

AREA PLAN INSTRUCTIONS FFY 2007 - 2010

**Community Development Unit
Division of Disability & Aging Services
Department of Disabilities, Aging & Independent Living
Issued January 25, 2006**

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SECTION 1: INSTRUCTIONS FOR AREA PLANS FFY 2007 - 2010

Complete first drafts of the Area Plans are due (narrative, budget, signed assurances and waiver requests) at the Department no later than **July 15, 2006**.

Format Requirements

Area Plans must be **typed** using at least size **12-point font**. Please **paginate** the Area Plan and include a table of contents. Area Plans shall include a **cover page** identifying the legal name of the Area Agency and the date submitted and shall be prepared following the narrative outlined below.

Submission of the Area Plan: The full Draft Area Plan shall be submitted in electronic format (by e-mail or disk) only on or before July 15, 2006. All subsequent drafts shall be submitted in electronic format. Once the Area Agency is notified by the Department that the Area Plan has been accepted, please submit one (1) electronic version and one (1) paper copy with **original signatures** of the final, approved Area Plan.

The narrative, signed assurances and waiver requests shall be submitted to:

Camille George, Director
Community Development Unit
Division of Disability & Aging Services
Department of Disabilities, Aging & Independent Living
Weeks Building
103 South Main Street
Waterbury, VT 05671-1601

The budget shall be submitted to:

Victoria Alberghini,
Business Office
Department of Disabilities, Aging & Independent Living
Weeks Building
103 South Main Street
Waterbury, VT 05671-1601

A. Public Input

The Older Americans Act (OAA) requires area agencies to establish an advisory council to “advise continuously the Area Agency on aging on all matters relating to the development of the Area Plan, the administration of the plan and operations conducted under the plan” (§306(a)(6)(D)). In addition, since the OAA requires that area agencies coordinate with entities conducting programs that receive assistance under the OAA and

with entities conducting other Federal programs for older individuals, it is important to ensure a meaningful process for public input into the development of the Area Plan. At a minimum, area agencies are required to seek specific input into the development of the Area Plan from senior centers and community meals programs, providers of home health services, adult day services providers, housing and residential services providers, transportation providers, developmental services providers, mental health services providers and volunteer and employment programs. Input can be obtained from public hearings, direct mail and meetings, focused discussions and/or other means. In the Area Plan, area agencies are required to describe the public input process that was followed and report on significant input received into the development of the Area Plan.

- B. Verification of Intent** Please review the assurances in Section VIII.B and sign Section VIII.A.
- C. Assurances** Please review and include with the Area Plan Submission.
- D. Mission Statement** Explain your agency's mission and role within the planning and service area. Describe how the 4 Year plan relates to the mission, how the two will be integrated to meet your stated goals and program plans in Sections III and IV and how these will be implemented to ensure compliance with the intent and purposes of the Older Americans Act.
- E. Progress** Report in narrative form on your agency's most significant progress during the previous four years. Identify the organizational strengths and strategies used to accomplish the goals attained. Please note areas needing improvement, how they were identified and any actions taken or plans you may have to achieve a higher degree of successful outcomes for these areas.
- F. Resource Inventory** Provide a brief description of what resources are currently available to meet the needs of older Vermonters and family caregivers eligible for services under the OAA. **Do not include a comprehensive listing of all resources**, but provide a general evaluation of their effectiveness in meeting identified needs. Describe the process your agency uses to maintain a

G. Needs Assessment

comprehensive and up-to-date resource inventory.

The Needs Assessment should take into consideration the number of older Vermonters with low incomes, the number of older individuals who have the greatest economic and social need, with particular attention to low-income minority individuals, and those who are living in rural areas and those who are Native Americans, and the efforts of voluntary organizations (OAA Section 306 (a) (1)).

The Needs Assessment must reflect the broad range of community partners, individuals and organizations invested in aging issues and long term care services within the region, to assure an adequate evaluation of the AAA's effectiveness and role in ensuring the needs of older Vermonters are met. Be sure to identify both the strengths and needs of the agency, as well as those of the community and the existing long-term care service delivery system, when completing the Needs Assessment.

Specific attention must also be given to assessing the needs of family caregivers and identifying both the strengths and gaps of existing services and supports for them.

At a minimum, the Needs Assessment should seek input from:

- Recipients of OAA services, including family caregivers;
- Individuals and groups with unmet need, either by virtue of lack of services to a geographic area or lack of resources for a particular type of service;
- Other individuals/groups, such as family members, caregivers, employers, etc. who would benefit from a comprehensive system of services;
- Other providers of services, which shall include but not be limited to home health agencies, hospitals, residential care and home providers, adult day programs, transportation providers, organizations that provide services to older individuals with disabilities, volunteer and employment programs.
- Public policy makers (e.g. legislators, local elected officials, etc.).

The Needs Assessment may include any information generated during the past 12 to 18 months through planning and development activities and may include information, survey results, data gathered, etc. that have been developed by or in collaboration with another community organization and/or provider.

In particular, the Needs Assessment should include a review of the projections of need for long term care services in the planning and service area that are contained in the Department of Disability, Aging and Independent Living's *Shaping the Future of Long Term Care and Independent Living Report*, and include an evaluation of the regional capacity to meet the anticipated need into the future.

1. **Process:** Describe the process your agency used to determine the extent of need for long term care, other supportive services and multipurpose senior centers in the planning and service area.
2. **Summary of Findings:** Provide a summary of the findings from your agency's Needs Assessment, including evaluation of the capacity to meet the projected long term care needs outlined in the *Shaping the Future Report*.

H. Outreach

Section 306 (a)(4)(B) of the OAA requires that area agencies identify individuals eligible for assistance under the Act. Special emphasis shall be given to older adults: residing in rural areas; with greatest economic need (with particular attention to low-income minority individuals); with greatest social need (with particular attention to low-income minority individuals); with severe disabilities; with limited English-speaking ability; and with Alzheimer's Disease or a related disorder (ARD) and their caregivers and inform them of the availability of OAA services. Describe how your agency will fulfill this requirement.

I. Planning & Coordination

Describe how your agency will coordinate planning and services with other local organizations and programs serving older individuals including community mental health services, developmental services, community action agencies, community-based coalitions and other long-term care providers. As required by the OAA

[Section 306 (C)] describe how your agency will ensure that planning, coordination and all other activities undertaken by the agency will focus on meeting the needs of low-income minority older adults and older Vermonters residing in rural areas.

J. Multigenerational Activities & Programs

Please describe what efforts you will make to coordinate services with agencies and organizations that provide multigenerational activities and programs.

K. Evidence-Based Health Promotion/Disease Prevention

Even if your agency is not the primary responsible agency, please describe how the Area Agency is involved in the implementation of evidence-based health promotion/disease prevention programs in the planning and service area. Evidence-based programs are those that are documented to be effective in reducing the risk of disability and/or disease. Please include in this narrative a description of how your agency is involved with efforts to coordinate and promote efforts to vaccinate older Vermonters, particularly for influenza and pneumonia.

L. Medication Management

25.5% of your Title III-D, Disease Prevention and Health Promotion Services funds must be used for the purpose of providing activities related to medication management, screening and education to prevent incorrect medication and adverse drug reactions. Please describe the activities the Area Agency will carry out to comply with this requirement.

M. Medicare Modernization Act (MMA) Activities

Describe what steps your agency has taken and will continue to take to help older Vermonters avail themselves of the benefits available to them under the MMA.

N. Coordination of Transportation

Please include a brief description of how your agency is involved with efforts to assess the transportation needs of older Vermonters and to coordinate transportation services for older Vermonters at the local level.

O. Competition in the Provision of Services

Competition in financing and providing services is an important element that can influence both the cost and the quality of care. Please describe how your agency uses competitive bids/pricing in arranging for services for older Vermonters and family caregivers.

P. Structure & Operations

Refer to Appendix A. Please include any requested documents as an attachment to the Area Plan submission. In addition, please maintain all documents on site at all Agency main and satellite offices.

