
UTAH STATE PLAN AGING & ADULT SERVICES

**The Older Americans Act
Fiscal Years 2011 - 2015
October 1, 2011 - September 30, 2015**



**Division of Aging & Adult Services
Utah Department of Human Services**

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VERIFICATION OF INTENT

The State Plan on Aging is hereby submitted for the State of **UTAH** for the period October 1, 2011, through September 30, 2015. It includes all assurances and plans to be carried out by the **DIVISION OF AGING AND ADULT SERVICES** under provisions of the Older Americans Act, as amended, during the period identified. The State Agency named above has been given the authority to develop and administer the State Plan on Aging in accordance with all requirements of the Act, and is primarily responsible for the coordination of all State activities related to the purposes of the Act, *i.e.*, the development of comprehensive and coordinated systems for the delivery of supportive services, including multipurpose senior centers and nutrition services, and to serve as an effective and visible advocate for the elderly in the State.

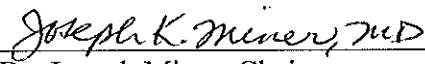
This Plan is hereby approved by the Governor, and constitutes authorization to proceed with activities under the Plan upon approval by the Assistant Secretary for Aging.

The State Plan on Aging hereby submitted has been developed in accordance with all Federal statutory and regulatory requirements.


06/29/11
Date


Nels Holmgren, Director
State Division of Aging and Adult Services

07/14/2011
Date



Dr. Joseph Miner, Chairperson
State Board of Aging and Adult Services

7/5/11
Date


Palmer DePaulis, Executive Director
Utah State Department of Human Services

I hereby approve this State Plan on Aging and submit it to the Assistant Secretary for Aging for approval.

7/20/2011
Date


Gary R. Herbert, Governor
State of Utah

Part I

Executive Summary

PART I: Executive Summary

The Utah Division of Aging and Adult Services is required under the Older Americans Act to develop and submit a State Plan on Aging every four years. The Division is pleased to have this opportunity to submit this plan to be effective from October 1, 2011 to September 30, 2015. The plan is designed to describe the state of aging services in Utah as well as the Division's objectives for the next four years with regard to aging services and programs for Utah's seniors and the direction of Utah's aging network in the coming years. This plan also provides assurances for Utah's compliance to the Older Americans Act and provides information about the current aging network. The plan contains the following sections:

Part I – Executive Summary

Part II – Context: Aging Services in Utah

This section reviews the plan process and provides some follow up regarding items from the previous four-year plan. Additionally, there is a review of demographic trends in Utah. This information is based on census data as well as analysis by the Utah Governor's Office of Planning and Budget. In 2010 a new census was conducted and will provide new and updated information for aging services. However, this new data will not be available until later this year and we are reliant on the past plan's demographic information. We look forward to having the new data and will adjust plans accordingly.

Additionally, this section provides background on critical information on the current environment of Utah's aging services. These include demographic, political, economic, community and other trends that have impact on the types and extent of services provided in the state. Further, we provide agency information on the Division and on the Utah Department of Human Services, along with guiding principles for the agencies. Also included is information on contracting, partner agencies within the aging network that interact with the Division, and services outside of the Older Americans Act that aid seniors in Utah.

Programs administered in Utah's aging network focus on helping seniors and their families maintain their health and independence. In-home and congregate nutrition programs allow seniors to maintain good nutrition in the meals themselves, but also provide nutrition education to help seniors better understand their physical needs. Services such as transportation, recreation, and other center-based activities provide needed interaction and reduce isolation of seniors while also providing education and development opportunities. Health insurance information programs provide opportunities for seniors to make informed decisions regarding their care and benefits. In-home services such as the Alternatives program and the Medicaid Aging Waiver work to ensure seniors receive care appropriate to their needs, while preventing premature institutionalization, while the Caregiver Support Program ensures the needs of those providing so much of the care received seniors have adequate support themselves. Finally, Adult

Protective Services and the Long-term Care Ombudsman programs work to ensure the safety and well being of seniors and vulnerable adults.

Part III – Guiding Principles in Developing Objectives

This short section describes the principles and overarching ideas used by the Division in developing the objectives and targets included later in the plan. These ideas are broken into four areas that taken together are intended to provide a lens for aging services that are thorough, efficient, sensitive to the needs of our clients, and feasible in our current economic and political climate.

Part IV – Plan Objectives

This section discusses in detail the services provided through the Division, either directly or through the aging network, and the objectives for maintaining and improving services. Specific tasks are included for meeting these objectives. This information is broken into three sections as indicating in the plan's Program Instructions – Older Americans Act programs, Discretionary Grants, and Consumer Choice and Control.

Part V – Financial

This brief section discusses the states funding formula and includes Utah's state rule for ensuring aging funding is properly allocated and appropriately expended, as well as basic funding information for the state.

