objective numbers vary
2026-2027			
2027-2028			

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

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	28,131	All 5 Goals	Nevada, Placer, Sacramento, Sutter, Yolo & Yuba: #.1(A); Objective numbers vary
2025-2026	28,131	All 5 Goals	Nevada, Placer, Sacramento, Sutter, Yolo & Yuba: #.1(A); Objective numbers vary
2026-2027			
2027-2028			

Outreach (Access) Unit of Service = 1 contact

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	1,428	All 5 Goals	Sierra: #.1(A); Objective numbers vary
2025-2026	1,428	All 5 Goals	Sierra: 4.1(A); Objective numbers vary
2026-2027			
2027-2028			

Legal Assistance Unit of Service = 1 hour

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	6,788	Goals 1, 2, 3 & 5	All 7 Counties: #.1(A); Objective numbers vary
2025-2026	6,788	Goals 1, 2, 3 & 5	All 7 Counties: #.1(A); Objective numbers vary
2026-2027			
2027-2028			

Congregate Meals Unit of Service = 1 meal

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	106,624	Goal 5	All 7 Counties: 5.1(A); Objective numbers vary
2025-2026	106,624	Goal 5	All 7 Counties: 5.1(A); Objective numbers vary
2026-2027			
2027-2028			

Home-Delivered Meals Unit of Service = 1 meal

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	660,755	Goal 5	All 7 Counties: 5.1(A); Objective numbers vary
2025-2026	660,755	Goal 5	All 7 Counties: 5.1(A); Objective numbers vary
2026-2027			
2027-2028			

Nutrition Counseling Unit of Service = 1 hour

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			

Nutrition Education Unit of Service = 1 session

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (if applicable)
2024-2025	116	Goal 5	All 7 Counties: 5.1(A); Objective numbers vary
2025-2026	116	Goal 5	All 7 Counties: 5.1(A); Objective numbers vary
2026-2027			
2027-2028			

2. OAAPS Service Category – "Other" Title III Services

- Each **Title IIIB** "Other" service must be an approved OAAPS Program service listed on the "Schedule of Supportive Services (III B)" page of the Area Plan Budget (CDA 122) and the CDA Service Categories and Data Dictionary.

- Identify **Title IIIB** services to be funded that were not reported in OAAPS categories. (Identify the specific activity under the Other Supportive Service Category on the "Units of Service" line when applicable.)

Title IIIB, Other Priority and Non-Priority Supportive Services

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

- Other **Priority Supportive Services include**: Alzheimer's Day Care, Comprehensive Assessment, Health, Mental Health, Public Information, Residential Repairs/Modifications, Respite Care, Telephone Reassurance, and Visiting

- Other **Non-Priority Supportive Services include**: Cash/Material Aid, Community Education, Disaster Preparedness Materials, Emergency Preparedness, Employment, Housing, Interpretation/Translation, Mobility Management, Peer Counseling, Personal Affairs Assistance, Personal/Home Device, Registry, Senior Center Activities, and Senior Center Staffing

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

Other Supportive Service: Cash/Material Aid **Unit of Service = 1 assistance**

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (If applicable)
2024-2025	0	N/A	N/A
2025-2026	0	N/A	N/A
2026-2027			
2027-2028			

Other Supportive Service: Employment **Unit of Service = 1 activity**

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (If applicable)
2024-2025	96	Goal 3	Placer, Sacramento & Yolo: 3.1(A); Objective numbers vary
2025-2026	Not applicable		
2026-2027			
2027-2028			

Other Supportive Service: Housing **Unit of Service = 1 hour**

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (If applicable)
2024-2025	792 {First 6 months of operation as Key Connections}	Goal 7	PSA 4: 5.1(A)
2025-2026	1,584	Goal 7	PSA 4: 5.1(A)
2026-2027			
2027-2028			

Other Supportive Service: Residential Repairs **Unit of Service = 1 modification**

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (If applicable)
2024-2025	288	Goal 1	Nevada, Placer, Sacramento & Sutter: 1.1(A); Objective numbers vary
2025-2026	~~180~~ 194*	Goal 1	Placer and Sacramento: 1.1(A); Objective numbers vary
2026-2027			
2027-2028			

*Prior to each major Request for Proposals (RFP), AAA4 convenes seven independent Ad Hoc Workgroups to recommend which Service Categories should be funded at what levels. This process resulted in a significant reduction of total Minor Home Modification units because this service has been discontinued in Nevada and Sutter counties.

3. Title IIID/Health Promotion—Evidence-Based

- Provide the specific name of each proposed evidence-based program.

Evidence-Based Program Name(s): Bingocize, Diabetes Education Empowerment Program (DEEP) and Matter of Balance (MOB)

Add additional lines if needed.

Unit of Service = 1 contact

Fiscal Year	**Proposed** Units of Service	Goal Numbers	Objective Numbers (If applicable)
2024-2025	520	Goal 2	All 7 Counties: 2.1(A); Objective numbers vary
2025-2026	520	Goal 2	All 7 Counties: 2.1(A); Objective numbers vary
2026-2027			
2027-2028			

TITLE IIIB and TITLE VII: LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES

2024-2028 Four-Year Planning Cycle

As mandated by the Older Americans Act Reauthorization Act of 2020, the mission of the LTC Ombudsman Program is to seek resolution of problems and advocate for the rights of residents of LTC facilities with the goal of ensuring their dignity, quality of life, and quality of care.

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

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

Complete all Measures and Targets for Outcomes 1-3.

Outcome 1.
The problems and concerns of long-term care residents are solved through complaint resolution and other services of the Ombudsman Program. Older Americans Act Reauthorization Act of 2020, Section 712(a)(3), (5)]

Measures and Targets:

A. Complaint Resolution Rate (NORS Element CD-08) (Complaint Disposition). The average California complaint resolution rate for FY 2021-2022 was 57%.

Fiscal Year Baseline Resolution Rate	# of partially resolved or fully resolved complaints	Divided by the total number of Complaints	= Baseline Resolution Rate	Fiscal Year Target Resolution Rate
2022-2023	2,812	2,881	98%	___98___ % 2024-2025
2023-2024	2,320	2,399	97%	___97___ % 2025-2026
2024-2025				_____ % 2026-2027
2026-2027				_____ % 2027-2028

Program Goals and Objective Numbers: 2.1 PSA 4 (A) 2.

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

1. FY 2022-2023 Baseline: Number of Resident Council meetings attended **67** FY 2024-2025 Target: **50**
2. FY 2023-2024 Baseline: Number of Resident Council meetings attended **29** FY 2025-2026 Target: **29**
3. FY 2024-2025 Baseline: Number of Resident Council meetings attended _____ FY 2026-2027 Target: _____
4. FY 2025-2026 Baseline: Number of Resident Council meetings attended _____ FY 2027-2028 Target: _____
Program Goals and Objective Numbers: 2.1 PSA 4 (A) 2.

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

1. FY 2022-2023 Baseline: Number of Family Council meetings attended **17** FY 2024-2025 Target: **10**
2. FY 2023-2024 Baseline: Number of Family Council meetings attended **21** FY 2025-2026 Target: **25**
3. FY 2024-2025 Baseline: Number of Family Council meetings attended _____ FY 2026-2027 Target: _____
4. FY 2025-2026 Baseline: Number of Family Council meetings attended _____ FY 2027-2028 Target: _____
Program Goals and Objective Numbers: 2.1 PSA 4 (A) 2.

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

1. FY 2022-2023 Baseline: Number of Instances **265** FY 2024-2025 Target: **300**
2. FY 2023-2024 Baseline: Number of Instances **299** FY 2025-2026 Target: **300**
3. FY 2024-2025 Baseline: Number of Instances_____ FY 2026-2027 Target: _____
4. FY 2025-2026 Baseline: Number of Instances_____ FY 2027-2028 Target: _____
Program Goals and Objective Numbers: 2.1 PSA 4 (A) 2.

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

1. FY 2022-2023 Baseline: Number of Instances **1,268** FY 2024-2025 Target: **1,320**
2. FY 2023-2024 Baseline: Number of Instances **1,827** FY 2025-2026 Target: **1,830**
3. FY 2024-2025 Baseline: Number of Instances_____ FY 2026-2027 Target: _____
4. FY 2025-2026 Baseline: Number of Instances_____ FY 2027-2028 Target: _____
Program Goals and Objective Numbers: 2.1 PSA 4 (A) 2.

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

1. FY 2022-2023 Baseline: Number of Sessions **8** FY 2024-2025 Target: **12**
2. FY 2023-2024 Baseline: Number of Sessions **38** FY 2025-2026 Target: **38**
3. FY 2024-2025 Baseline: Number of Sessions _____ FY 2026-2027 Target: _____
4. FY 2025-2026 Baseline: Number of Sessions _____ FY 2027-2028 Target: _____
Program Goals and Objective Numbers: 2.1 PSA 4 (A) 2.

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

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

Systems Advocacy can include efforts to improve conditions in one LTC facility or can be county-wide, state-wide, or even national in scope. (Examples: Work with LTC facilities to improve pain relief or increase access to oral health care, work with law enforcement entities to improve response and investigation of abuse complaints, collaboration with other agencies to improve LTC residents' quality of care and quality of life, participation in disaster preparedness planning, participation in legislative advocacy efforts related to LTC issues, etc.) Be specific about the actions planned by the local LTC Ombudsman Program.

Enter information in the relevant box below.

FY 2024-2025

FY 2024-2025 Systems Advocacy Effort(s): (Provide one or more new systems advocacy efforts)

Fiscal Year 2024-25: During the pandemic volunteer numbers dropped significantly in California and across the nation resulting in lower facility visitations and presence in LTC facilities. Volunteers are crucial in ensuring visits to LTC facilities remain high. To address this systemic concern, the PSA-4 Ombudsman Program is striving for more aggressive volunteer recruitment to grow the program, reduce operational costs, and support field ombudsmen. PSA-4 wants to ensure an improved process of attracting and screening qualified, enthusiastic, dedicated, and committed candidates for volunteer work. PSA-4 has partnered with the Mon Ami program to effectively screen candidates. PSA-4 plans an ambitious increase from 1 to 5 volunteers (400% increase) over the next year and eventually have one volunteer for each of the seven (7) field ombudsmen to assist with general facility visits in RCFEs.