AREA PLAN SUBMISSION CHECKLIST

*Draft Area Plans are due to the Department **no later than July 15, 2006**. The following checklist is included to assist area agencies in ensuring that all required components of the Update are included in the submission.*

- O Format
 - o Include a cover page
 - o Typed, using at least 12 point font
 - o Paginate
- O Submission – send first submission in **electronic format only, until Area Plan is approved**
- O Section I:
 - o Public Input
 - o Verification of Intent – original signature, submit with assurances, separately or with final Area Plan Update submission.
 - o Assurances – attach to Verification of Intent, submit separately or with final Area Plan Update submission.
 - o Mission Statement
 - o Progress
 - o Resource Inventory
 - o Needs Assessment
 - o Outreach
 - o Planning & Coordination
 - o Multigenerational Activities & Programs
 - o Evidence Based Health Promotion/Disease Prevention, including vaccination activities
 - o Medication Management
 - o Medicare Modernization Act (MMA) Activities
 - o Coordination of Transportation
 - o Competition in the Provision of Services
 - o Structure and Operations –submit all required documents.
- O Section II: Goals, Program Objectives, Strategies and Outcomes
 - o Agency Goals
 - o Program Plans
 - o Request(s) for Waiver(s)
- O AAA Budget – submit directly to the Business Office

SECTION II: GOALS, PROGRAM OBJECTIVES, STRATEGIES AND OUTCOMES: IDENTIFICATION OF PRIORITIES - INSTRUCTIONS

Section 301 (a) (1) of the Older Americans Act describes the purpose of Area Agencies on Aging to “concentrate resources in order to develop greater capacity and foster the development and implementation of comprehensive and coordinated systems to serve older individuals ...” Based on the information provided through the needs assessment process, please identify the services and activities the Agency will provide, initiate or support through the Area Plan. Include those services and activities which will require collaboration with other organizations and long term care providers; and identify how the Agency will integrate the Area Plan with other delivery systems to achieve targeted outcomes.

Each AAA must outline the on-going development activities associated with delivery of OAA services. Each AAA will focus on achieving one set of primary goals which will correspond to more specific program objectives, strategies and outcomes.

A. Identification of Goals - Instructions

In Section III of the Area Plan, please identify the key goals that the Agency will strive to achieve in order to address the identified needs and to fulfill the mission and purposes of the Older Americans Act as well as the overall mission of the Agency. Goal statements should be broad, social change statements that describe the impact the Agency will have within a given service area. *Please be sure to include goals that relate specifically to the provision of Older Americans Act Services including the provision of services through the OAA's National Family Caregiver Support Program (NFCSP).*

B. Program Objectives, Strategies and Outcomes - Instructions

In Section IV of the Area Plan, please describe the specific program objectives, strategies and outcomes the Agency will strive to achieve as they relate to the goals identified in the previous section (Section III). Please refer to the definitions below as you prepare your description:

- 1. Program Plan #:** Each individual plan should be numbered. This is simply a chronological numbering of program plans and will allow for easy reference throughout the Area Plan review and approval Process.
- 2. Program Area:** Describe the program area which is the focus of each particular objective, strategy and outcome statement. The broad areas the Area Plan will focus on include: 1) Title III Older Americans Act and Related Services, 2) Organizational Planning and Development; and 3) Community-Based Planning, Advocacy, Systems Development and Coordination. Please be sure to address planned activities in the program areas described below:

a. Title III Older Americans Act and Related Services:

i) Part B - Supportive Services and Senior Centers: including services associated with access to services, in-home services, including supportive services for families of older individuals with Alzheimer's disease and related disorders (ADRD); and legal assistance. At a minimum, the Area Plan should address each of the following program areas:

1. Outreach
2. Information and Assistance
3. Case Management
4. Transportation
5. In-Home and Supportive Services
6. Legal Assistance
7. Elder Abuse
8. State Health Insurance Program (SHIP)
9. Senior Companion Program
10. Mental Health and Aging
11. Housing/Residential Alternatives

In addition, if you're planning any new initiatives and/or significant changes in other supportive services, please include a program plan and number for that area as well.

ii) Part C (Subparts 1 - 2) - Nutrition Services: including congregate nutrition services and home delivered nutrition services.

iii) Part D - Disease Prevention and Health Promotion: including the provision of disease prevention and health promotion services and information including evidence-based programs at multipurpose senior centers, at congregate meal sites, through home delivered meals programs, or at other appropriate sites. Activities associated with the successful aging and independent living may be included in this section.

iv) Part E - Family Caregiver Support Services, Including National Family Caregiver Support Program (Title III E) and other Family Caregiver Services: including the provision of a multifaceted system of support services for family caregivers of older adults and for grandparents or older relative caregivers of children age 18 and younger.

In submitting your plans for Title III-E **and other family caregiver support services** (such as dementia respite), the services to be provided should be driven by the identified needs of family caregivers as part of the Area Agency's needs assessment process (Section I.G.). *Bearing in mind that no more than ten percent of Title III-E funds may be spent on grandparent caregivers, please also include specific plans for the provision of support services for grandparents or older individuals who are relative caregivers of children age 18 and under* in addition to family caregivers of older individuals.

Authorized activities may include:

1. Information to caregivers about available services;
2. Assistance to caregivers in gaining access to the services;
3. Individual counseling, organization of support groups, and caregiver training to caregivers to assist them in making decisions and solving problems relating to their caregiving roles;
4. Respite* care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and
5. Supplemental Services,* on a limited basis, to complement the care provided by caregivers. Supplemental services are a broad category of service that do not fit any of the definitions in the activities listed in numbers 1 – 4 above, and for which there are no other resources to meet the needs of the caregiver, but which complement the care provided by caregivers.

Describe the specific services to be provided, organized by the five broad categories of services listed directly above. If your agency plans not to offer services in any one of the five broad categories above, explain how those needs are already met, or provide some other explanation for why the services will not be provided.

** Please note that due to restrictions contained in the OAA each AAA must receive approval from the Department in advance of providing supplemental services and may dedicate no more than twenty percent of the federal funding to this category. In addition, respite and supplemental services may only be provided if the older adult care recipient is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing, or supervision or due to a cognitive or other mental impairment, requires supervision because the individual behaves in a manner that poses a serious health or*

safety hazard to the individual or another individual (OAA Section 102 (A) (i) and (B)).

b. Organizational Planning and Development

Identify any organizational issues the Area Plan will address. These may include, but are not limited to, activities related to governance, governing board structure, advisory council development*, resource development and other organizational management and internal systems development of significance.

** The Older Americans Act requires that each Agency establish an advisory council to advise the Agency on all matters relating to the development, administration and operations of the Area Plan ((306(a)(6)(D)). Please include a list of Advisory Council members and their representation (see Appendix A).*

c. Community-Based Planning, Advocacy, Systems Development and Coordination

Based on the needs assessment and resource inventory, identify any community-based planning, advocacy, systems development and coordination issues that the Area Plan will address.

- 3. Objectives:** Describe what you hope to achieve over the course of the four-year Area Plan related to the program plan and the goals for your agency. What are the milestones along the way that you hope to accomplish?
- 4. Strategies:** Describe the action steps you will take to achieve your objectives. How are you going to achieve the objectives?
- 5. Outcomes:** For each program plan, describe how you are going to know that the goals/objectives have been achieved. Outcomes should be **measurable** and **consumer- focused**. Describe how you will measure and evaluate whether the goals and objectives are being met.
- 6. Progress:** In future years, area agencies will be required to provide updates regarding the objectives achieved, strategies carried and status of the stated outcomes. Be sure that the stated outcomes are measurable as this will be important to evaluating the progress achieved.
- 7. Plans for Future Years:** Once area agencies have provided an annual update regarding the outcomes achieved and the status of the plan's goals, objectives, strategies and outcomes, they will need to provide a description of the activities planned for the next year, including any significant changes

(additions, deletions and revisions) in the plan's goals, objectives, strategies and outcomes.

C. Requests for Waivers - Instructions

Direct service provision by an Area Agency is appropriate, for the period of time covered by the plan, in the following areas: information and assistance, case management, respite, nutrition counseling, nutrition education, senior companion, Medicare beneficiary services (SHIP, SMPP), outreach and volunteer coordination (including RSVP and Americorps). In addition, the National Family Caregiver Support Program (Title III-E) services of counseling, respite, supplemental services, information services and access assistance may be directly provided by an AAA.

The AAA must request a waiver to provide direct service for: legal assistance, personal care, homemaker, chore, adult day, congregate meals, home delivered meals, transportation, assisted transportation and other in-home services. If there are other direct services in addition to those listed above that are funded by Title III, Title VII or State allocated funds, they are considered a NAPIS program and require a waiver. These services must also be reported in NAPIS and will require a definition to meet the NAPIS reporting requirements. For example, in some regions AAA's have become involved in Home Share and/or adult family care programs and may (or may not) be using any of the sources listed above. Please submit a request for a waiver if necessary.

For each service where a waiver is requested, the Area Agency must indicate the service, the service area(s), documentation of the activities that were conducted to seek potential providers, the results of those activities and the agency's plans for developing local capacity for the provision of the specific service. Use the form in Section V to submit any waiver requests.