Part VI – Assurances

This section includes the assurances required by the Administration on Aging for proper operation of Older Americans Act programs and agency administration in Utah.

Part VII – Designations

This section includes information on the Division and Area Agencies on Aging in Utah.

Part VIII – Appendices

Finally, additional information for review is found in this final section.

Aging services in Utah and around the nation face tremendous opportunities and challenges as demographic changes change the needs, preferences, and profiles of our seniors. The increase in life expectancy, as well as the increase in the sheer number of eligible seniors, will strain existing systems, but will also likely bring new opportunities for improving the lives of seniors and for allowing them live healthy, productive and positive lives that allow them to continue interacting with and positively impacting our communities in a profound way.

Policy and funding decisions will have important impact on the future of aging services, and decision makers will need accurate, data-driven information from the aging services network in order to comprehend and effectively act on the choices that will need to be made. The Division is enthusiastic about being part of this process and anticipates this plan will better position us for meeting these challenges and meeting the needs that will come as aging services progresses in Utah.

Part II

Context: Aging Services in Utah

Part II – Context: Aging in Utah

A. SUMMARY OF UTAH’S FOUR-YEAR PLAN

To receive funding under the Older Americans Act of 2006, each state is required to submit a periodic state plan to the Administration on Aging (AoA). In Utah, the development of this plan is the responsibility of the Utah State Division of Aging and Adult Services (DAAS/Division), which oversees all aging services work in the state.

Development of this plan is a cooperative effort involving more than the DAAS staff. It is the result of input from Utah’s twelve Area Agencies on Aging (AAA), the State Board of Aging and Adult Services, the State Advisory Council, the general public, and other concerned agencies and organizations throughout the state.

On an annual basis official program monitoring visits are conducted in each Area Agency on Aging in Utah. During each monitoring visit, attention is paid to reviewing their efforts to provide services to older individuals with greatest economic need, older individuals with greatest social need and older individuals at risk for institutional placement. It is also important to provide services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas.

Utah, like all states at present, is faced with a number of challenges and opportunities. We believe aging services are an important need and a great investment, and the , along with its aging network partners, is committed to ensuring the best possible outcomes for our seniors are delivered in the most effective way possible to maximize the health, well-being and independence of Utah’s seniors.

B. UPDATES TO SPECIFIC INITIATIVES INCLUDED IN THE PREVIOUS FOUR-YEAR PLAN

Aging Commission

The Utah Commission on Aging was created by legislative action and referenced the Aging Initiative reports to increase public and government understanding of the current and future needs of the state’s aging population and how those needs may be most effectively and efficiently met. The Commission reached its sunset date within the Department of Human Services and was slated to end. Subsequently, the University of Utah created a home for an extension, along with limited funding, for the Commission. The Commission continues to operate in this new capacity, although its future is in question due to funding issues. The Division continues to participate with the Commission on a regular basis. The University plans to continue the work of the Commission as long as the Commission can receive adequate funding through grants. While both the Commission and the new Utah ADRC are based in the same agency, the two entities are distinct and separate.

Transportation Coordination

The Division serves as a resource for supporting senior transportation. This is primarily accomplished through providing technical and financial assistance to Area Agencies on Aging. Further, the Division partners with other organizations to provide expertise and resources to Area Agencies. The Division is an active member of the Utah United We Ride organization, which is currently working through a comprehensive study of transportation resources, particularly in rural areas. The Division continues to maintain a partnership with contacts of the Utah Department of Transportation and with both URSTA, the Urban Rural and Specialized Transportation Association, and the Wasatch Front Coordinating Council. Both organizations are committed to the development of effective, accessible transportation for all citizens of Utah.

In FY '09, DAAS implemented a pilot program for developing a rideshare program. This was done by contracting with Wasatch Transportation, which has historically provided transportation services to other Human Services agencies. The Seniors Out and About program provided ridesharing opportunities to seniors at a reduced cost rate in Utah County. The program successfully built ridership and was enthusiastically appreciated by its clientele. However, the number of riders never increased to the point where the costs could be kept at a level most seniors could afford. As a result, the program ceased operation in 2011, despite the best efforts of all involved. The Division hopes the program can be resuscitated at a future date.

Medicaid Long-term Care Reform

Unlike many states, where the State Unit on Aging has a close association with the State Medicaid Program, the Utah Division of Aging and Adult Services is part of the Department of Human Services, which is wholly separate from the Department of Health, which includes the Medicaid Program. As a result, the two departments work together, but are not fully coordinated. With regard to Medicaid and the "Money Follow the Person" initiative, the Utah Department of Health dictates Utah's Medicaid policy and DAAS follows the lead of this sister agency.