FY 2025-2026

Outcome of FY 2024-2025 Efforts:

PSA-4 increased volunteer recruitment, training, and hiring by 600% in FY 24/25. PSA-4 accomplished this by establishing a new onboarding process with ensuring volunteers receive the proper training, orientation, and additional fieldwork. PSA-4 used Mon Ami volunteer management software, social media, and an online platform (Mon Ami) to streamline recruitment efforts and communications. PSA-4 held a special volunteer recognition and appreciation even on 30 April 2024 to specifically reward volunteers for their contributions which included a special letter from the State Ombudsman, Blanca Castro along with OMB pins and certificates. PSA-4 has also collaborated with DOVIA, a local volunteer organization, to help reach a wider audience of volunteers and to learn more about recruiting and retaining volunteers. PSA-4 also hosted several events this past year to engage potential volunteers and showcase the Ombudsman Program's impact on advocacy for long-term care residents and their families.

FY 2025-2026 Systems Advocacy Effort(s): (Provide one or more new systems advocacy efforts)

On May 7, 2025, the PSA-4 Ombudsman Program will participate in Legislative Advocacy Day at the Sacramento Capitol. This event aims to enhance the visibility of the Ombudsman Program by organizing meetings with key senators and assembly members. Our goal is to foster new or continued heightened interest in aging programs, addressing the needs, services, and advocacy for long-term care residents.

We plan to promote the Ombudsman Program through collective systemic advocacy activities and building critical rapport with Capitol legislators and their staff. A targeted list of concerns has been developed, emphasizing how the Ombudsman Program can assist legislators with their constituents' aging issues. Continued contact with senators and assemblymembers will continue throughout the year to keep them appraised of ongoing efforts to improve the quality of long-term care residents.

FY 2026-2027
Outcome of FY 2025-2026 Efforts: **FY 2026-2027 Systems Advocacy Effort(s):** (Provide one or more new systems advocacy efforts)
FY 2027-2028
Outcome of 2026-2027 Efforts: **FY 2027-2028 Systems Advocacy Effort(s):** (Provide one or more new systems advocacy efforts)

Outcome 2. Residents have regular access to an Ombudsman. [(Older Americans Act Reauthorization Act of 2020), Section 712(a)(3)(D), (5)(B)(ii)]

Measures and Targets:

A. Routine Access: Nursing Facilities (NORS Element S-58) Percentage of nursing facilities within the PSA that were visited by an Ombudsman representative at least once each quarter not in response to a complaint. The percentage is determined by dividing the number of nursing facilities in the PSA that were visited at least once each quarter not in response to a complaint by the total number of nursing facilities in the PSA. NOTE: This is not a count of visits but a count of facilities. In determining the number of facilities visited for this measure, no nursing facility can be counted more than once.

1. FY 2022-2023 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint **62** divided by the total number of Nursing Facilities **64** = Baseline **97%** FY 2024-2025 Target: **97%**
2. FY 2023-2024 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint **65** divided by the total number of Nursing Facilities **65** = Baseline **100%** FY 2025-2026 Target: **100%**
3. FY 2024-2025 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint_____ divided by the total number of Nursing Facilities ____ = Baseline _____% FY 2026-2027 Target: _____
4. FY 2025-2026 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint_____ divided by the total number of Nursing Facilities ____ = Baseline _____% FY 2027-2028 Target: _____
Program Goals and Objective Numbers: 2.1 PSA 4 (A) 2.

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

1. FY 2022-2023 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint **626** divided by the total number of RCFEs **837** = Baseline **75%**

   FY 2024-2025 Target: **75**%

2. FY 2023-2024 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint **323** divided by the total number of RCFEs **870** = Baseline **37%**

   FY 2025-2026 Target: **70%**

3. FY 2024-2025 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint_____ divided by the total number of RCFEs____ = Baseline _____%

   FY 2026-2027 Target:_____

4. FY 2025-2026 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint_____ divided by the total number of RCFEs____ = Baseline _____%

   FY 2027-2028 Target:_____

Program Goals and Objective Numbers: 2.1 PSA 4 (A) 2.

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

1. FY 2022-2023 Baseline: **9.33** FTEs
   FY 2024-2025 Target: **9.33** FTEs

2. FY 2023-2024 Baseline: **10.18** FTEs
   FY 2025-2026 Target: **10.18** FTEs

3. FY 2024-2025 Baseline:_____FTEs
   FY 2026-2027 Target: _____FTEs

4. FY 2025-2026 Baseline: _____FTEs
   FY 2027-2028 Target: _____ FTEs

Program Goals and Objective Numbers: 2.1 PSA 4 (A) 2.

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

1. FY 2022-2023 Baseline: Number of certified LTC Ombudsman volunteers = **1** FY 2024-2025 Projected Number of certified LTC Ombudsman volunteers = **4**
2. FY 2023-2024 Baseline: Number of certified LTC Ombudsman volunteers = **3** FY 2025-2026 Projected Number of certified LTC Ombudsman volunteers = **7**
3. FY 2024-2025 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2026-2027 Projected Number of certified LTC Ombudsman volunteers _____
4. FY 2025-2026 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2027-2028 Projected Number of certified LTC Ombudsman volunteers _____
Program Goals and Objective Numbers: 2.1 PSA 4 (A) 2.

Outcome 3.
Ombudsman representatives accurately and consistently report data about their complaints and other program activities in a timely manner. [Older Americans Act Reauthorization Act of 2020, Section 712(c)]

Measures and Targets:
In narrative format, describe one or more specific efforts your program will undertake in the upcoming year to increase the accuracy, consistency, and timeliness of your National Ombudsman Reporting System (NORS) data reporting.

Some examples could include:

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

Fiscal Year 2024-2025: Improvements in both data quality and timeliness will be met by additional training and instruction for uniform entry and quality on the NORS codes during in-person staff meetings to enter complaint and activity data more accurately. PSA-4 has developed policy and procedures mandating ombudsmen be responsible for the timely preparation, reporting, and closing of case and activity logs in the database. All cases must have documentation within three (3) business days and are required to enter ongoing information into the case and activity logs until closure. This will help ensure last-minute entries are not made that may be fraught with error, incomplete data, grammatical inaccuracies are fixed in a timely manner and produce accurate information and data. PSA-4 will ensure the data quality dimension by reviewing all data information to confirm there are no duplicate entries.
Fiscal Year 2025-2026: Training in data collection, entry, and reporting is provided during monthly in-person Ombudsman training throughout the year. The OMB PM and Lead OMBs review all ODIN database Activity and Case logs. OMBs are required to adhere to the 3-day policy for data entry and are strongly encouraged to draft notes in Microsoft Word to help ensure grammar and spelling are correct before entry into the ODIN system. (Note: The ODIN system does not have spelling or grammar correction features).

Fiscal Year 2026-2027
Fiscal Year 2027-2028

TITLE VII ELDER ABUSE PREVENTION SERVICE UNIT PLAN

The program conducting the Title VII Elder Abuse Prevention work is:

☒	Ombudsman Program
☐	Legal Services Provider
☐	Adult Protective Services
☒	Other (explain/list): Other AAA4 staff for outreach and EAP annual campaign

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

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

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

AAAs must provide one or more of the service categories below.
NOTE: The number of sessions refers to the number of presentations and not the number of attendees

- **Public Education Sessions** –Indicate the total number of projected education sessions for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.

- **Training Sessions for Professionals** –Indicate the total number of projected training sessions for professionals (service providers, nurses, social workers) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.

- **Training Sessions for Caregivers Served by Title IIIE** –Indicate the total number of projected training sessions for unpaid family caregivers who are receiving services under Title IIIE of the Older Americans Act (OAA) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation. Older Americans Act Reauthorization Act of 2020, Section 302(3) 'Family caregiver' means an adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.

- **Hours Spent Developing a Coordinated System to Respond to Elder Abuse** –Indicate

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

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

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

TITLE VII ELDER ABUSE PREVENTION SERVICE UNIT PLAN

The agency receiving Title VII Elder Abuse Prevention funding is: Agency on Aging Area 4

Total # of	2024-2025	2025-2026	2026-2027	2027-2028
Individuals Served	120,000	120,000		
Public Education Sessions	1	1		
Training Sessions for Professionals	0	0		
Training Sessions for Caregivers served by Title IIIE	0	0		
Hours Spent Developing a Coordinated System	12	12		

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2024-2025	1,000	AAA4 brochure “Elder Abuse: Learn the Signs-Report Abuse”
2025-2026	1,000	AAA4 brochure “Elder Abuse: Learn the Signs-Report Abuse”
2026-2027		
2027-2028		

TITLE IIIE SERVICE UNIT PLAN

CCR Article 3, Section 7300(d)

2024-2028 Four-Year Planning Period

This Service Unit Plan (SUP) uses the five federally mandated service categories that encompass 16 subcategories. Refer to the CDA Service Categories and Data Dictionary for eligible activities and service unit measures. Specify proposed audience size or units of **service for ALL** budgeted funds.

Providing a goal with associated objectives is mandatory for services provided. The goal states the big picture and the objectives are the road map (specific and measurable activities) for achieving the big picture goal.

For example: **Goal 3**: Provide services to family caregivers that will support them in their caregiving role, thereby allowing the care receiver to maintain a healthy, safe lifestyle in the home setting.

- Objective 3.1: Contract for the delivery of virtual self-paced caregiver training modules. Review data monthly to strategize how to increase caregiver engagement in these modules.
- Objective 3.2: Facilitate a monthly in person support group for caregivers where they can share success stories and challenges, share information regarding experiences with HCBS. Respite day care will be available for their loved one if needed.
- Objective 3.3: Do caregiver assessments every 6 months to stay connected to the caregiver and knowledgeable about their needs.