SECTION III: AREA PLAN GOALS FOR FFY 2007 TO 2010 FORM

In its effort to fulfill the purposes and mission of the Older Americans Act and the overall mission of the Agency, the (identify your Area Agency on Aging) intends to achieve the following goals for Federal Fiscal Year 2007 to 2010*:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

**** There is no required minimum or maximum number of goals that must be submitted. However, the number of goals submitted should provide a clear and comprehensive picture of what the AAA will strive to do in order to fulfill the mission and purpose of the OAA and the overall mission of the Agency. Please also be sure to include goals that pertain specifically to family caregivers.***

**SECTION IV: PROGRAM OBJECTIVES, STRATEGIES AND OUTCOMES
FORM**

Program Plan #:

Program Area:

Objectives:

- 1.
- 2.
- 3.

Strategies:

- 1.
- 2.
- 3.
- 4.

Outcomes:

- 1.
- 2.

Progress in FFY 2007:

Plans for FFY 2008:

Progress in FFY 2008:

Plans for FFY 2009:

Progress in FFY 2009:

Plans for FFY 2010:

SECTION V: REQUEST FOR WAIVER FORM

Direct Provision of Services by the Area Agency

The Area Agency requests approval of the State Agency for direct provision of the following services for Federal Fiscal Year 2007.

Service:

Service Area:

Documentation of activities, and results of such activities the Area Agency undertook to seek potential providers to justify direct provision of service by Area Agency:

Plan of action to build local provider capacity to provide direct service.

SECTION VI: PROGRAM REPORTING

A. Data Base Development, Implementation and Utilization

In 1994, the Department and the AAAs entered into the development of a comprehensive database to satisfy the Administration on Aging's (AoA) National Aging Programs Information System (NAPIS) reporting requirements. The resulting Senior Assistance and Management System (SAMS) was jointly designed by the Department and the AAAs to meet the program management needs of both the State and the AAAs. AAAs must have the capacity to create and submit accurate and timely annual NAPIS reports to the Department for submission to the AoA.

We have implemented SAMS 2000 and are working to implement an updated NAPIS Reporter, which will comply with AoA specifications for NAPIS and for the NFCSP reports.

B. Activity Definitions for NAPIS Reporting

Program reporting requirements are contained in the March, 2004 Administration on Aging document 'REPORTING REQUIREMENTS FOR TITLE III AND VII OF THE OLDER AMERICANS ACT' for FY05 and Subsequent Years'. The latest NAPIS Reporting Requirements can be found on the AoA website (<http://www.aoa.gov>). If you have any questions please contact Camille George or Richard Lavery.

Personal Care (1 Hour) Providing personal assistance, stand-by assistance, supervision or cues.

Homemaker (1 Hour) Assistance such as preparing meals, shopping for personal items, managing money, using the telephone or doing light housework.

Chore (1 Hour) Assistance such as heavy housework; yard work; or sidewalk maintenance for a person.

Home Delivered Meals (1 Meal) A meal provided to a qualified individual in his/her place of residence. The meal is served in a program administered by SUAs and/or AAAs and meets all of the requirements of the Older Americans Act and State/Local laws. As noted in Section IIA (Title III Utilization, Expenditure Profile) meals provided to individuals through means-tested programs such as Medicaid Title XIX waiver meals or other programs such as state-funded means-tested programs are excluded from Nutrition Services Incentive Program (NSIP) meals figure in line 4a; they are included in the meal total reported on line 4 of Section IIA. Certain Title III-E funded home delivered meals may also be included – see the definition of NSIP meals below.

NSIP Meals (1 meal) A Nutrition Services Incentive Program (NSIP) Meal is a meal served in compliance with all requirements of the OAA, which means at a minimum that: 1) it has been served to a participant who is eligible under the OAA and has NOT been means-tested for participation; 2) it is compliant with the nutrition requirements; 3) it is served by an eligible agency; and 4) it is served to an individual who has an opportunity to contribute. Meal counts in 4, 4a, 8, 8a, include all OAA eligible meals including those served to persons under age 60 where authorized by the OAA. NSIP meals also include home delivered meals provided as Supplemental Services under the National Family Caregiver Support Program (Title III-E) to persons aged 60 and over who are either care recipients (as well as their spouses of any age) or caregivers.

Congregate Meals (1 Meal) A meal provided to a qualified individual in a congregate or group setting. The meal as served meets all of the requirements of the Older Americans Act and State/Local laws. As noted in Section IIA, meals provided to individuals through means-tested programs such as Medicaid Title XIX waiver meals or other programs such as state-funded means-tested programs are excluded from the NSIP meals figure in line 8a; they are included in the meal total reported on line 8 of Section IIA.

Nutrition Counseling (1 session per participant) Individualized guidance to individuals who are at nutritional risk because of their health or nutrition history, dietary intake, chronic illness, or medication use, or to caregivers. Counseling is provided one-on-one by a registered dietician, and addresses the options and methods for improving nutrition status.

Nutrition Education (1 session per participant) A program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness or health (as it relates to nutrition) information and instruction to participants, caregivers, or participants and caregivers in a group or individual setting overseen by a dietitian or individual of comparable expertise.

Adult Day Care/Adult Day Health (1 Hour) Personal care for dependent elders in a supervised, protective and congregate setting during some portion of a twenty-four hour day. Services offered in conjunction with adult day care/adult day health typically includes social and recreational activities, training, counseling, and services such as rehabilitation, medication assistance and home health aide services for adult day health.

Case Management (1 Hour) Assistance either in the form of access or care coordination in circumstances where the older person is experiencing diminished functioning capacities, personal conditions or other characteristics which require the provision of services by a formal service providers or family caregivers. Activities of case management include such practices as assessing needs, developing care plans, authorizing and coordinating services among providers, and providing follow up and reassessment, as required.

Assisted Transportation (1 One Way Trip) Assistance and transportation, including escort, to a person who has difficulties (physical or cognitive) using regular vehicular transportation.

Transportation (1 One Way Trip) Transportation from one location to another. Does not include any other activity.

Legal Assistance (1 Hour) Legal advice, counseling and representation by an attorney or other person acting under the supervision of an attorney.

Information and Assistance (1 Contact)* A service that: (A) provides individuals with information on services available within their communities; (B) links individuals to the services and opportunities that are available within the communities; (C) to the maximum extent practicable, establishes adequate follow up procedures. Internet web site “hits” are to be counted only if information is requested and supplied.

Outreach (1 Contact)* Intervention with individuals initiated by an agency or organization for the purpose of identifying potential clients (or their care givers) and encouraging their use of existing services and benefits.

* Note: The service units for information and assistance and for outreach are individual, one-on-one contacts between a service provider and an elderly client or caregiver. An activity that involves contact with multiple current or potential clients or caregivers (e.g., publications, publicity campaigns, and other mass media activities) should not be counted as a unit of service. Such services might be termed public information and reported on the public information category. They may also be reported in “Section II.E. – Utilization and Expenditures Profiles, Other Services Profile (Optional).

C. Other Service Definitions

AoA has recently considered reporting the detail on other services optional so AAA no longer must report the details of other services provided. AAA still must report the total expenditures for other services, but not the names and service units for each of those services. Examples of other services includes: medical supplies, utility assistance, home repair, home modification, health benefits counseling, phone reassurance/contact, life alert, adaptive equipment, health promotion/ wellness, friendly visiting, volunteer development, recreation, peer counseling, senior companion coordination, professional care (doctor, dentists, PT/OT/ST), system development, newsletter and respite.

NOTE: Be sure to submit any new service, which you would like, added to the SAMS database to the Department’s SAMS database manager (Dick Laverty) for approval. The request should be accompanied by a definition of the new service category requested. DAIL will check for duplicates, add the service to database and distribute the file to all the AAAs for their use.

D. Activity Definitions for NFCSP Reporting (as defined by the Administration on Aging Reporting Requirements for Title III and VII of the OAA, issued March, 2004)

Counseling (1 session) Counseling to caregivers to assist them in making decisions and solving problems relating to their caregiver role. This includes counseling to individuals, support groups, and caregiver training (of individual caregivers and families).

Respite Care (1 hour) Services which offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers. Respite Care includes: (1) In-home respite (personal care, homemaker, and other in-home respite); (2) respite provided by attendance of the care recipient at a senior center or other nonresidential program; (3) institutional respite provided by placing the care recipient in an institutional setting such as a nursing home for a short period of time as a respite service to the caregiver; and (for grandparents caring for children) summer camps. If the specific service units purchased via a direct payment (cash or voucher) can be tracked or estimated, report those service unit hours. If not, a unit of service is a direct payment is one payment.