Currently, the only DAAS administered Medicaid program is the Medicaid Aging Waiver. At this time, the Department of Health has decided not to implement "Money Follows the Person" for the Aging Waiver. As a result, DAAS has not had the opportunity to incorporate any of these changes at this time. The Health Department has indicated it will periodically reevaluate the situation and will modify its policy as management feels appropriate. DAAS and the Medicaid Division meet quarterly to ensure the Waiver is running effectively and efficiently and will continue to collaborate.

Historically, Utah has been hesitant to implement ‘Money Follows the Person’ models. At this time, the Division is not aware of any attempts by the Department of Health to apply for these grants. Additionally, there have been legislative efforts in the state to redevelop the current Medicaid Model and move the state to a managed care approach rather than the current indemnity model. Key Legislators have been working with the Utah Department of Health, as well as the federal Department of Health and Human Services, to develop proposals for this new model. In May of 2011, the Medicaid Review Task Force announced it had developed a solid proposal for moving the state plan to a managed care model. Additional information, hearings and legislative action are anticipated to be available later in 2011.

C. DEMOGRAPHIC TRENDS

The Governor’s Office of Planning and Budget (GOPB), relying on census data, develops Utah’s demographic information. GOPB then updates the data each year with recalculations of the data based on trends and new information. After seven or eight years of updating the most recent census’ information, GOPB will stop providing annual updates, as the estimates are too far removed from the original source data. The last available update to the 2000 census data was included in Utah’s last four-year plan. 2010 census data is currently being processed and is not available at the time of the submission of this four-year plan. As a result, we are reliant on the data from the last plan, which is still considered the most accurate.

Geographic and Demographic Trends and Characteristics:

Located in the Intermountain West and having a land area of 82,168.2 square miles, Utah is the eleventh largest state in the nation. Although it is considered primarily a rural state, it is both rural and urban. Of the State’s land area, 95.6% is “rural” by definition, while the remaining 4.4% is densely populated “urban” area.

Utah Administrative Rule [R510-108-1, 1994] specifically defines “rural” as any county having a population of less than one hundred (100) persons per square mile. Based on this, only four of Utah’s counties are currently considered urban; Davis, Salt Lake, Utah, and Weber. These four counties account for 76.6% of Utah’s 2.23 million residents, and 70.8% of the State’s 60+ population.

Regarding Utah’s elderly, 70.8% of the State’s sixty and older population (60+) are urban, while the remaining 29.2% are rural. The six counties with the largest percentage of 60+ individuals as a proportion of the county’s total population in 2000, were:

- Piute County 23.3%
- Kane County 21.9%
- Washington County 21.2%
- Daggett County 19.2%
- Wayne County 18.8%
- Garfield County 18.6%

The five counties with the smallest percentage of 60+ individuals as a proportion of the county's total population in 2000 were:

- Summit County 7.6%
- Utah County 8.4%
- Cache County 9.4%
- Tooele County 10.0%
- Davis County 10.1%

The five counties with the largest percentage growth of the 60+ population from 1990 to 2000:

- Washington County 36.2%
- Summit County 31.1%
- Daggett County 27.8%
- Iron County 24.7%
- Rich County 24.3%

The five counties with the smallest percentage growth of the 60+ population from 1990 to 2000:

- Carbon County -2.1%
- Piute County 0.0%
- Juab County 0.8%
- Beaver County 2.2%
- Wayne County 10.6%

The five counties with the largest absolute numerical growth of the 60+ population from 1990 to 2000:

- Salt Lake County 14,456
- Washington County 9,128
- Davis County 7,331
- Utah County 6,313
- Weber County 2,836

The five counties with the smallest absolute numerical growth of the 60+ population from 1990 to 2000:

- Carbon County -74
- Piute County 0
- Juab County 8
- Beaver County 22
- Wayne County 45

It is worth noting that Utah has been promoted in recent years as an ideal place for retirement opportunities. This is especially true for St. George, Washington County located in Southwestern Utah. Over time, this part of the state will most likely continue to attract a greater number of retirees.

Demographic Trends

Statewide: Major statewide population trends will be ones of growth and a continuation of Utah's unique demographic characteristics. Some of these more salient trends include the following:

- The statewide total population in 2000 was 2,233,169, and it's expected to increase to 3,371,071 by the year 2020, an increase of 51%.
- Population counts for the 2000 census indicate that Utah was the fourth fastest growing state in the nation from 1990 to 2000.
- Utah ranks first among all states nationally having the most youthful population. Utah's median age was 27.1 years in 2000 which was 8.2 years younger than the U.S. median age of 35.3 years.
- By the year 2010, Utah is expected to have a population that numbers more than 2.78 million people.
- Much of Utah's future growth will be fueled by its relatively high birthrate and an expected overall net in-migration during the next 15 years.