Direct and/or Contracted IIIE Services

CATEGORIES (16 total)	1	2	3
Family Caregivers - Caregivers of Older Adults and Adults who are caring for an individual of any age with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.	***Proposed*** **Units of Service**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
Caregiver Access: Case Management	**Total hours**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	1,611	Goal 4	Placer, Sacramento & Yolo: 4.1(A); Objective numbers vary
2025-2026	1,611	Goal 4	Placer, Sacramento & Yolo: 4.1(A); Objective numbers vary
2026-2027			
2027-2028			

Caregiver Access: Information & Assistance	**Total Contacts**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Information Services	**# Of activities and Total est. audience (contacts) for above:**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	**# Of activities and Total est. audience (contacts) for above:**	Not applicable	
2025-2026	**# Of activities and Total est. audience (contacts) for above:**	Not applicable	
2026-2027	**# Of activities and Total est. audience (contacts) for above:**		
2027-2028	**# Of activities and Total est. audience (contacts) for above:**		
Caregiver Respite, In-Home	**Total hours**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	9,128	Goal 4	Placer, Sacramento & Yolo: 4.1(A); Objective numbers vary
2025-2026	9,128	Goal 4	Placer, Sacramento & Yolo: 4.1(A); Objective numbers vary
2026-2027			
2027-2028			
Caregiver Respite, Other	**Total hours**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Respite, Out-of-Home Day Care	**Total hours**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	2,948	Goal 4	Placer, Sacramento & Yolo: 4.1(A); Objective numbers vary
2025-2026	2,948	Goal 4	Placer, Sacramento & Yolo: 4.1(A); Objective numbers vary
2026-2027			

2027-2028			
Caregiver Respite, Out-of-Home Overnight Care	**Total hours**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	532	Goal 4	Placer & Sacramento: 4.1(A); Objective numbers vary
2025-2026	532	Goal 4	Placer & Sacramento: 4.1(A); Objective numbers vary
2026-2027			
2027-2028			
Caregiver Supplemental Services: Assistive Technologies	**Total Occurrences**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Supplemental Services: Caregiver Assessment	**Total hours**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	5,704	Goal 4	Placer, Sacramento & Yolo: 4.1(A); Objective numbers vary
2025-2026	5,704	Goal 4	Placer, Sacramento & Yolo: 4.1(A); Objective numbers vary
2026-2027			
2027-2028			
Caregiver Supplemental Services: Caregiver Registry	**Total Occurrences**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Supplemental Services: Consumable Supplies	**Total occurrences**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		

2026-2027			
2027-2028			
Caregiver Supplemental Services: Home Modifications	**Total occurrences**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Supplemental Services: Legal Consultation	**Total contacts**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Support Groups	**Total sessions**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Support: Training	**Total hours**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Support: Counseling	**Total hours**	***Required* Goal #(s)**	***Required* Objective #(s)**
2024-2025	108	Goal 4	All 7 Counties: 4.1(A)1
2025-2026	108	Goal 4	All 7 Counties: 4.1(A)1
2026-2027			
2027-2028			

Direct and/or Contracted IIIE Services- Older Relative Caregivers

CATEGORIES (16 total)	1	2	3
Older Relative Caregivers	***Proposed*** **Units of Service**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
Caregiver Access Case Management	**Total hours**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Access Information & Assistance	**Total hours**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Information Services	**# Of activities and Total est. audience (contacts) for above**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	**# Of activities: Total est. audience for above:**	Not applicable	
2025-2026	**# Of activities: Total est. audience for above:**	Not applicable	
2026-2027	**# Of activities: Total est. audience for above:**		
2027-2028	**# Of activities: Total est. audience for above:**		
Caregiver Respite In-Home	**Total hours**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			

Caregiver Respite Other	**Total hours**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Respite Out-of-Home Day Care	**Total hours**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Respite Out-of-Home Overnight Care	**Total hours**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Supplemental Services Assistive Technologies	**Total Occurrences**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Supplemental Services Caregiver Assessment	**Total hours**	**Required Goal #(s)**	**Required Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			

Caregiver Supplemental Services Caregiver Registry	**Total Occurrences**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Supplemental Services Consumable Supplies	**Total occurrences**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Supplemental Services Home Modifications	**Total occurrences**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Supplemental Services Legal Consultation	**Total contacts**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Support Groups	**Total sessions**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			

Caregiver Support Training	**Total hours**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			
Caregiver Support Counseling	**Total hours**	***Required*** **Goal #(s)**	***Required*** **Objective #(s)**
2024-2025	Not applicable		
2025-2026	Not applicable		
2026-2027			
2027-2028			

PSA 4

HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP) SERVICE UNIT PLAN
CCR Article 3, Section 7300(d)
WIC § 9535(b)

MULTIPLE PLANNING AND SERVICE AREA HICAPs (multi-PSA HICAP): Area Agencies on Aging (AAA) that are represented by a multi-PSA, HICAPs must coordinate with their "Managing" AAA to complete their respective PSA's HICAP Service Unit Plan.

CDA contracts with 26 AAAs to locally manage and provide HICAP services in all 58 counties. Four AAAs are contracted to provide HICAP services in multiple Planning and Service Areas (PSAs). The "Managing" AAA is responsible for providing HICAP services in a way that is equitable among the covered service areas.

HICAP PAID LEGAL SERVICES: Complete this section if HICAP Legal Services are included in the approved HICAP budget.

STATE & FEDERAL PERFORMANCE TARGETS: The HICAP is assessed based on State and Federal Performance Measures. AAAs should set targets in the service unit plan that meet or improve on each PM displayed on the *HICAP State and Federal Performance Measures* tool located online at:

https://www.aging.ca.gov/Providers_and_Partners/Area_Agencies_on_Aging/Planning/

HICAP PMs are calculated from county-level data for all 33 PSAs. HICAP State and Federal PMs, include:

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

HICAP service-level data are reported in CDA's Statewide HICAP Automated Reporting Program (SHARP) system per reporting requirements.

SECTION 1: STATE PERFORMANCE MEASURES

HICAP Fiscal Year (FY)	PM 1.1 Clients Counseled (Estimated)	Goal Numbers
2024-2025	2,105	Goal 2
2025-2026	~~2,105~~ 2,283	Goal 2
2026-2027		
2027-2028		
HICAP Fiscal Year (FY)	**PM 1.2 Public and Media Events (PAM) (Estimated)**	**Goal Numbers**
2024-2025	63	Goal 2
2025-2026	~~63~~ 56	Goal 2
2026-2027		
2027-2028		

SECTION 2: FEDERAL PERFORMANCE MEASURES

HICAP Fiscal Year (FY)	PM 2.1 Client Contacts (Interactive)	Goal Numbers
2024-2025	11,982	Goal 2
2025-2026	~~11,982~~ 5,838	Goal 2
2026-2027		
2027-2028		
HICAP Fiscal Year (FY)	**PM 2.2 PAM Outreach (Interactive)**	**Goal Numbers**
2024-2025	5,016	Goal 2
2025-2026	~~5,016~~ 3,637	Goal 2
2026-2027		
2027-2028		

HICAP Fiscal Year (FY)	PM 2.3 Medicare Beneficiaries Under 65	Goal Numbers
2024-2025	2,087	Goal 2
2025-2026	~~2,087~~ 745	Goal 2
2026-2027		
2027-2028		

HICAP Fiscal Year (FY)	PM 2.4 Hard to Reach (Total)	PM 2.4a LIS	PM 2.4b Rural	PM 2.4c ESL	Goal Numbers
2024-2025	6,009	2,619	784	2,606	Goal 2
2025-2026	~~6,009~~ 3,025	~~2,619~~ 1,805	~~784~~ 762	~~2,606~~ 458	Goal 2
2026-2027					
2027-2028					

HICAP Fiscal Year (FY)	PM 2.5 Enrollment Contacts (Qualifying)	Goal Numbers
2024-2025	13,813	Goal 2
2025-2026	~~13,813~~ 6,032	Goal 2
2026-2027		
2027-2028		

SECTION 3: HICAP LEGAL SERVICES UNITS OF SERVICE (IF APPLICABLE)[8]

HICAP Fiscal Year (FY)	PM 3.1 Estimated Number of Clients Represented Per FY (Unit of Service)	Goal Numbers
2024-2025	200	Goal 2
2025-2026	200	Goal 2
2026-2027		
2027-2028		
HICAP Fiscal Year (FY)	**PM 3.2 Estimated Number of Legal Representation Hours Per FY (Unit of Service)**	**Goal Numbers**
2024-2025	169	Goal 2
2025-2026	169	Goal 2
2026-2027		
2027-2028		
HICAP Fiscal Year (FY)	**PM 3.3 Estimated Number of Program Consultation Hours Per FY (Unit of Service)**	**Goal Numbers**
2024-2025	128	Goal 2
2025-2026	128	Goal 2
2026-2027		
2027-2028		

[8] Requires a contract for using HICAP funds to pay for HICAP Legal Services.

SECTION 9. SENIOR CENTERS & FOCAL POINTS

COMMUNITY SENIOR CENTERS AND FOCAL POINTS LIST

CCR Title 22, Article 3, Section 7302(a)(14), 45 CFR Section 1321.53(c), Older Americans Act Reauthorization Act of 2020, Section 306(a) and 102(21)(36)

In the form below, provide the current list of designated community senior centers and focal points with addresses. This information must match the total number of senior centers and focal points reported in the Older Americans Act Performance System (OAAPS) State Performance Report (SPR) module of the California Aging Reporting System.

Designated Community Focal Point	Address
Chabolla Community Center	600 Chabolla Avenue, Galt, CA 95632
Maidu Community Center	1550 Maidu Drive, Roseville, CA 95661
Mission Oaks Community Center	4701 Gibbons Drive, Carmichael, CA 95608
Nevada City Senior Apartments	841 Old Tunnel Road, Grass Valley, CA 95945
North San Juan Community Center	29190 State Hwy 49, North San Juan, CA 95960
RISE, Inc.	17317 Freemont Street, Esparto, CA 95627
Samuel C. Pannell Meadowview Community Center	2450 Meadowview Road, Sacramento, CA 95833
Truckee Donner Senior Apartments	10040 Estates Drive, Truckee, CA 96161
West Sacramento Community Center	1075 W. Capitol Ave., West Sacramento, CA 95691

Senior Center	Address
ACC Senior Services	7334 Park City Dr., Sacramento, CA 95831
Davis Senior Center	646 A Street, Davis, CA 95616
Ethel McLeod Hart Multipurpose Senior Center	915 27th Street, Sacramento, CA 95816
Loyalton Senior Center	302 First Street, Loyalton, CA 96118
Neil Orchard Senior Activities Center	3480 Routier Road, Rancho Cordova, CA 95827
Senior Center of Elk Grove	8230 Civic Center Drive, Elk Grove, CA 95757
Stanford Settlement Senior Center	450 West El Camino Ave., Sacramento, CA 95833
Woodland Community & Senior Center	2001 East Street, Woodland, CA 95776
Yuba City Senior Center	777 Ainsley Avenue, Yuba City, CA 95991

SECTION 10. FAMILY CAREGIVER SUPPORT PROGRAM

Notice of Intent for Non-Provision of FCSP Multifaceted Systems of Support Services
Older Americans Act Reauthorization Act of 2020, Section 373(a) and (b)
2024-2028 Four-Year Planning Cycle

Based on the AAA's needs assessment and subsequent review of current support needs and services for **family caregivers**, indicate what services the AAA **intends** to provide using Title IIIE and/or matching FCSP funds for both.