Supplemental Services Services provided on a limited basis to complement the care provided by caregivers. Examples of supplemental services include, but are not limited to, home modification, assistive technologies, emergency response systems, and incontinence supplies.

Information Services (1 activity) A service for caregivers that provides the public and individuals with information on resources and services available to the individuals within their communities. [Note: service units for information services are for activities directed to large audiences of current or potential caregivers such as disseminating publications, conducting media campaigns, and other similar activities.]

Access Assistance (1 contact) A service that assists caregivers in obtaining access to the services and resources that are available within their communities. To the maximum extent practicable, it ensures that the individuals receive the services needed by establishing adequate follow-up procedures. [Note: Information and assistance to caregivers is an access service, i.e., a service that: (A) provides individuals with information on services available within the communities; (B) links individuals to the services and opportunities that are available within the communities; (C) to the maximum extent practicable, establishes adequate follow-up procedures. Internet web site “hits” are to be counted only if information is requested and supplied.

SECTION VII: BUDGET INFORMATION

A. Revenue Projections: The Department will issue the revenue projections on March 15, 2006 using the best published data available as of March 1, 2006. The Department will send AAA's the methodology to be used in determining the revenue projections in advance of the issuance of the revenue projections so that AAA will have an opportunity to review the methodology and ask questions.

B. General Rules Pertaining to AAA Funding

- Title III funds, with the exception of Title III-E funds, must be matched by fifteen percent (15%) non-federal match. Five percent (5%) of the non-federal match must be state funds. National Family Caregiver Program funds, Title III-E, must be matched with a twenty-five percent (25%) non-federal match.
- Title III funds used for Area Plan Administration (APA) require a twenty five percent (25%) non-federal match. Expenses for Area Plan Administration should be recognizable by FASB 116 and 117. Area Plan Administration must be funded with Title IIIC-1 or non-AoA funding source. An AAA may only apply APA to programs not listed as allowable direct services in Section V (Waivers).
- Each AAA must budget their allocated funds for Area Plan Administration or the State will redistribute any unbudgeted funds by formula to other AAAs.
- AAAs budget allocations of Title III-B, III-C-1 or III-C-2 funds require the approval of DAIL. The Department limits the amount of funds that each AAA may transfer to not more than 30% between Titles III-B and C, or not more than 40% between Titles III-C-1 and III-C-2.
- Title III-B funds are for Supportive Services only.
- Title III-C-1 funds are for Congregate Meal programs and Area Plan Administration.
- Title III-C-2 funds are for Home Delivered Meals.
- Title III-D funds are for Disease Prevention and Health Promotion. You must spend 25.5%* of your Preventive Health funds "for the purpose of providing activities related to medication management, screening and education to prevent incorrect medication and adverse drug reactions, pursuant to the Consolidated Appropriations Act, 2001 (P,L. 106-554). * This figure represents the current percentage established by the AoA and may be subject to change.

- Title III-E funds are for the National Family Caregiver Support Program. Funds may be used to provide the five categories of services authorized in the OAA: 1) information services; 2) access assistance; 3) counseling; 4) respite care; and 5) supplemental services. All Case Management, Information and Assistance, Respite and other expenses for family caregivers should be budgeted in this program. The category of supplemental services is designed to be used on a limited basis. As a result, each AAA must receive approval from the Department **in advance** of providing supplemental services and may dedicate no more than twenty percent of the federal funding to this category. AAA are also required to provide caregiver services to older relative caregivers of children age 18 and younger, but may dedicate no more than ten percent of federal funding to this type of service.
- Title VII funds are for Elder Abuse Prevention services.
- Each AAA shall expend at least 65% of Part B funds for Access to Services, 1% of Part B funds for In-home Services and 5% of Part B funds for Legal Assistance.
- AAAs must budget expenses for Nutrition Education since it is a State required activity.
- Food and Nutrition Services (FNS – Food Stamp Outreach Program) require a fifty percent (50%) non-federal match. These funds must be allocated within the Case Management and Information & Assistance programs.
- Administrative costs are to be spread by the percentage of total cash expenses to each program.
- Equipment costing over \$5000/unit must have authorization from the funding source if Federal funds are to be used.
- Local funds must be expended in accordance with the budgeted use of local funds.
- AAAs may only use their anticipated FY2007 funding and unbudgeted prior year funds, unless DAIL has an audit or draft audit identifying the carryover amounts from the prior year.
- An Area Agency on Aging must expend 85% of its annual allocation and any carryover of special service funds during the current year. Special service funds are used to help meet the unmet needs of individuals for which there are no other available resources.
- Transportation funds are for the transportation program.
- The Department will only allow an AAA to draw in a proportionate share of their Title III, Title VII funds, State General Fund, Special Services and State

Transportation allocation each month (i.e. 1/12 per month). Cash requests above the proportionate share will require an acceptable explanation.

- **Grants for the Provision of Long Term Care Services (Flexible Funding)**
Expenses/Revenue – Allocate the revenue and expenses to the applicable program center. For instance, if you are purchasing adult day services and transportation services with coalition funds you should report the expenses and revenue in the adult day and transportation program columns. You should report the revenue from the flex fund grant agreements in the “State Other” line.

There are many other specific regulations, rules and/or policies attached to specific revenue sources such as the Senior Companion program, for example. More information about specific requirements can be found in the grant agreements, contracts and program regulations for a specific revenue source. The above list is not meant as a comprehensive list of rules for AAA funding, but should serve as a list of some more general rules that AAAs should be aware of.

C. Expense Line Item Definitions

1. **Personnel** - Wages paid to agency employees. Includes stipends.
2. **Fringe** - Fringe benefits paid to agency employees and volunteers. Includes worker’s compensation.
3. **Travel** - All mileage and other reimbursement (meals, lodging) related to agency employee, volunteer or board member travel.
4. **Supplies** - Consumables, such as paper goods, disposable office products, forms, napkins, meals trays etc. Does not include raw food in the context of congregate or home delivered meals. These costs should not be allocated, if other costs incurred for the same purpose are directly charged to an activity. When several activities benefit from a cost and it is not possible or material to directly charge the cost, the cost should be distributed to the individual activities by a means that best reflects the relative benefit of each activity. AAAs should be prepared to explain the way costs are spread.
5. **Rent/Utilities** - Costs associated with building rental and maintenance. Includes trash removal. Does not include insurance. These costs should not be allocated, if other costs incurred for the same purpose are directly charged to an activity. When several activities benefit from a cost and it is not possible or material to directly charge the cost, the cost should be distributed to the individual activities by a means that best reflects the relative benefit of each activity. AAAs should be prepared to explain how the costs are spread.
6. **Telephone/Postage** - These costs should not be allocated, if other costs incurred for the same purpose are directly charged to an activity. When several activities benefit

from a cost and it is not possible or material to directly charge the cost, the cost should be distributed to the individual activities by a means that best reflects the relative benefit of each activity. AAAs should be prepared to explain the way the costs are spread.

7. **Equipment** - Costs associated with purchasing, maintaining and repairing equipment to operate the agency and its programs. Leases for equipment should be recorded here. Computer, photocopier, postage equipment and equipment maintenance contracts should be included. Expenses for equipment purchased for clients should be recorded under grants/contracts.
8. **Insurance** - This includes policies related to agency business but not to employee wages. Examples include vehicle insurance, property liability and directors'/officers' liability. Worker's compensation is not included. The cost of policies should be assigned to administration or spread to programs based upon an analysis of the policy. If this analysis is not provided with the policy, the AAA should request it.
9. **Audit** - Costs associated with agency audits or for audits by specific programs.
10. **Vehicle Operating Costs** - Costs associated with purchasing, operating, maintaining and repairing vehicles owned by the agency. The actual purchase cost should be included under equipment. Vehicle operations costs do not include mileage reimbursement for staff volunteers. If vehicles are used for multiple purposes, agencies should decide which purpose is primary at the point in time the vehicle is being used and assign the expense to the primary activity. For example, if a van is used to transport people, at the same time delivers meals and would be transporting people even if there were not meals to deliver, the expense should be assigned to transportation. Another example: If a van is used to deliver meals on Tuesday and then transport people on Wednesday, the expense should be assigned both to transportation and to home-delivered meals based upon time spent delivering meals and time spent transporting people.
11. **Raw Food** - Cost associated with purchase of food for nutrition services. Does not include coffee and donuts for staff meetings. Costs for raw food used in preparing meals by agency staff should be split by the ratio of agency prepared home-delivered to congregate meals. The ratio should not include meals prepared under contract.
12. **Training** - Costs associated with organizing or participating in training excluding personnel and staff travel. Includes registration, coffee and donuts, rental of meeting space, costs of hiring a trainer, etc.. Training expenses should be assigned to activities based upon the staff person receiving the training and the purpose of the training. For example, if a staff person is receiving training in case management, the expense should be in case management. Training expenses not assigned to particular staff in the budget should be included in the administration column. The expense during the year should be moved from administration to the appropriate activity when it is known.

13. **Other** - Expenses which do not fit into any of the other categories. Included are dues and subscriptions, advertising and recognition (plaques, flowers etc.). Under administration are included expenses for services purchased from individuals or organizations to accomplish agency administrative work which would otherwise need to be done by staff. Examples are payroll service, janitorial service and legal fees. It also includes contingency money for legal fees etc.
14. **Grants/Contracts** - Grants and contracts include the expense for any program expenses for adaptive equipment and home modifications purchased for clients.
15. **Administration** - This line item is the proportion of administrative expense in the administrative activity assigned to each program by its percent of the agency budget.

Administration costs distributed to 'direct services' (services an AAA provides with an approved waiver) are area plan administration in accordance with Section 308 (a) (1) of the Older Americans Act. For budgeting purposes, case management is considered a non-direct 'allowable' service.

Administration costs distributed to 'non-direct' services (services an AAA is allowed to provide, see page 1) are service costs in accordance with Section 304 (d)(1)(D).

Funds granted to the Coalition of Vermont Elders should be budgeted as Administration.

Funds utilized to secure the services of a registered dietician for the purpose of performing menu reviews is an allowable administrative expense.

16. **Fundraising** - This line item represents a spread of fundraising costs from the fund raising activity. The fundraising expense should be covered by funds raised. Both the expense and the revenue produced should then be spread to the activities the agency decides to support with the fundraising event/activity.

D. Funding Formula Factors: To be provided under separate cover with the issuance of the revenue projections, based on the best published data available as of March 1, 2006.

SECTION VIII: AREA PLAN REQUIREMENTS

A. Verification of Intent

The _____ Area Agency on Aging's Area Plan Update is hereby submitted for the period October 1, 2006 through September 30, 2007. It includes all assurances and plans to be followed by the submitting agency under provisions of the Older Americans Act and the Area Plan Instructions. The Area Agency identified shall assume full responsibility to develop and administer the plan in accordance with all requirements of the Act and related State policy. The Area Agency assumes major responsibility to develop and administer the Area Plan for a comprehensive and coordinated system of services and to serve as the advocate and focal point for older people in the planning and service area.

The Area Plan was developed in accordance with all rules and regulations specified under the Older Americans Act and will be submitted to the Department of Disabilities, Aging & Independent Living.

(signed)

Date _____ Area Agency Director

(signed)

Date _____ President, Board of Directors

The Area Agency Advisory Council has had the opportunity to review and comment on the Area Plan.

(signed)

Date _____ Chairperson, Area Agency Advisory Council

Date Approved _____ Commissioner, Department of Disabilities, Aging & Independent Living

B. Assurances

The Older Americans Act requires that to be approved by the State Agency, Area Agencies must make certain assurances. Below is a listing of the most current information provided by the Administration on Aging identifying new or amended assurances and information requirements which must be addressed in all area plans. Also included are the assurances and information requirements detailed in previous Administration on Aging guidance.

Development of a Comprehensive, Coordinated, Client-Centered System

1. ((306(a)(1)) The plan shall provide, through a comprehensive and coordinated system, supportive services, nutrition services and, where appropriate, the establishment, maintenance or construction of multipurpose senior centers, including determining the extent of need for supportive services, nutrition services and multipurpose senior centers.
2. ((306(a)(1)) Among other things, the plan will take into consideration the number of older individuals with low incomes residing in the planning and service area, the number of older individuals with low-incomes, the number of older individuals who have greatest economic need and greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas), and the number of older individuals who are Indians (Native Americans) residing in the area. The plan will also take into consideration the efforts of voluntary organizations in the community.
3. ((306(a)(1)) The plan shall include a method and plans for evaluating the effectiveness of the use of resources in meeting these needs.
4. ((306(a)(3)) The plan shall designate, where feasible, a focal point for comprehensive service delivery in each community, giving special consideration to designating multipurpose senior centers as such focal point and specify, in grants, contracts, and agreements implementing the plan, the identity of each designated focal point.
5. ((306(a)(6)(B)) The Area Agency will serve as the advocate and focal point for the elderly within the community by monitoring, evaluating and commenting upon all policies, programs, hearings, levies and community actions which will affect the elderly.
6. ((306(a)(12)) The Area Agency will establish effective and efficient procedures for coordination of services with entities conducting other Federal or federally assisted programs for older individuals at the local level, with particular emphasis on entities conducting programs under this title and the following programs:
 1. the Job Training Partnership Act,

2. Title II of the Domestic Volunteer Service Act of 1973,
 3. Titles XVI, XVIII, XIX, and XX of the Social Security Act,
 4. Sections 231 and 232 of the National Housing Act,
 5. the United States Housing Act of 1937,
 6. Section 202 of the Housing Act of 1959,
 7. Title I of the Housing and Community Development Act of 1974,
 8. Title I of the Higher Education Act of 1965 and the Adult Education Act,
 9. Sections 3, 9, and 16 of the Urban Mass Transportation Act of 1964,
 10. the Public Health Service Act, including block grants under Title XIX of such Act,
 11. the Low-Income Home Energy Assistance Act of 1981,
 12. part A of the Energy Conservation in Existing Buildings Act of 1976 relating to weatherization assistance for low income persons,
 13. the Community Services Block Grant Act,
 14. demographic statistics and analysis programs conducted by the Bureau of the Census under title 13, U.S. Code,
 15. parts II and III of Title 38, U.S. Code,
 16. the Rehabilitation Act of 1973,
 17. the Developmental Disabilities and Bill of Rights Act,
 18. the Edward Byrne Memorial State and Local Law Enforcement Assistance Programs, established under part E of Title I of the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. 3750-3766b).
7. ((306(a)(6)(C)) The Area Agency will, if possible, regarding the provision of services under Title III, enter into arrangements and coordinate with organizations that have a proven record of providing services to older individuals, that were officially designated as community action agencies or community action programs under section 210 of the Economic Opportunity Act of 1964 (42 U.S.C. 2790) for fiscal year 1981, and did not lose the designation as a result of failure to comply with such Act; or came into existence during fiscal 1982 as direct successors in interest to such community action agencies or community action programs; and that meet the requirement under section 675(c)(3) of the Community Services Block Grant Act (42 U.S.C. 9904 (c)(3).
8. ((306(a)(7)) The Area Agency will conduct efforts to facilitate the coordination of community-based, long-term care services designed to enable older individuals to remain in their homes, by means including:
- a. development of case management services as a component of the long-term care services, consistent with the requirements of paragraph 306(a)(8);
 - b. involvement of long-term care providers in the coordination of such services; and
 - c. increasing community awareness of and involvement in addressing the needs of residents of long-term care facilities.

9. ((306(a)(6)(F)) The Area Agency will coordinate any mental health services provided with part B funds with the mental health services provided by community health centers and by other public agencies and nonprofit private organizations.
10. ((306(a)(5)) The Area Agency will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, with agencies that develop or provide services for individuals with disabilities.
11. ((306(a)(8)) The Area Agency assures that case management services provided under this title through the Area Agency will:
 - a. not duplicate case management services provided through other Federal and State programs;
 - b. be coordinated with case management services provided through other Federal and State programs; and
 - c. be provided by a public agency; or a nonprofit private agency that:
 - i. gives each older individual seeking services under this title a list of agencies that provide similar services within the jurisdiction of the Area Agency;
 - ii. gives each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipts by such individual of such statement;
 - iii. has case managers acting as agents for the individuals receiving the services and not as promoters for the agency providing such services; or
 - iv. is located in a rural area and obtains a waiver of the requirements described in clauses (i) through (iii).
12. ((306(a)(6)(C)) Where possible, the Area Agency on Aging will enter into arrangements with organizations providing day care services for children, assistance to older individuals caring for relatives who are children, and respite for families, so as to provide opportunities for older individuals to aid or assist on a voluntary basis in the delivery of such services to children, adults and families.

Public Input

1. ((306(a)(6)(A)) The Area Agency will take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan.
2. ((306(a)(6)(D)) The Area Agency will establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in

rural areas) who are participants or who are eligible to participate in programs assisted under this Act, representatives of older individuals, local elected officials, providers of veterans' health care (if appropriate) and the general public to advise continuously the Area Agency on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan.