Check YES or NO for each of the services* identified below and indicate if the service will be provided directly or contracted. **If the AAA will not provide at least one service subcategory for each of the five main categories, a justification for services not provided is required in the space below.**

Family Caregiver Services

Category	2024-2025	2025-2026	2026-2027	2027-2028
Caregiver Access ☒ Case Management ☐ Information and Assistance	☐ Yes Direct ☒ Yes Contract ☐ No	☐ Yes Direct ☒ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No
Caregiver Information Services ☐ Information Services	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No
Caregiver Support ☐ Training ☐ Support Groups ☒ Counseling	☒ Yes Direct ☐ Yes Contract ☐ No	☒ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No
Caregiver Respite ☒ In Home ☒ Out of Home (Day) ☒ Out of Home (Overnight) ☐ Other:	☐ Yes Direct ☒ Yes Contract ☐ No	☐ Yes Direct ☒ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No
Caregiver Supplemental ☐ Legal Consultation ☐ Consumable Supplies ☐ Home Modifications ☐ Assistive Technology ☒ Other (Assessment) ☐ Other (Registry)	☐ Yes Direct ☒ Yes Contract ☐ No	☐ Yes Direct ☒ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No

Older Relative Caregiver Services

Category	2024-2025	2025-2026	2026-2027	2027-2028
Caregiver Access ☐ Case Management ☐ Information and Assistance	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No
Caregiver Information Services ☐ Information Services	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No
Caregiver Support ☐ Training ☐ Support Groups ☐ Counseling	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No
Caregiver Respite ☐ In Home ☐ Out of Home (Day) ☐ Out of Home (Overnight) ☐ Other:	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No
Caregiver Supplemental ☐ Legal Consultation ☐ Consumable Supplies ☐ Home Modifications ☐ Assistive Technology ☐ Other (Assessment) ☐ Other (Registry)	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☒ No	☐ Yes Direct ☐ Yes Contract ☐ No	☐ Yes Direct ☐ Yes Contract ☐ No

Justification: If any of the five main categories are **NOT** being provided please explain how the need is already being met in the PSA. If the justification information is the same, multiple service categories can be grouped in the justification statement. The justification must include the following:

1. **Provider name and address.**
2. **Description of the service(s) they provide (services should match those in the CDA Service Category and Data Dictionary**
3. **Where is the service provided (entire PSA, certain counties)?**
4. **How does the AAA ensure that the service continues to be provided in the PSA without the use of Title IIIE funds**

Note: The AAA is responsible for ensuring that the information listed for these organizations is up to date. Please include any updates in the Area Plan Update process.

Justification for lack of Older Relative (Grandparent) Services:

1. Provider name and address:
   Wayfinder Family Services
   8391 Auburn Blvd.
   Citrus Heights, CA 95610

2. Description of the service(s) they provide (services should match those in the CDA Service Category and Data Dictionary):
   Wayfinder partners with the Sacramento County Department of Health and Human Services to support two kinship support service centers in north and south Sacramento.

These centers offer support groups, recreational activities, peer mentoring, respite care and referrals for low-cost legal and counseling services. On a very limited basis, individuals in need can also receive bus passes and emergency funds.

3. Where are the services provided (entire PSA, certain counties, etc.)?
   Wayfinder has offices in Placer, Sacramento and Yolo counties.

4. How does the AAA ensures that the service continues to be provided in the PSA without the use of Title IIIE funds?
   Area 4 maintains communication with Lilliput to ensure services are continuing and that no significant unmet needs exist.

SECTION 11. LEGAL ASSISTANCE

2024-2028 Four-Year Area Planning Cycle

This section must be completed and submitted annually. The Older Americans Act Reauthorization Act of 2020 designates legal assistance as a priority service under Title III B [42 USC §3026(a)(2)][12]. CDA developed *California Statewide Guidelines for Legal Assistance* (Guidelines), which are to be used as best practices by CDA, AAAs and LSPs in the contracting and monitoring processes for legal services, and located at: https://aging.ca.gov/Providers_and_Partners/Legal_Services/#pp-gg

1. Based on your local needs assessment, what percentage of Title IIIB funding is allocated to Legal Services? **Discuss:** The Minimum allocation is 10%; for SFY 2024-25 the actual allocation is 12.9%, and for SFY 2025-26 the actual allocation is 13.5%.

2. How have your local needs changed in the past year(s)? Please identify any changes (include whether the change affected the level of funding and the difference in funding levels in the past four years). **Discuss:** Retaining safe and affordable housing continues to be a top need of older adults seeking legal support in the wake of the pandemic. This has not changed funding levels.

3. How does the AAA's contract/agreement with the Legal Services Provider(s) (LSPs) specify and ensure that the LSPs are expected to use the California Statewide Guidelines in the provision of OAA legal services? **Discuss:** In our Program Specifications and Standards, we state that "LSPs shall have ready access to the following for all appropriate staff: relevant Unite States Code and Code of Federal Regulations; local laws and regulations; relevant California laws, regulations and rules; manuals for relevant government programs; relevant support center manuals, newsletters, information and referral manuals; and a law library." In addition, clear instruction is given by the AAA4 Regional Services Specialist that the California Statewide Guidelines must be followed. These guidelines as well as the California Uniform Reporting System Instructions and Definitions are linked and referenced during the annual monitoring process. AAA4 integrated the contents of the Statewide Legal Services Guidelines (Guidelines) into the Program Specifications & Application portion of our Request for Proposals (RFP). More specifically, content from Section VIII of the Guidelines was added to Section J of the RFP document, and the Guidelines are referenced in Section L. When an applicant is awarded funds, their Program Spec/Application is made a part of their service contract via incorporation by reference. This ensures our Legal Services Providers are aware of their ongoing obligation to abide by the Guidelines.

4. How does the AAA collaborate with the Legal Services Provider(s) to jointly establish specific priority issues for legal services? What are the top four (4) priority legal issues in your PSA? **Discuss:** We collaborate with our Legal Services Providers to establish priority legal issues. Priorities are set based on the results of regular surveys with clients, staff, and the general public. The top four priority issues in our PSA are currently Housing (tenant's rights, utilities), Health Care, Economic Stability/Nutrition, Family Safety and Stability.

5. How does the AAA collaborate with the Legal Services Provider(s) to jointly identify

the target population? What is the targeted senior population and mechanism for reaching targeted groups in your PSA? **Discuss:** We collaborate to identify target populations. Services are targeted to those people with the greatest social or economic need but not limited to low-income individuals, minorities, rural residents and those with limited English proficiency. Groups that should be considered to receive priority for legal assistance services include older adults who are:

- Homebound
- Residing in long-term care facility
- Without access to transportation
- Living alone with no support or geographically isolated
- Experiencing chronic health issues
- Experiencing homelessness or at risk of homelessness
- Deaf/hearing/vision impaired
- LGBTQ+
- Limited English Proficiency
- People with physical disabilities
- People with dementia or other mental capacity issues
- Grandparents caring for grandchildren
- Formerly incarcerated

These target populations were gathered with a variety of input from our funded partners, Advisory Council, Governing Board and the knowledge of those in leadership at AAA4. Our Funded Partners reach out to these communities directly in different ways. Some programs will annually put flyers in home delivered meal packets to reach out to the home bound population. Educational presentations and office hours are regularly held in Low Income Senior Housing and at other locations where target populations are found.

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

Fiscal Year	# of Legal Assistance Services Providers	Did the number of service providers change? If so please explain
2024-2025	4	Yes, we no longer contract with Community Beyond Violence in Nevada/Sierra counties.
2025-2026	4	No
2026-2027		
2027-2028		

7. What methods of outreach are Legal Services Providers using? **Discuss:** The Legal Services Providers are using multiple methods of outreach in our communities. Service Providers participate in health fairs and outreach events where they provide information and outreach materials to the public. They conduct educational presentations and training to community partner organizations, including the ADRCs. Legal Services Providers also offer office hours open to the public at Focal Points, Senior Centers and other CBOs.

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

Fiscal Year	Name of Provider	Geographic Region covered
2024-2025	a. LSNC Motherlode b. LSNC Yolo c. LSNC Sacramento d. Yuba Sutter Legal Center	a. Placer, Nevada and Sierra Counties b. Yolo County c. Sacramento County d. Yuba and Sutter Counties
2025-2026	a. LSNC Motherlode b. LSNC Yolo c. LSNC Sacramento d. Yuba Sutter Legal Center	a. Placer, Nevada and Sierra Counties b. Yolo County c. Sacramento County d. Yuba and Sutter Counties
2026-2027	a. b. c.	a. b. c.
2027-2028	a. b. c.	a. b. c.

9. Discuss how older adults access Legal Services in your PSA and whether they can receive assistance remotely (e.g., virtual legal clinics, phone, U.S. Mail, etc.). **Discuss:** Potential clients can call, email, use the U.S. postal service or show up in person to receive legal assistance. They can also access Legal Services at remote locations during office hours held in community centers and other CBOs.

10. Identify the major types of legal issues that are handled by the Title IIIB legal provider(s) in your PSA (please include new legal problem trends in your area). **Discuss**: Preservation of housing is a major area that our Legal Services Providers are currently focused on. The temporary moratorium on evictions was lifted after the pandemic and older adults are losing their housing due to rent increases, new landlords, and other property management issues. Our LSPs are continuing to prioritize these housing needs. Health care, economic stability, access to public benefits, and family safety and stability are also major issues older adults are currently bringing to our providers. There are no new legal problem trends in our area as of September 2025. Our LSPs conduct a survey about priority issues every three years, with the next survey going out in late 2025.

11. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. **Discuss:** The Legal Service Providers in most of our counties are encountering challenges in recruiting and retaining attorneys and other staff. This can make providing services challenging. Barriers that may affect delivery of legal services, including geographic limitations, language barriers, lack of awareness of available services, are being addressed by our Legal Service provider by utilizing strategies such as teleconferencing and mobile legal clinics to increase accessibility especially in our frontier communities. Additionally, our providers are actively engaging in community outreach and education by partnering with local organizations and senior centers to raise awareness and ensure that services reach those in need.

12. What other organizations or groups does your legal service provider coordinate services with? **Discuss:** Our Legal Services Providers coordinate services with a wide range of local organizations, including county services, Independent Living Centers, Victim support centers, CBOs, Collaboration Committees and others. The LSPs also participate in the ADRCs in their counties, providing presentations and coordination with numerous organizations that support older adults and people with disabilities. Legal Services of Northern California is the designated Legal Services Corporation for all seven counties in PSA 4. LSNC is primary legal services provider for five counties in our PSA and also serves as the HICAP provider across all seven counties in the region. Due to their legal proximity, they naturally collaborate to coordinate their efforts. The Yuba Sutter Legal Center is the legal services provider for Yuba and Sutter Counties and works closely with the HICAP provider, even offering physical space for HICAP counseling. Additionally, the Ombudsman provider, a branch of AAA4, plays a key coordinating role by offering referrals and resources to their clientele as needed. In accordance with regulations, LSNC has an MOU in place with AAA4's Long-Term Care Ombudsman Program which addresses conflicts of interest, the provision of legal advice, and procedures for referral and other technical assistance.