Preference to Those in Greatest Economic or Social Need

1. ((306(a)(4)(A)(i)) The Area Agency will set specific objectives for providing services to older individuals with greatest economic need and older individuals with greatest social need, will include specific objectives for providing services to low-income minority individuals and older individuals residing in rural areas, and will include proposed methods of carrying out the preference in the area plan.
2. ((306(a)(4)(A)(ii)) The Area Agency shall include in each agreement made with a provider of any service under this title, a requirement that such provider will:
 - a. specify how the provider intends to satisfy the service needs of low-income minority individuals and older individuals residing in rural areas in the area served by the provider;
 - b. to the maximum extent feasible, provide services to low-income minority individuals and older individuals residing in rural areas and in accordance with their need for such services; and
 - c. meet specific objectives established by the Area Agency , for providing services to low-income minority individuals and older individuals residing in rural areas within the planning and service area.
3. ((306(a)(4)(A)(iii)) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, the Area Agency shall:
 - a. identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area;
 - b. describe the methods used to satisfy the service needs of such minority older individuals; and
 - c. provide information on the extent to which the Area Agency met the objectives described in clause (306(a)(4)(A)(i)).
4. ((306(a)(4)(C)) The Area Agency shall 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.
5. ((306(a)(4)(B)) The Area Agency will use outreach efforts that will identify individuals eligible for assistance under the Act, with special emphasis on:
 - a. older individuals residing in rural areas;

- b. older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
 - c. older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
 - d. older individuals with severe disabilities;
 - e. older individuals with limited English-speaking ability; and
 - f. older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals);
- and inform older individuals referred to in (A) through (F), and the caretakers of such individuals, of the availability of such assistance.
6. ((306(a)(11)) The Area Agency shall provide information and assurances concerning older Native Americans, including: information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the Area Agency will pursue activities, including outreach, to increase access to those older Native Americans to programs and benefits provided under this title;
- a. an assurance that the Area Agency will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and
 - b. an assurance that the Area Agency 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.

Agreements with Service Providers

1. ((306(A)(1)) The plan shall include a method and plans for entering into agreements with providers of services for the provision of services to meet needs.
2. ((307(a)(11)) The Area Agency on Aging will--
 - a. enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance.
 - b. include in any such contract provisions to assure that any recipient of funds under division (A) 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
 - c. attempt to involve the private bar in legal assistance activities authorized under Title III, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

3. ((307(a)(11)(B)) The Area Agency on Aging assures 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 LSC projects in the planning and service area in order to concentrate the use of funds provided under Title III on individuals with 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.
4. ((307(a)(11)(D)) The Area Agency on Aging assures, 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 other sources other than the OAA and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals.
5. ((307(a)(11)(E)) The Area Agency on Aging will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect and age discrimination.

Provision of Services

1. ((306(a)(2)) The Area Agency shall provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services:
 - a. services associated with access to services (transportation, outreach, information and assistance, and case management services);
 - b. in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
 - c. legal assistance;
The Area Agency will report annually to the State agency in detail the amount of funds expended for such category during the fiscal year most recently concluded.
2. ((306(a)(13)(A)) The Area Agency will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.
3. ((306(a)(13)(B)) The Area Agency will disclose to the Assistant Secretary and the State agency --

- a. the identity of each non-governmental entity with which it has a contract or commercial relationship relating to providing any service to older individuals; and
 - b. the nature of the contract or relationship.
4. ((306(a)(13)(C)) The Area Agency will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or commercial relationships.
 5. ((306(a)(13)(D)) The Area Agency will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.
 6. ((306(a)(13)(E)) The Area Agency will, 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.
 7. ((306(a)(14)) The Area Agency assures that funds received under this title will not be used to pay any part of a cost (including administrative cost) incurred by the Area Agency to carry out a contract or commercial relationship that is not carried out to implement Title III.
 8. ((306(a)(15)) The Area Agency assures that preference in receiving Title III services will not be given to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement Title III.

Outreach, Information, and Referral

1. ((307(a)(14)) If a substantial number of older individuals residing in the planning and service area are of limited English-speaking ability, the Area Agency on Aging will:
 - a. utilize 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; and
 - b. designate an individual employed by the Area Agency on Aging, or available to such Area Agency on a full-time basis, whose responsibilities include:
 - i. taking such action as may be appropriate to assure that counseling assistance is made available to such individuals in order to assist them in participating in programs and receiving assistance under the OAA; 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 effectively linguistic and cultural differences.

Department Requirements

1. The AAA shall:
 - a. ensure that all services and service options are fully explained to applicants/participants/representatives;
 - b. ensure that all applicants/participants/representatives are provided with a copy of the AAA's consumer grievance procedures and are provided with assistance as necessary to understand and follow the established procedures.
 - c. assist applicants/participants to obtain necessary services;
 - d. involve applicants/participants in the planning of their services;
 - e. coordinate services provided by the AAA with other related services provided to the participant by other agencies or individuals;
 - f. ensure that the AAA's services meet the individual needs of each participant, including changes in services as needs change.
2. The AAA shall assure that all services provided under this area plan will be coordinated with other home and community based services and providers in the AAA's service area to avoid duplication, maximize existing resources and ensure optimum coordination of services for individual clients. "Home and community based services and providers" include, but are not limited to, hospital discharge planning, nursing homes, residential care homes, home health agencies, adult day services, services of the Vermont Center for Independent Living, services funded through Part B of the Rehabilitation Act, the Office of Public Guardians, and activities conducted through community resource teams or adult abuse teams.
3. The AAA assures that all Case Management services provided under this area plan will comply with the Department of Disabilities, Aging and Independent Living Agency Standards for Case Management and Case Management Standards. The AAA assures that all Case Managers providing Case Management services under this area plan are in compliance with the Department of Disabilities, Aging and Independent Living Case Management Certification Procedures.
4. The Area Agency assures that at a minimum, the Nutrition Screening Instrument: DETERMINE Your Nutritional Health Checklist shall be used to screen all clients

receiving home delivered meals; case management clients, congregate meal participants and for other individuals who may benefit from such counseling.

General Administration

1. Compliance with Requirements. The Area Agency on Aging agrees to administer the program in accordance with the Act, the State Plan and all applicable regulations, policies and procedures established by the Department of Disabilities, Aging & Independent Living and federal agencies.

2. The Area Agency on Aging will work collaboratively with the Agency of Human Services (AHS) Field Director(s) toward achievement of the themes of the AHS reorganization and AHS outcomes. AHS Field Director(s) provide substantial input in determining contract priorities and assessing performance under this contract.

2. Efficient Administration. The Area Agency on Aging will utilize such methods of administration as are necessary for the proper and efficient administration of the Area Plan.

3. General Administrative and Fiscal Requirements. The Area Agency on Aging shall adopt administrative requirements and cost principles which are in compliance with the relevant provisions of 45 CFR Part 74 except where these provisions are superseded by statute. The expenditure of funds used for the construction of senior centers and/or the purchase of equipment costing over \$5000 require the prior approval of the state or federal agency.

4. Management of Funds. The Area Agency on Aging maintains sufficient financial control and accounting procedures to assure proper disbursement and accounting for Federal funds under this Plan.

- a. The Area Agency will maintain all books, documents, payrolls, papers, accounting records and other evidence pertaining to costs incurred under this agreement and make them available at reasonable times during the period of this contract and for three years thereafter for inspection by any authorized representatives of the state or federal government. If any litigation, claim, or audit is started before the expiration of the three-year period, the records shall be retained until all litigation, claims, or audit findings involving the records have been resolved. The state, by any authorized representative, shall have the right at all reasonable times, to inspect or otherwise evaluate the work performed or being performed under this contract.
- b. The Area Agency is covered by the Office of Management and Budget Circular A-133. The Area Agency will have an annual audit at the Area Agency's expense. One copy of the audit will be provided to the State by the AAA.

5. Independence, Liability: The Area Agency will act in an independent capacity and not as officers or employees of the State. The Area Agency shall indemnify, defend and hold harmless the State and its officers and employees from liability and any claims, suits, judgments, and damages arising as a result of the Area Agency's acts and/or omissions in the performance of these assurances.

6. Insurance: Before commencing work under these assurances the Area Agency must provide certificates of insurance to show that the following minimum coverages are in effect. The AAA must notify the State no more than 10 days after receiving cancellation notice of any required insurance on file with the State through the term of the assurances. Failure to maintain the required insurance shall constitute a material breach of the assurances.

Workers Compensation: With respect to all operations performed, the Area Agency shall carry workers compensation insurance in accordance with the laws of the State of Vermont.

General Liability and Property Damage: With respect to all operations performed under the assurances, the Area Agency shall carry general liability insurance having all major divisions of coverage including, but not limited to:

- Premises - Operations
- Independent Contractors' Protective
- Products and completed Operations
- Personal Injury Liability
- Contractual Liability

The policy shall be on an occurrence form and limits shall not be less than:

- \$1,000,000 Per Occurrence
- \$1,000,000 General Aggregate
- \$1,000,000 Products/completed products aggregate
- \$50,000 Fire Legal Liability

Automotive Liability: The Area Agency shall carry automotive liability insurance covering all owned, non-owned and hired vehicles used in connection with the assurances. Limits of coverage shall not be less than:

- \$1,000,000 Combined single limit

Professional Liability: Before commencing work on the assurances and throughout the term of the assurance, the AAA shall procure and maintain professional liability insurance for any and all services performed under the assurances with minimum coverage of \$ 0 per occurrence.

No warranty is made that the coverages and limits listed herein are adequate to

cover and protect the interests of the Area Agency for the Area Agency's operations. These are solely minimums that have been set to protect the interests of the State.

7. Set Off: The State may set off any sums which the Area Agency owes the State against any sums due the Area Agency under the assurances; provided, however, that any set off of amounts due the State of Vermont as taxes shall be in accordance with the procedures more specifically provided hereinafter.

8. Taxes Due To The State:
 - a) The Area Agency understands and acknowledges responsibility, if applicable, for compliance with State tax laws, including income tax withholding for employees performing services within the State, payment of use tax on property used within the State, corporate and/or personal income tax on income earned within the State.
 - b) The Area Agency certifies under the pains and penalties of perjury that, as of the date the assurances are signed, the Area Agency is in good standing with respect to, or in full compliance with, a plan to pay any and all taxes due the State of Vermont.
 - c) The Area Agency understands that final payment under the assurances may be withheld if the Commissioner of Taxes determines that the Area Agency is not in good standing with respect to or in full compliance with a plan to pay any and all taxes due to the State of Vermont.
 - d) The Area Agency also understands the State may set off taxes (and related penalties, interest, and fees) due to the State of Vermont, but only if the Area Agency has failed to make an appeal within the time allowed by law, or an appeal has been taken and finally determined and the Area Agency has no further legal recourse to contest the amounts due.

9. No Gifts or Gratuities: The Area Agency shall not give title or possession of any thing of substantial value (including property, currency, travel and/or education programs) to any officer or employee of the State during the term of the assurances.

10. Conflict of Interest. The Area Agency on Aging assures that no individual, appointed or otherwise, involved in the designation of the head of any subdivision of the Area Agency on Aging, is subject to a conflict of interest prohibited under the Older Americans Act; assures that no officer, employee, or other representative of the Area Agency on Aging is subject to a conflict of interest prohibited under this Act and assures that mechanisms are in place to identify and remove conflicts of interest prohibited under the Act (307(a)(7)(B)).

11. Suspension and Debarment: Non-federal entities are prohibited by Executive Orders 12549 and 12689 from contracting with or making sub-awards under covered transactions to parties that are suspended or debarred or whose principals are

suspended or debarred. Covered transactions include procurement contracts for goods or services equal to or in excess of \$100,000 and all non-procurement transactions.

12. Training of Staff. The Area Agency on Aging provides a program of appropriate training for all classes of positions and volunteers, if applicable.
13. Safeguarding Confidential Information. The Area Agency on Aging has implemented such regulations, standards and procedures as are necessary to meet the requirements of safeguarding confidential information under relevant program regulations.
14. Data Entry Requirements. Notwithstanding the due dates listed in #15 below, the Area Agency on Aging agrees to complete data entry into the SAMS data base within 60 days of the end of each month. AAA's that do not complete the required data entry within the required time frame will be subject to 1/24 funding until the AAA is within the 60 day time frame. An AAA may request a variance to the 60-day data entry requirement if there are circumstances beyond the AAA's control that necessitate an extension. Variance requests must be submitted **in advance of the due date** and should be sent to the attention of Dick Laverty.
15. Reporting Requirements. The Area Agency on Aging agrees to furnish such reports and evaluations to the Department of Disabilities, Aging and Independent Living as may be specified. Reports include, but are not limited to: quarterly submission of data in the SAMS data base, Title III and Title VII quarterly financial reports, Food Stamp Program Outreach program and financial quarterly reports and Medicaid Eligibility Outreach quarterly reports. Reports and data must be sent to the Department of Disabilities, Aging and Independent Living as follows:

Due Date	Reporting Period	Reports/Data Due
February 15	October – December	SAMS QTR 1, Title III and Title VII QTR 1, FS Outreach QTR 1*, Medicaid Eligibility Outreach QTR 2.
May 15	January – March	SAMS QTR 2, Title III and Title VII QTR 2, FS Outreach QTR 2*, Medicaid Eligibility Outreach QTR 3.
August 15	April – June	SAMS QTR 3, Title III and Title VII QTR 3, FS Outreach QTR 3*, Medicaid Eligibility Outreach QTR 4.
October 20	July – September	Title III and Title VII QTR 4
November 15	July - September	SAMS QTR 4, FS Outreach QTR 4*, Medicaid Eligibility Outreach QTR 1.
1 st of Each Month	monthly	Nutrition Services Incentive Program (NSIP) meal counts.

**** Please note that all quarterly financial and program reports for Food Stamps Outreach are required to be submitted by the established deadlines or payments cannot be made under this program.***

Please refer to the NAPIS Reporting Procedures (Appendix B) for specific instruction related to the submission of NAPIS reports.

The Department reserves the right to delay the release of funds to the Area Agency on Aging if required data or reports are not submitted in a timely fashion.

16. Area Plan Amendments. Area Plan amendments will be made in conformance with applicable program regulations.
17. Opportunity to Contribute. Each service provider must offer older persons an opportunity to voluntarily contribute toward the cost of the services they receive under Title III programs. Such contributions must be used to expand the provider's services to older persons.
18. Usage of Local Funds. Local funds must be used in accordance with the budgeted use of local funds.
19. Client Transportation. Area agencies shall purchase client transportation through public transit in all instances where public transit services are appropriate to client needs and as cost-efficient as other transportation, or wherever consistent with regional transportation development plans.
20. Health Insurance Portability & Accountability Act (HIPAA): The confidentiality of any health care information acquired by or provided to the independent contractor (Area Agency) shall be maintained in compliance with any applicable state or federal laws or regulations.
21. Compliance with the Age Discrimination Act of 1975. The Grantee agrees to comply, to the extent applicable, with the requirements of the Age Discrimination Act of 1975, as amended, relating to discrimination on the basis of age, and agrees to include similar provisions in any and all subcontracts.
22. Compliance with the Civil Rights Act of 1964. The Area Agency agrees to comply, to the extent applicable, with the requirements of the Civil Rights Act of 1964, as amended, and agrees to include similar provisions in any and all subcontracts.
23. Compliance with Fair Employment Practices. The Area Agency agrees to comply, to the extent applicable, with the requirements of Title 21 V.S.A. Chapter 5, Subchapter 5, as amended, relating to fair employment practices, and agrees to include similar provisions in any and all subcontracts.

24. Compliance with the Drug-Free Workplace Act of 1998. The Area Agency agrees to comply, to the full extent applicable, with the requirements of P.L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 *et seq.*), 7 DVR Part 3017, Subpart F, Section 3017-600, and agrees to include similar provisions in any and all subcontracts.
25. Record Retention/Documentation. The Area Agency agrees to observe all State and Federal regulatory policies including 45 CFR 5b and the Privacy Act pages 42432 through 42538 dated November 25, 1985 in the Federal Register regarding public access to records and the confidentiality of personal records, as contained in Attachment Q, with respect to services provided under this agreement.
26. Compliance with the Americans with Disabilities Act of 1990. The Area Agency agrees to comply, to the full extent applicable, with the requirements of the Americans with Disabilities Act of 1990, and agrees to include similar provisions in any and all subcontracts.
27. Compliance with the Social Security Act. The Area Agency shall comply with Title XIX of the Social Security Act, as amended, and related regulations including the agreement that:
 - a. The Area Agency shall keep any records necessary to disclose the extent of services the provider furnished to Medicaid recipients;
 - b. The Area Agency, on request, shall furnish to the State of the Secretary of Human Services, or the State Medicaid Fraud Control Unit, any information maintained regarding payments claimed by the Area Agency for furnishing services;
 - c. The Area Agency shall comply with the disclosure requirements specified in Title 42 CFR, Chapter IV, Subpart F., Section 431.300 – 431.307.
28. Abuse Registry. The Area Agency agrees not to employ any individual to care for elderly or disabled adults if there has been a substantiation of abuse, neglect, or exploitation against that individual. The Area Agency will check the Adult Abuse Registry in the Department of Disabilities, Aging and Independent Living. Unless the Area Agency on Aging holds a valid childcare license or registration from the Division of Child Development, Department for Children and Families, the Area Agency on Aging shall also check the Central Child Abuse Registry (See 33 V.S. A. §4919 & 33 V.S. A. §6911).
29. Access to Information. The Area Agency agrees to comply with the requirements of AHS Rule No. 96-23 concerning access to information. The Area Agency shall require all of its employees performing services under these assurances to sign the AHS affirmation of understanding or an equivalent statement.