SECTION 12. DISASTER PREPAREDNESS

Disaster Preparation Planning Conducted for the 2024-2028 Planning Cycle Older Americans Act Reauthorization Act of 2020, Section 306(a)(17); 310, CCR Title 22, Sections 7529 (a)(4) and 7547, W&I Code Division 8.5, Sections 9625 and 9716, CDA Standard Agreement, Exhibit E, Article 1, 22-25, Program Memo 10-29(P)

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

   The disaster mission of AAA4 is to maintain the continuity of critical services to older adults, people with disabilities and to ensure, to the maximum extent possible, that the special needs of all older adults and people with disabilities are adequately met for a safe and full recovery from a disaster. In order to fulfill our mission, AAA4 has developed an Agency Emergency Plan to enable our organization to plan and prepare to meet the needs of our staff, subcontracted funded partners, and the people we serve in the event of a disaster. This includes continuation of essential office functions. Additionally, funded partners that provide these vital services are also required to maintain up-to-date disaster and emergency plans. The AAA4 Disaster Response Coordinator acts as the liaison between funded partners and CDA. We maintain close communication with our partners, offering assistance and support as soon as we are notified of any PSPS events or disasters. Our partners provide regular updates on any issues or assistance they have delivered to their consumers, as well as any challenges encountered during the process. Additionally, we review each partner's disaster plan annually to ensure compliance and preparedness.

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

Name	Title	Telephone	Email
Craig Griesbach	Nevada Co. OES: Director	Office: 530-265-1583	oes@co.nevada.ca.us
Brandy Dunkel	Placer Co. OES	Office: 530-886-5300 Cell: 530-217-8679	placeroes@placer.ca.gov
Mathew Hawkins	Sacramento Co. OES	Office: 916-875-6900	sacoesinfo@saccounty.gov
Michael Fisher	Sierra Co. OES:	Office: 530-289-2850	lvanetti@sierracounty.ca.gov
Zachary Hamill	Sutter Co. OES	Office: 530-822-4575	zhamill@co.sutter.ca.us
Johnson Kurt	Yolo Co. OES Coordinator	Office: 530-406-4930	Kurt.johnson@yolocounty.org
Oscar Marin	Yuba Co. OES	Office: 530-749-7520	omarin@co.yuba.ca.us

3. Identify the Disaster Response Coordinator within the AAA:

Name	Title	Telephone	Email
Maggie Borowiak	Program Administrator	**Cell:** 916-622-4097 **Office:** 916-710-8370	mborowiak@agencyonaging4.org
German Ayon	Program Manager	**Cell:** 714-271-4454 **Phone:** 916-710-8367	gayon@agencyonaging4.org

4. List critical services the AAA will continue to provide to the participants after a disaster and describe how these services will be delivered (i.e., Wellness Checks, Information, Nutrition programs):

Critical Services	How Delivered?
A Information & Assistance (I&A)	**A** I&A Funded Partners must have emergency procedures in place that include how they will coordinate up-to-date post-emergency information with organizations in order to provide critical referrals to needed services. (e.g., shelter locations for people with disabilities and animals, forms completion, financial assistance, mental health, etc.)
B Nutrition	**B** Many of our nutrition funded partners maintain emergency meal inventories and/or have MOUs with alternate meal preparation sites in order to continue or expand food services.
C In-Home Funded Partners	**C** In-Home Funded Partners must contact all affected program participants and/or their emergency contacts to determine their safety. ("In-Home Funded Partners," are defined as any funded partner who goes into homes of clients to provide assessments, repairs, modifications, etc.)
D	**D**

5. List critical services the AAA will provide to its operations after a disaster and describe how these services will be delivered (i.e., Cyber Attack, Fire at your building, Evacuation of site, Employee needs)

Critical Services	How Delivered?
A Cyber Attack	Most critical agency information (contracts, insurance doc, Personnel, etc.) are maintained electronically and are backed up on the servers that are monitored by the IT Manager. Agency Servers are backed up each night to a cloud service and stored locally. All files within Office 365 and Teams environment are stored in the Cloud and backed up by Microsoft and third-party software.
B Fire at building	**B** Evacuate immediately and assemble at the designated parking lot.
C Evacuation on site	**C** If evacuation is deemed necessary, inform the Director, and implement an Evacuation Plan. Administrators and managers will then begin the phone tree process, contacting their respective staff members.
D Employee Needs	**D** Program administrators and managers will check-in, ensure safety, provide support and resources, provide reassurance and follow up. The issue of ensuring that essential services for our staff—such as paychecks, internet access, and other administrative tasks—are maintained in the event of a disaster has been addressed. To mitigate any disruptions, we have equipped the entire staff to work remotely, ensuring that service delivery and administrative operations continue without interruption.

6. List critical resources the AAA need to continue operations.
   - Personnel
   - Access to electricity
   - Communication Systems i.e. computer access, internet access, Microsoft 365, Teams, Ring Central
   - Information Systems access to critical data, software, and IT infrastructure

7. List any agencies or private/non-government organizations with which the AAA has formal or nonformal emergency preparation or response agreements. (contractual or MOU)

   AAA4 has no formal agreements with preparation or response agencies. AAA4 staff regularly attends Joint Operational Area Council meeting/ Emergency coordinator meetings in service area to ensure that the needs of older adults and people with disabilities are included in all preparedness and response activities within the Counties.

8. Describe how the AAA will:
   - Identify vulnerable populations:
     AAA4 requires all subcontractors to designate Disaster Coordinators and Alternate Coordinators and will manage information and services with those individuals affected by an emergency, including how older adults have been affected. This information is reported to the CDA-AAA Disaster Response Coordinator. (CDA 42 form)

   - Identify possible needs of the participants before a disaster event (PSPS, Flood, Earthquake, ETC)
     Risk and needs assessments and community engagement. By using these methods and approaches, AAA can better identify and understand the possible needs of consumers before a disaster event and develop plans/strategies to mitigate risks.

   - Follow up with vulnerable populations after a disaster event.
     AAA4 Disaster Response Coordinator will follow-up with subcontractor Disaster coordinators in affected areas to determine the outcomes, if applicable, at various intervals following an emergency.

9. How is disaster preparedness training provided?
   - AAA to participants and caregivers
     ILC partners provide ongoing emergency preparedness training and AAA4 staff are encouraged to participate. ILC staff train AAA4 staff to assist with emergency applications during a PSPS event.

   - To staff and subcontractors
     Subcontractors to complete CDA 42 Forms every Fiscal Year. AAA4's safety committee meets monthly to develop, review, and schedule safety protocol trainings. These trainings are delivered to staff on a monthly basis, along with evacuation drills and quarterly assessments of the facility for safety concerns. Staff are regularly trained on various emergency scenarios, and key staff members are also trained in CPR, AED, and first aid.

SECTION 13. NOTICE OF INTENT TO PROVIDE DIRECT SERVICES

CCR Article 3, Section 7320 (a)(b) and 42 USC Section 3027(a)(8)(C)

If a 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.

☐ Check if not providing any of the below-listed direct services.

Check applicable direct services	Check **each applicable Fiscal Year**			
Title IIIB	**24-25**	**25-26**	**26-27**	**27-28**
☐ Information and Assistance	☐	☐	☐	☐
☒ Case Management	☒	☒	☐	☐
☐ Outreach	☐`	☐	☐	☐
☒ Program Development	☒	☒	☐	☐
☒ Coordination	☒	☒	☐	☐
☒ Long Term Care Ombudsman	☒	☒	☐	☐
Title IIID	**24-25**	**25-26**	**26-27**	**27-28**
☒ Health Promotion – Evidence-Based	☒	☒	☐	☐
Title IIIE[9]	**24-25**	**25-26**	**26-27**	**27-28**
☐ Information Services	☐	☐	☐	☐
☐ Access Assistance	☐	☐	☐	☐
☒ Support Services	☒	☒	☐	☐
☐ Respite Services	☐	☐	☐	☐
☐ Supplemental Services	☐	☐	☐	☐
Title VII	**24-25**	**25-26**	**26-27**	**27-28**
☒ Long Term Care Ombudsman	☒	☒	☐	☐
Title VII	**24-25**	**25-26**	**26-27**	**27-28**
☒ Prevention of Elder Abuse, Neglect, and Exploitation.	☒	☒	☐	☐

Describe methods to be used to ensure target populations will be served throughout the PSA.
Targeting is explained in detail in Section 5 of this plan. In short, many of the direct services provided by AAA4 are designed to reach particular audiences that include one or more of the targeted groups. AAA4 makes a concerted effort to reach out to organizations that serve targeted communities to be sure they are aware of Older Americans and Older Californians Act programs.

[6] Refer to CDA Service Categories and Data Dictionary.

SECTION 14. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES

Complete and submit for CDA approval each direct service not specified previously. The request for approval may include multiple funding sources for a specific service.

☐ Check box if not requesting approval to provide any direct services.

Identify Service Category: CASH/MATERIAL AID

Check applicable funding source:[9]

☒ III-B

☐ III-C-1

☐ III-C-2

☐ III-E

☐ VII

☐ HICAP

Request for Approval Justification:

☒ Necessary to Assure an Adequate Supply of Service OR
☐ More cost effective if provided by the AAA than if purchased from a comparable service provider.

Check all fiscal year(s) the AAA intends to provide service during this Area Plan cycle.

☒ **FY 24-25** ☒ **FY 25-26** ☐ **FY 26-27** ☐ **FY 27-28**

Provide: documentation below that substantiates this request for direct delivery of the above stated service[10]: See next page

7 Section 15 does not apply to Title V (SCSEP).

8 For a HICAP direct services waiver, the managing AAA of HICAP services must document that all affected AAAs agree.

SECTION 14 – Cash/Material Aid

As a complement to AAA4's Title III-B Case Management program, the Agency seeks permission from the Department of Aging to offer Title III-B Cash/Material Aid to existing Case Management clients on an as-needed basis and as limited resources permit.

Priority would be given to clients who would benefit from one-time assistance to prevent adverse consequences to their personal health or safety. In accordance with the CDA Data Dictionary, such assistance could be provided in the form of commodities, surplus food distribution, vouchers, or direct payment to vendors.

SECTION 14. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES

Complete and submit for CDA approval each direct service not specified previously. The request for approval may include multiple funding sources for a specific service.

☐ Check box if not requesting approval to provide any direct services.

Identify Service Category: CONGREGATE MEALS

Check applicable funding source:[9]

☐ III-B

☒ III-C-1

☐ III-C-2

☐ III-E

☐ VII

☐ HICAP

Request for Approval Justification:

☒ Necessary to Assure an Adequate Supply of Service OR
☐ More cost effective if provided by the AAA than if purchased from a comparable service provider.