30. Voter Registration. When designated by the Secretary of State, the Area Agency agrees to become a voter registration agency as defined by 17 V.S.A. §2103(41), and to comply with the requirements of State and Federal law pertaining to such agencies.

31. Exclusion from Federal Procurement. The Area Agency agrees to comply with federal requirements which prohibit non-federal entities from contracting with or making subawards under covered transactions to parties that are suspended or debarred or whose principals are suspended or debarred. Non-federal entities may check for suspended and debarred parties which are listed in the *List of Parties Excluded From Federal Procurement or Nonprocurement Programs*, issued by the General Services Administration.

APPENDIX A: AREA AGENCY ON AGING FILE CONTENTS

The Area Agency file shall be maintained at the main office and is intended to be a permanent record of the structure and operation of the Area Agency on Aging.

At a minimum, please include the following information in the file. **Only those documents with an asterisk (*) should be included as an attachment to your Area Plan.** Documentation contained in the Area Agency file must be available for review by Department staff upon request or during Department of Disabilities, Aging & Independent Living Area Agency on Aging monitoring visits.

1. Organizational Chart*
2. List of Advisory Council members, representation, term*
3. List of Governing Board members, representation, term and officers*
4. Authorization to sign*
5. Bylaws*
6. Job descriptions, salary ranges
7. Corporation bylaws*
8. Certification of agency incorporation*
9. Articles of association or incorporation*
10. IRS tax exempt letter*
11. A copy of the most recent independent audit
12. Agency policies (personnel, travel, administrative)
13. Agency program policies and procedures
14. Agency policy on voluntary contributions
15. Agency grievance policy and procedures for participants of services
16. Affirmative Action Plan
17. Americans with Disabilities Act: most recent completed self-evaluation and plan
18. Disaster/Emergency Response Plan
19. Agency consumer grievance procedures and explanation of how the AAA ensures that consumers are informed of the existence of the procedures.*

**APPENDIX B: Vermont Department of Disabilities, Aging & Independent Living
Division of Disability & Aging Services
National Aging Program Information System Reporting Procedures**

It is the goal of the Department of Disabilities, Aging & Independent Living (DAIL) to ensure the timely submission of complete and accurate data for Older Americans Act (OAA) services and funding as required by the Administration on Aging (AoA). Each Area Agency on Aging (AAA) is responsible for data entry of the required OAA information for their agency, and for ensuring that the data submitted to the DAIL are complete, accurate and conform to the definitions and requirements as established by the AoA. The DAIL is responsible for the review of each agency's data report and preparation of the consolidated State NAPIS report before it is submitted to the AoA. To achieve this goal, the following procedures shall be followed:

I. AAA NAPIS Reporting Procedures

- A. Data for the NAPIS report will be obtained through the on-going entry of data into the SAMS database and, as necessary, from the appropriate AAA program and fiscal staff responsible for management and oversight of the various OAA programs and services.* This includes the financial data that in prior years have been provided by DAIL for AAA verification and entry into NAPIS. This year, AAA shall provide the financial data in the NAPIS format to the DAIL Business Office (Victoria Alberghini) for review **prior to entering it into NAPIS** (please see sample reports from FFY 04 to be provided at the December 6, 2005 AAA Executive Directors' Meeting).

In order to allow time for each agency's internal review of the data before it is submitted to DAIL, all data entry for the preceding Federal Fiscal Year (FFY) must be completed **on or before December 31, 2005** (this date will change in future years). NAPIS reports will be submitted to Dick Laverty, Aging & Disabilities Senior Planner at DDAS.

** Note: Historically, AAA's have reported data for the number of meals provided based on information previously reported to Amy Nickerson at DAIL. DAIL (Dick Laverty) fed this data back to each AAA for data entry. Due to timing, this process will continue for FFY 2005, but this will change in FFY 2006 so that each AAA will be responsible for obtaining all required data from appropriate AAA staff and ensuring that the data is consistent with any information previously provided to DAIL.*

- B. Once the data have been entered, the AAA will conduct an internal review of the data, which shall include a comparison of the data reported in the prior FFY. For example, for FFY 2005 the AAA will compare FFY 2005 data to the data submitted for FFY 2004*, including the core demographic, programmatic and

financial data). The AAA review should include both the data entry staff as well as key program managers and fiscal managers who are familiar with the history of the various programs and services being reported. If any discrepancies are identified, the AAA will be responsible for investigating the cause of the discrepancy(ies) and making any necessary corrections.

** Note: DAIL recognizes that in FFY 2005, it will be difficult for AAA to compare the data for Title III-E National Family Caregiver Support Program (NFCSP) since this is the first year that NAPIS requirements exist for this program. However, to the best of its ability, each AAA should compare data submitted for FFY 2004 based on the temporary reporting requirements that were in place prior to FFY 2005 and make every effort to ensure that the data are complete and accurate.*

- C. The AAA Executive Director or designee will then review the data for the AAA, comparing the current year data. Once the review is complete, the Executive Director (no designee) will sign the attached **AAA Reporting Verification Form**. This form will be submitted with the AAA NAPIS Report to the attention of:

Dick Laverty
Aging & Disabilities Senior Planner
VT Department of Disabilities, Aging & Independent Living
Weeks Building
103 South Main Street
Waterbury, Vermont 05671-1601

II. DAIL NAPIS Reporting Procedures

- A. Upon receipt of each AAA NAPIS Report, the DDAS Aging & Disabilities Senior Planner (Dick Laverty) will coordinate with the DDAS Community Development Unit Director (Camille George) for the review and approval of each report. The Community Development Unit Director is responsible for involving other DDAS staff as appropriate in this process.
- B. If any discrepancies or questions arise, the appropriate DDAS staff will follow up with the appropriate AAA programmatic/financial staff for a response. Any changes to the AAA NAPIS Report will be made at the AAA level and then resubmitted to the DAIL to the attention of Dick Laverty and following the process described in Section I. B & C.
- C. Once all discrepancies/questions have been resolved for each AAA, the DDAS Aging & Disabilities Senior Planner (Dick Laverty) is responsible for submitting the State NAPIS Report to the AoA and for working with AoA staff to achieve the final approval of the State Report.

III. Timeline for Submission and Review of NAPIS Reports for FFY 2005*

When	Who	What
November 1, 2005	Community Development Unit (CDU)	Remind AAA's of need to complete FFY data entry by 10/31 Future: Build this into Area Plan Assurances
December 31, 2005	AAA	Data entry completed.
January 1 – January 15, 2006	AAA	AAA internal review of data and review of financial data with DAIL Business Office is conducted. Financial data entered into NAPIS once DAIL Business Office has received the data.
January 16, 2006	AAA	Submit Reports and Verification to DAIL IDU (Dick Laverty)
January 23, 2006	Information & DataUnit (IDU)	Run initial data reports, look for missing data segments by time and program by comparing current year with previous two years. Forward results to CSU.
January 30, 2006	IDU	Distribute summary tables of NAPIS data to CSU comparing most recent year's data (people and units) with previous two years.
January 30, 2006	CSU	Review data; identify any problems, follow up with AAA as necessary.
February 6, 2006	IDU	Submit NAPIS data to AOA.

** Timelines for FFY 2006 and future years are subject to change. Goal will be for AAA to submit NAPIS reports by October 31, 2006 with other timelines adjusted accordingly.*

AAA Reporting Verification Form

The _____ Area Agency on Aging's National Aging Program Information System (NAPIS) Report is hereby submitted for the period October 1, through September 30, _____. The NAPIS report has been compiled in accordance with the definitions and reporting requirements established by the Administration on Aging and has been reviewed for accuracy and completeness. The Area Agency on Aging assumes responsibility for correctness of the data reported therein.

(signed)

Date

Area Agency Director