Check all fiscal year(s) the AAA intends to provide service during this Area Plan cycle.

☒ **FY 24-25** ☒ **FY 25-26** ☐ **FY 26-27** ☐ **FY 27-28**

Provide: documentation below that substantiates this request for direct delivery of the above stated service[10]: See next page

9 Section 15 does not apply to Title V (SCSEP).

10 For a HICAP direct services waiver, the managing AAA of HICAP services must document that all affected AAAs agree.

SECTION 14 – Congregate Meals

Since 2014, AAA4 has been providing a non-traditional meal program called Dine Around Town which features restaurant vouchers in Yuba and Sutter counties. Meals are provided at approved restaurants that comply with all applicable guidelines and regulations for regular congregate meals. Vouchers are only redeemable for specific, pre-approved menu items, and the meals must be eaten on site. Vouchers are periodically distributed to the program participants in person at the Yuba City Senior Center so that nutrition education and other pertinent information can be provided.

This continues to be a popular program. Participants enjoy being able to have breakfast, lunch or dinner at any time of day. Participating restaurants benefit from having a steady stream of clients. The community benefits because more dollars are staying in the local economy. It is a win-win-win service model for everyone involved.

Although less costly meals are readily available from other sources, healthy meals with good nutritional value for Older Adults are neither inexpensive nor easily accessible for the food insecure individuals whom Dine Around Town targets.

SECTION 14. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES

Complete and submit for CDA approval each direct service not specified previously. The request for approval may include multiple funding sources for a specific service.

☐ Check box if not requesting approval to provide any direct services.

Identify Service Category: EMPLOYMENT

Check applicable funding source:[9]

☒ III-B

☐ III-C-1

☐ III-C-2

☐ III-E

☐ VII

☐ HICAP

Request for Approval Justification:

☐ Necessary to Assure an Adequate Supply of Service OR
☒ More cost effective if provided by the AAA than if purchased from a comparable service provider.

Check all fiscal year(s) the AAA intends to provide service during this Area Plan cycle.

☒ **FY 24-25** ☐ **FY 25-26** ☐ **FY 26-27** ☐ **FY 27-28**

Provide: documentation below that substantiates this request for direct delivery of the above stated service[10]: See next page

[11] Section 15 does not apply to Title V (SCSEP).

[12] For a HICAP direct services waiver, the managing AAA of HICAP services must document that all affected AAAs agree.

SECTION 14 – Employment

Agency on Aging \ Area 4 (AAA4) first received approval from the Department of Aging to provide a Title III-B Employment program as a direct service in 2001. AAA4 plans to continue this program throughout the 2024-28 planning cycle in Placer, Sacramento, and Yolo counties.

Arguably, the most impactful and dignified way to help an able-bodied Older Adult maintain financial security is to empower them to return to the paid workforce in an occupation of their choosing.

The Mature Edge Job Readiness Program offers a series of interactive job readiness sessions designed to prepare the mature worker for a productive and successful job search. Sessions include preparing effective targeted resumes and cover letters, strategic interviewing, access to the job market, and the skills necessary to maintain a job. Additionally, the Program offers one-on-one job coaching, referrals appropriate employment opportunities, and access to area employers who are seeking older workers.

The Mature Edge Job Readiness Program is the only employment program for seniors in PSA 4 without income restrictions, and while there are employment programs in the area, the Job Readiness Program is the only employment program designed specifically to assist seniors sixty years of age and over. Mature Edge receives referrals from other programs that are not designed to assist the older worker.

AAA4 has assured an economical delivery of services and will continue to do so by only charging direct operational costs to the Job Readiness Program.

At this time, there is no funding source to continue this program, so it is scheduled for closure on June 30, 2025.

SECTION 14. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES

Complete and submit for CDA approval each direct service not specified previously. The request for approval may include multiple funding sources for a specific service.

☐ Check box if not requesting approval to provide any direct services.

Identify Service Category: HOME-DELIVERED MEALS

Check applicable funding source:[9]

☐ III-B

☐ III-C-1

☒ III-C-2

☐ III-E

☐ VII

☐ HICAP

Request for Approval Justification:

☒ Necessary to Assure an Adequate Supply of Service OR
☐ More cost effective if provided by the AAA than if purchased from a comparable service provider.

Check all fiscal year(s) the AAA intends to provide service during this Area Plan cycle.

☒ **FY 24-25** ☒ **FY 25-26** ☐ **FY 26-27** ☐ **FY 27-28**

Provide: documentation below that substantiates this request for direct delivery of the above stated service[10]: See next page

[13] Section 15 does not apply to Title V (SCSEP).

[14] For a HICAP direct services waiver, the managing AAA of HICAP services must document that all affected AAAs agree.

SECTION 14 – Home-Delivered Meals

AAA4 became the lead administrative operator of **Meals on Wheels Yuba & Sutter Counties** by default in 2013 when no other suitable organization stepped forward to fill an unexpected gap in contracted services. To date, no bids for the provision of home-delivered meal services in the Yuba – Sutter area have been submitted through the RFP (request for proposal) process. AAA4 intends to continue as the direct service provider until another organization is willing and able to take over the program in a more economical manner.

SECTION 14. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES

Complete and submit for CDA approval each direct service not specified previously. The request for approval may include multiple funding sources for a specific service.

☐ Check box if not requesting approval to provide any direct services.

Identify Service Category: HOUSING

Check applicable funding source:[9]

☒ III-B

☐ III-C-1

☐ III-C-2

☐ III-E

☐ VII

☐ HICAP

Request for Approval Justification:

☒ Necessary to Assure an Adequate Supply of Service OR
☐ More cost effective if provided by the AAA than if purchased from a comparable service provider.

Check all fiscal year(s) the AAA intends to provide service during this Area Plan cycle.

☒ **FY 24-25** ☒ **FY 25-26** ☐ **FY 26-27** ☐ **FY 27-28**

Provide: documentation below that substantiates this request for direct delivery of the above stated service[10]: See next page

[15] Section 15 does not apply to Title V (SCSEP).

[16] For a HICAP direct services waiver, the managing AAA of HICAP services must document that all affected AAAs agree.

SECTION 14 – HOUSING

Housing security is a paramount concern for older adults who are being affected by the severe shortage of housing units in the State and in the Sacramento region which is driving up costs for people who own their homes as well as those who rent a home. At the same time, loneliness and social isolation remain pervasive problems.

Co-living represents a fresh and dynamic approach to address the current shortage of housing with housing wants and needs of older adults, aligning with modern older adults' aspirations for independence, social engagement, and active lifestyles. By promoting communal living, shared experiences, and support services, co-living caters to the evolving needs and desires of older adults. As the aging population continues to grow, the demand for innovative and inclusive living options is expected to increase. Co-living is more than a roommate matching service, it strives to foster a sense of belonging, enhancing overall well-being.

AAA4's newly branded Key Connections Co-living program will focus on age 60+ home providers and home seekers and will match compatible individuals in a mutually beneficial co-living arrangement.

AAA4 Staff will perform extensive in-person screenings of both parties and facilitates in-person engagements between them. If the home providers and home seekers feel a match could be made, then a short-term, in-home visit will be scheduled and conducted as a tool to finalize the match before moving forward with a written co-living agreement.

While there are not nearly enough affordable housing units to meet the demand, there are enough unoccupied bedrooms among the existing housing stock to potentially house hundreds of people. AAA4's Key Connections Co-Living Program of AAA4 will provide a safe mechanism for homeowners to convert some of those spare rooms into living spaces, and it does so in a person-centered manner that brings tangible value to home providers and home seekers.

SECTION 14. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES

Complete and submit for CDA approval each direct service not specified previously. The request for approval may include multiple funding sources for a specific service.

☐ Check box if not requesting approval to provide any direct services.

Identify Service Category: NUTRITION EDUCATION

Check applicable funding source:[9]

☐ III-B

☒ III-C-1

☒ III-C-2

☐ III-E

☐ VII

☐ HICAP

Request for Approval Justification:

☒ Necessary to Assure an Adequate Supply of Service OR
☐ More cost effective if provided by the AAA than if purchased from a comparable service provider.

Check all fiscal year(s) the AAA intends to provide service during this Area Plan cycle.

☒ **FY 24-25** ☒ **FY 25-26** ☐ **FY 26-27** ☐ **FY 27-28**

Provide: documentation below that substantiates this request for direct delivery of the above stated service[10]: See next page

[17] Section 15 does not apply to Title V (SCSEP).

[18] For a HICAP direct services waiver, the managing AAA of HICAP services must document that all affected AAAs agree.

SECTION 14 – Nutrition Education

Nutrition Education is mandated for C1 and C2 programs, and AAA4 is the provider of those programs in Yuba and Sutter counties. AAA4 plans to continue using its staff dietitian as the consulting Registered Dietitian (RD) for Dine Around Town and Yuba-Sutter Meals on Wheels.

SECTION 15. GOVERNING BOARD

GOVERNING BOARD MEMBERSHIP
2024-2028 Four-Year Area Plan Cycle

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

Total Number of Board Members: 18 seats, no vacancies

Name and Title of Officers:	Office Term Expires:
Supervisor Sharon Dryden – Chair	12/31/26
Nancy Pennebaker – First Vice Chair	12/31/26
Cecile Nunley – Second Vice Chair	12/31/26
Erin Minnet – Secretary	12/31/25
Meghan Rose – Treasurer/Auditor	12/31/26
Wendell Peters – Parliamentarian	12/31/26

Names and Titles of All Members:	Board Term Expires:
Supervisor Lisa Swarthout (Nevada County)	12/31/25
Supervisor Sue Hoek, Alternate (Nevada County)	12/31/25
Erin Minett (Nevada County)	12/31/25
Supervisor Suzanne Jones (Placer County)	12/31/26
Supervisor Anthony DeMattei (Placer County)	12/31/26
William Reed (Placer County)	12/31/26
Cecile Nunley (Sacramento County)	12/31/26
Supervisor Phil Serna, Alternate (Sacramento County)	12/31/25
Miko Sawamura (Sacramento County)	12/31/26
Supervisor Patrick Kennedy, Alternate (Sacramento County)	12/31/25
Carl Burton (Sacramento County)	12/31/26
Supervisor Rich Desmond, Alternate (Sacramento County)	12/31/25
Meghan Rose (Sacramento County)	12/31/26
Supervisor Rosario Rodriguez, Alternate (Sacramento County)	12/31/26
Supervisor Pat Hume (Sacramento County)	12/31/25
Leesa Klotz, Alternate (Sacramento County)	12/31/25
Supervisor Sharon Dryden (Sierra County)	12/31/26
Supervisor Terry LeBlanc, Alternate (Sierra County)	12/31/26
Supervisor Lila Heuer (Sierra County)	12/31/26

Continued on the next page

Names and Titles of All Members:	Board Term Expires:
Supervisor, Jeff Boone (Sutter County)	12/31/25
Tonya Beebe (Sutter County)	12/31/25
Supervisor Sheila Allen (Yolo County)	12/31/26
Denise Peach, Alternate (Yolo County)	12/31/26
Nancy Pennebaker (Yolo County)	12/31/26
Supervisor Andy Vasquez (Yuba County)	12/31/25
Supervisor Jon Messick, Alternate (Yuba County)	12/31/25
Wendell Peters (Yuba County)	12/31/26

Explain any expiring terms – have they been replaced, renewed, or other?
Not applicable.

SECTION 16. ADVISORY COUNCIL

ADVISORY COUNCIL MEMBERSHIP
2024-2028 Four-Year Planning Cycle

Older Americans Act Reauthorization Act of 2020 Section 306(a)(6)(D)
45 CFR, Section 1321.57 CCR Article 3, Section 7302(a)(12)

Total Council Membership (include vacancies) 35 seats (13 vacancies)

Number and Percent of Council Members over age 60: 14 of 22 or 63.6%

Race/Ethnic Composition	% Of PSA's 60+Population	% on Advisory
White	67.4%	66.7%
Hispanic	11.4%	14.3%
Black	5.6%	9.5%
Asian/Pacific Islander	12.6%	4.8%
Native American/Alaskan Native	1.4%	N/A
Other	1.6%	4.8%

Name and Title of Officers:	Office Term Expires:
Dr. Catheryn Koss (Sacramento County) – Chair	6/30/26
Karen Flanagan (Placer County) – Vice Chair	6/30/25
Sylvia McBride (Sacramento County) – Secretary/Treasurer	6/30/25

Name and Title of other members:	Office Term Expires:
Kelly Carpenter (Nevada County)	6/30/26
Annie Mikal-Heine (Nevada County)	6/30/26
Joe Naake (Nevada County)	6/30/25
David Wiltsee (Placer County)	6/30/25
Dr. Theresa Abah (Sacramento County)	6/30/26
Melissa Jacobs (Sacramento County)	6/30/25
Ann Zonderman (Sacramento County)	6/30/26
Wendy Church-Bergstrom (Sierra County)	6/30/28
Pam Epley (Sutter County)	6/30/25
Tanna Thomas (Sutter County)	6/30/26
Jim Bohon (Yolo County)	6/30/25
Charlotte Dorsey (Yolo County)	6/30/25
Seth Brunner (Yolo County)	6/30/25
Laura Drown (Yuba County)	6/30/27
Rob Drown (Yuba County)	6/30/27

Name and Title of other members *(continued)*:	Office Term Expires:
Harrison Linder (Member at Large)	6/30/27
Marilyn Moreno (Member at Large)	6/30/28
Pamela Nelson (Member at Large)	6/30/27
Rita Saenz (Member at Large)	6/30/27

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

Yes	No	
☒	☐	Representative with Low Income
☒	☐	Representative with a Disability
☒	☐	Supportive Services Provider
☒	☐	Health Care Provider
☐	☒	Local Elected Officials
☒	☐	Persons with Leadership Experience in Private and Voluntary Sectors

Yes	No	Additional Other (Optional)
☒	☐	Family Caregiver, including older relative caregiver
☐	☒	Tribal Representative
☒	☐	LQBTQ Identification
☒	☐	Veteran Status
☐	☒	Other_____

Explain any "No" answer(s): It is unusual for AAA4 to have elected officials serve as Advisory Council members; we primarily address matters of concern to counties and County Supervisors sit on our Governing Board. AAA4 does not administer Tile VI programs for Native Americans. Historically, the Agency has had very little contact with local tribal organizations.

Explain what happens when term expires, for example, are the members permitted to remain in their positions until reappointments are secured? Have they been replaced, renewed or other?
Unless the member or the appointing body has informed AAA4 that a reappointment is not forthcoming, members may remain in their positions while formal notifications are in progress.

Briefly describe the local governing board's process to appoint Advisory Council members:
AAA4 is a joint powers authority. The Governing Board is composed of members of each of the seven county Boards of Supervisors or their appointees. The 35-member Advisory Council is composed of representatives from each of the seven counties. Individual Advisory Council members may be appointed by County Boards of Supervisors, County Commissions on Aging (or their equivalents) or by the Council's Executive Committee, as Members At Large.

SECTION 17. MULTIPURPOSE SENIOR CENTER ACQUISTION OR CONSTRUCTION COMPLIANCE REVIEW [11]

CCR Title 22, Article 3, Section 7302(a)(15)
20-year tracking requirement

☒ No. Title IIIB funds not used for Acquisition or Construction.

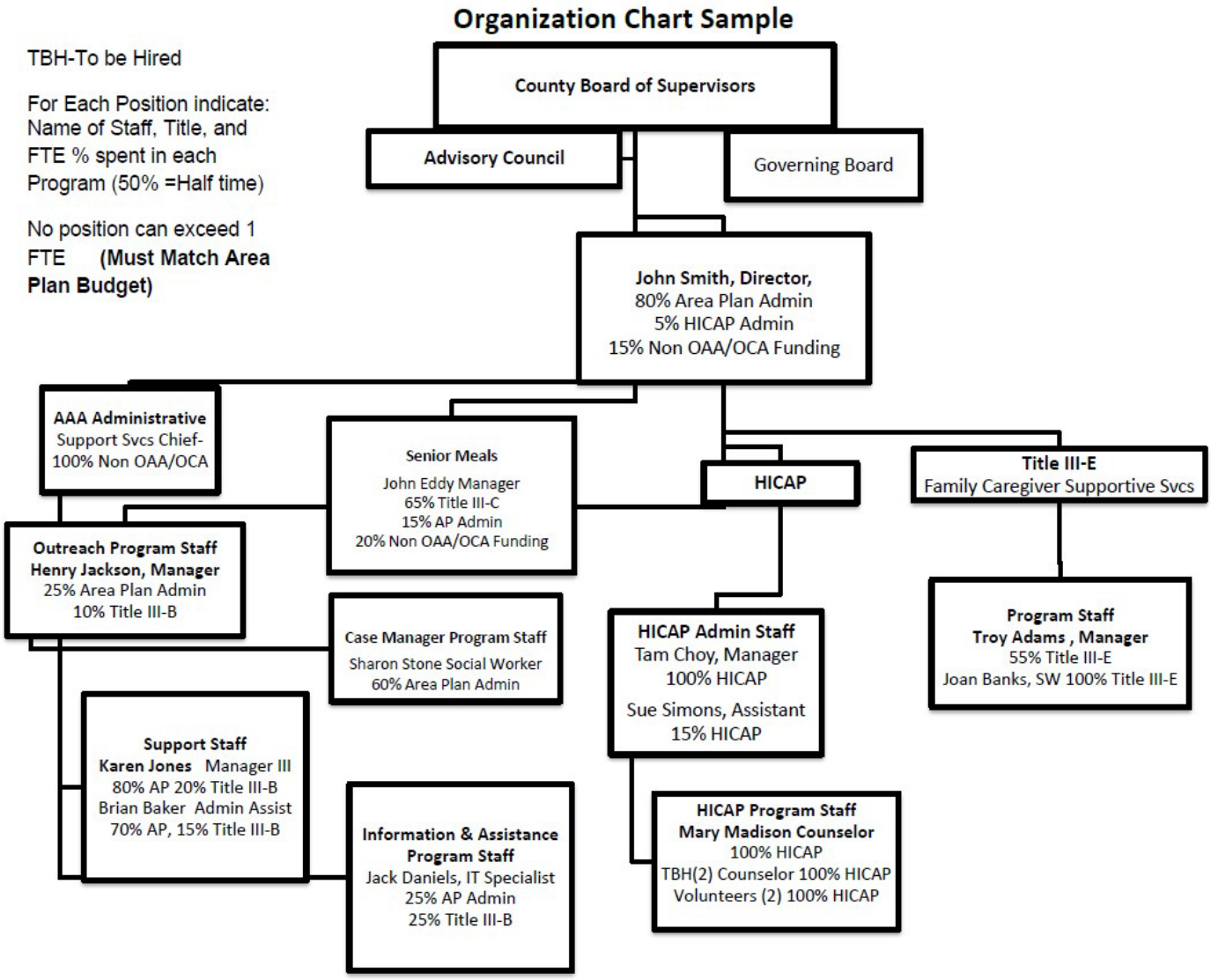
☐ Yes. Title IIIB funds used for Acquisition or Construction.

Title III Grantee and/or Senior Center (complete the chart below):

Title III Grantee and/or Senior Center	Type Acq/Const	IIIB Funds Awarded	% Total Cost	Recapture Period Begin	Recapture Period End	Compliance Verification State Use Only
Name: Address:						
Name: Address:						
Name: Address:						
Name: Address:						

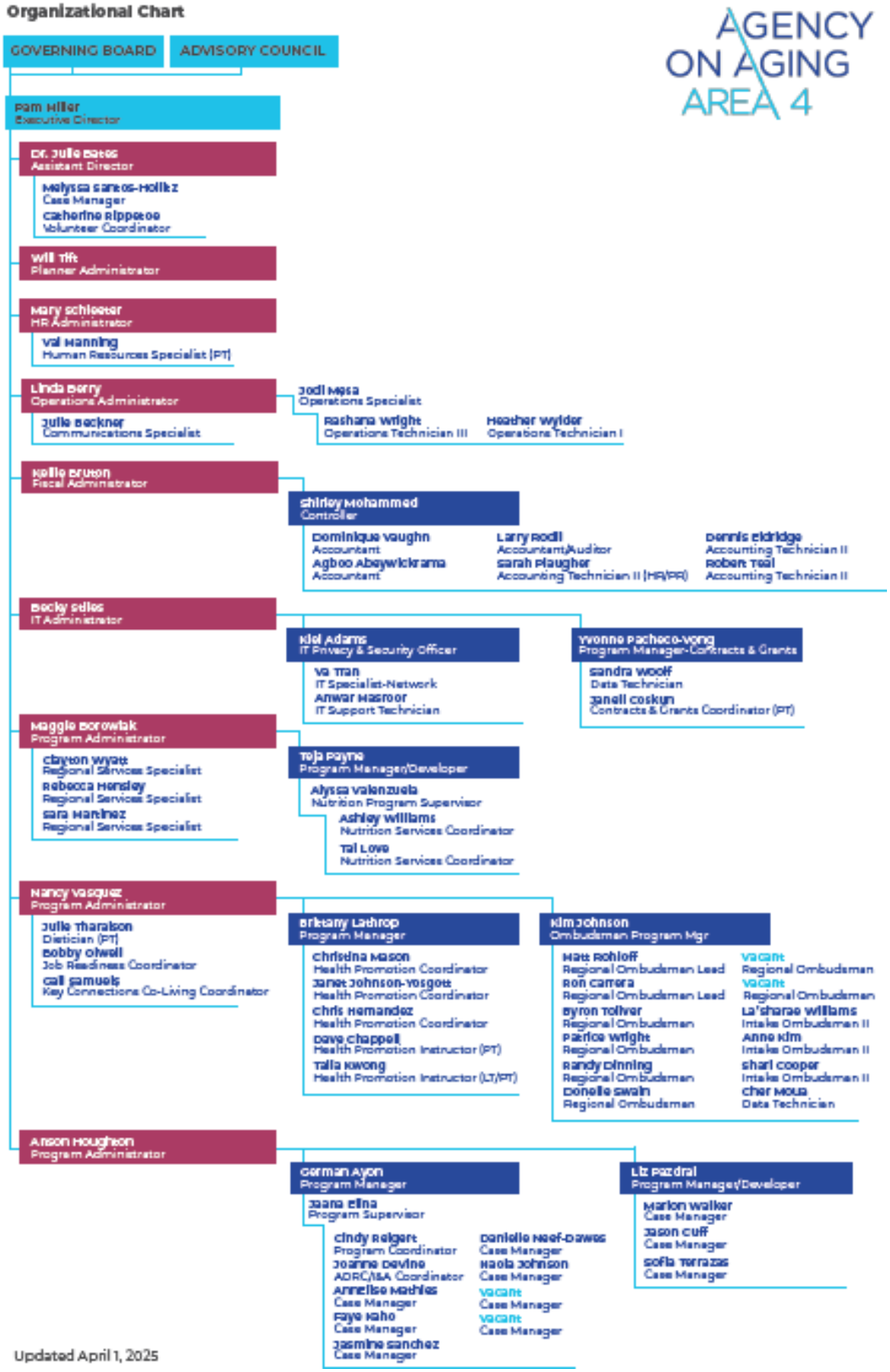
[19] Acquisition is defined as obtaining ownership of an existing facility (in fee simple or by lease for 10 years or more) for use as a Multipurpose Senior Center.

SECTION 18. ORGANIZATION CHART (SAMPLE)



See supplemental page for Org Chart details (sent under separate cover).

Organizational Chart



Updated April 1, 2025

SECTION 19. ASSURANCES

Pursuant to the Older Americans Act Reauthorization Act of 2020, (OAA), the Area Agency on Aging assures that it will:

A. Assurances

1. OAA 306(a)(2)

   Provide an adequate proportion, as required under Older Americans Act Reauthorization Act of 2020 Section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services—

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

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

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

2. OAA 306(a)(4)(A)(i)(I-II)

   (I) provide assurances that the area agency on aging will -

      (aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;

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

   (II) include proposed methods to achieve the objectives described in (aa) and (bb) of subclause (I);

3. OAA 306(a)(4)(A)(ii)

   Include in each agreement made with a provider of any service under this title, a requirement that such provider will—

   (I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;

   (II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and

   (III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area.

4. OAA 306(a)(4)(A)(iii)

With respect to the fiscal year preceding the fiscal year for which such plan is prepared—

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

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

(III) provide information on the extent to which the area agency on aging met the objectives described in assurance number 2.

5. OAA 306(a)(4)(B)

Use outreach efforts that —

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

(I) older individuals residing in rural areas.

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

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

(IV) older individuals with severe disabilities.

(V) older individuals with limited English proficiency.

(VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and

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

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

6. OAA 306(a)(4)(C)

Contain an assurance that the Area Agency on Aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas;

7. OAA 306(a)(5)

Provide assurances that the Area Agency on Aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement with agencies that develop or provide services for individuals with disabilities;

8. OAA 306(a)(6)(I)

Describe the mechanism(s) for assuring that each Area Plan will include information detailing how the Area Agency will, to the extent feasible, coordinate with the State agency to disseminate information about the State assistive technology entity and access to assistive technology options for serving older individuals.

9. OAA 306(a)(9)(A)-(B)

(A) Provide assurances that the Area Agency on Aging, in carrying out the State Long-Term Care Ombudsman program under 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2019 in carrying out such a program under this title;

(B) funds made available to the Area Agency on Aging pursuant to section 712 shall be used to supplement and not supplant other Federal, State, and local funds expended to support activities described in section 712;

10. OAA 306(a)(11)

Provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as ''older Native Americans''), including—

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

(B) An assurance that the Area Agency on Aging will to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) An assurance that the Area Agency on Aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

11. OAA 306(a)(13)(A-E)

(A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;

(B) disclose to the Assistant Secretary and the State agency—

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship.

(C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contract or such relationship;

(D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contract or such relationship; and

(E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals;

12. 306(a)(14)

Provide assurances that preference in receiving services under this Title will not be given by the Area Agency on Aging to particular older individuals as a result of a contract or

commercial relationship that is not carried out to implement this title;

13. 306(a)(15)

Provide assurances that funds received under this title will be used—

(A) to provide benefits and services to older individuals, giving priority to older individuals identified in Section 306(a)(4)(A)(i); and

(B) in compliance with the assurances specified in Section 306(a)(13) and the limitations specified in Section 212;

14. OAA 305(c)(5)

In the case of a State specified in subsection (b)(5), the State agency shall provide assurance, determined adequate by the State agency, that the Area Agency on Aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

15. OAA 307(a)(7)(B)

i. no individual (appointed or otherwise) involved in the designation of the State agency or an Area Agency on Aging, or in the designation of the head of any subdivision of the State agency or of an Area Agency on Aging, is subject to a conflict of interest prohibited under this Act;
ii. no officer, employee, or other representative of the State agency or an Area Agency on Aging is subject to a conflict of interest prohibited under this Act; and
iii. mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

16. OAA 307(a)(11)(A)

i. enter into contracts with providers of legal assistance, which can demonstrate the experience or capacity to deliver legal assistance;
ii. include in any such contract provisions to assure that any recipient of funds under division (i) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and
iii. attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

17. OAA 307(a)(11)(B)

That no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the Area Agency on Aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

18. OAA 307(a)(11)(D)

To the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals; and

19. OAA 307(a)(11)(E)

Give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

20. OAA 307(a)(12)(A)

Any Area Agency on Aging, in carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for -

i. public education to identify and prevent abuse of older individuals.
ii. receipt of reports of abuse of older individuals.
iii. active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and
iv. referral of complaints to law enforcement or public protective service agencies where appropriate.

21. OAA 307(a)(15)

If a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the Area Agency on Aging for each such planning and service area -

(A) To utilize in the delivery of outreach services under Section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability.

(B) To designate an individual employed by the Area Agency on Aging, or available to such Area Agency on Aging on a full-time basis, whose responsibilities will include:

i. taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and
ii. providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effective linguistic and cultural differences.

22. OAA 307(a)(18)

Conduct efforts to facilitate the coordination of community-based, long-term care services, pursuant to Section 306(a)(7), for older individuals who -

(A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;
(B) are patients in hospitals and are at risk of prolonged institutionalization; or
(C) are patients in long-term care facilities, but who can return to their

homes if community-based services are provided to them.

23. OAA 307(a)(26)
Area Agencies on Aging will provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care.

B. Code of Federal Regulations (CFR), Title 45 Requirements:

24. CFR [1321.53(a)(b)]
(a) The Older Americans Act intends that the area agency on aging shall be the leader relative to all aging issues on behalf of all older persons in the planning and service area. This means that the area agency shall proactively carry out, under the leadership and direction of the State agency, a wide range of functions related to advocacy, planning, coordination, inter-agency linkages, information sharing, brokering, monitoring and evaluation, designed to lead to the development or enhancement of comprehensive and coordinated community-based systems in, or serving, each community in the Planning and Service Area. These systems shall be designed to assist older persons in leading independent, meaningful and dignified lives in their own homes and communities as long as possible.
(b) A comprehensive and coordinated community-based system described in paragraph (a) of this section shall:
(1) Have a visible focal point of contact where anyone can go or call for help, information or referral on any aging issue;
(2) Provide a range of options:
(3) Assure that these options are readily accessible to all older persons: The independent, semi-dependent and totally dependent, no matter what their income;
(4) Include a commitment of public, private, voluntary and personal resources committed to supporting the system;
(5) Involve collaborative decision-making among public, private, voluntary, religious and fraternal organizations and older people in the community;
(6) Offer special help or targeted resources for the most vulnerable older persons, those in danger of losing their independence;
(7) Provide effective referral from agency to agency to assure that information or assistance is received, no matter how or where contact is made in the community;
(8) Evidence sufficient flexibility to respond with appropriate individualized assistance, especially for the vulnerable older person;
(9) Have a unique character which is tailored to the specific nature of the community;
(10) Be directed by leaders in the community who have the respect, capacity and authority necessary to convene all interested persons, assess needs, design solutions, track overall success, stimulate change and plan community responses for the present and for the future.

25. CFR [1321.53(c)]
The resources made available to the Area Agency on Aging under the Older Americans Act are to be used to finance those activities necessary to achieve elements of a community-based system set forth in paragraph (b) of this section.

26. CFR [1321.53(c)]
Work with elected community officials in the planning and service area to designate one or more focal points on aging in each community, as appropriate.

27. CFR [1321.53(c)]
Assure that services financed under the Older Americans Act in, or on behalf of, the community will be either based at, linked to or coordinated with the focal points designated.

28. CFR [1321.53(c)]
Assure access from designated focal points to services financed under the Older Americans Act.

29. CFR [1321.53(c)]

Work with, or work to assure that community leadership works with, other applicable agencies and institutions in the community to achieve maximum collocation at, coordination with or access to other services and opportunities for the elderly from the designated community focal points.

30. CFR [1321.61(b)(4)]
Consult with and support the State's long-term care ombudsman program.

31. CFR [1321.61(d)]
No requirement in this section shall be deemed to supersede a prohibition contained in the Federal appropriation on the use of Federal funds to lobby the Congress; or the lobbying provision applicable to private nonprofit agencies and organizations contained in OMB Circular A-122.

32. CFR [1321.69(a)]
Persons age 60 and older who are frail, homebound by reason of illness or incapacitating disability, or otherwise isolated, shall be given priority in the delivery of services under this part.

AAA4 Welcomes Written Recommendations and Comments on this 4-year Plan!
Send via e-mail to: wtift@agencyonaging4.org
Send via US Mail to:
AAA4
Attention: Will Tift
1401 El Camino Avenue, Suite #400
Sacramento, CA 95815