Elderly Population: Major trends and figures describing Utah's elderly population include:

- Utah's total 60+ population was 252,677 in 2000, and it's expected to increase to 509,415 by the year 2020, and increase of 102%.
- Utah's 60+ population is currently 11.7% of the State's total population. This is expected to increase to 12.3% by the year 2010.
- In 2000, the 85+ population was the fastest growing segment of Utah's population. This rapid upward spiral is expected to continue. Between the year 1990 and 2000, this portion of the population increased by more than 60%.

Male/Female Elderly: Women typically outlive men. This becomes evident in later years as individuals survive from their early sixties and into their eighties and older.

The increase in the number of older women in Utah compared to the number of older men reflects this naturally occurring pattern. As elsewhere, the percentage of men 60+ in the population is smaller than the number of women the same age. As both men and women approach 85 years and older, the percentage of men in the State's population, compared to women, declines significantly.

This pattern can be seen in the following table that shows Utah's elderly population as a percent of the total 60+ and 85+ for the year 2000.

	60+ Years	85+ Years
	Percentage of Population	Percentage of Population
Men	44.9%	33.0%
Women	55.1%	67.0%

Minority Elderly: Utah's elderly minority population is a relatively small portion of the 60+ population. Even so, in the future it is expected to grow and contribute to the State's diversity:

- Utah's 60+ minority population comprises approximately 7.9% of the State's total 60+ population.
- The proportion of Utah's 60+ minority population consists of 43.1% Hispanic, 16.6% Asian, 4.9% Black, and 7.9% American Indian.
- Utah's Hispanic population is among the State's fastest growing ethnic/minority groups. This mirrors a similar trend nationwide, and will likely continue as a distinct trend among the State's elderly population in the years to come.

The distribution of Utah's 60+ minority population is quite distinctive. Even though the overall proportion of the elderly population is relatively small statewide, some areas of the state have high concentrations of certain minority persons, while others are extremely sparse. Based on the 2000 U.S. Census data, the following table displays the minority distribution within certain counties.

The three counties with the greatest percentage of minority elderly as a proportion of each county's total 60+ population in 2000 are:

ASIAN	% of 60+	BLACK	% of 60+	HISPANIC	% of 60+	AMERICAN INDIAN	% of 60+
- Salt Lake	2.1%	- Weber	1.2%	- Box Elder	7.3%	- San Juan	42.4%
- Box Elder	1.8%	- Salt Lake	0.5%	- Tooele	7.0%	- Uintah	5.2%
- Weber	0.3%	- Davis	0.5%	- Salt Lake	4.7%	- Duchesne	2.1%

Figures are based on *State of Utah Economic and Demographic Projections, 2005*, Governor's Office of Planning and Budget

NOTE: Additional data pertaining to Utah's elderly are included in the Appendix at the back of this plan.

Utah's Total Urban and Rural Population: Sixty and Over

Total 60+ Population		Urban		Rural	
2000	2010	2000	2010	2000	2000
252,677	341,810	178,838	248,389	73,839	93,421

Source: The data for all tables were obtained directly from the 2000 U.S. Census and interpolated using percentage factors from the Governor's Office of Planning & Budget---*State of Utah Economic and Demographic Projections 2005*. At this time, Utah's only urban counties are Davis, Salt Lake, Utah, and Weber as per Utah Code R510-108-1, 1994.

D. CRITICAL ISSUES

As is the case in all states, Utah faces a number of opportunities and challenges with regard to aging. The recent economic issues facing the country have had a direct impact on Utah and on aging services in the state. While the number of seniors eligible for services continues to grow, funding for services has been cut, creating a widening gap between needs and resources. Following are a number of issues Utah must consider in moving aging services forward in the coming four year:

1. Growth in the Senior Population

Aging Services has always been an exciting and challenging field and will become even more so in the next few decades. Utah has always been considered a young state, and will continue to do so as the state's average age and number of children, while younger and fewer than it has been has been historically, will continue to be an outlier given the national statistics. However, at the same time, Utah continues to have one of the fastest growing senior populations in the nation. Additionally, while the nation is seeing more seniors living longer, the growth rate of Utah's oldest seniors continues to outpace much of the country.

2. Increased Length and Quality of Life

The good news in Utah is that the vast majority of seniors are healthy, independent, surrounded by strong family and communities supports, and are generally secure. However, while only a small portion of Utah's overall senior population may require services and formal supports, the growing population will cause that small percentage to be much larger in the years ahead. The growth of this relatively small group will stretch existing resources and may require provider agencies to reevaluate at the individuals it serves and the criteria for qualification for services.

3. The Addition of the Baby Boom generation

As stated above, all segments of the senior population are growing in Utah. However, the Baby Boom generation, given their large numbers will have a particular impact on the aging network. With them comes the challenge of a very different set of needs and worldview than the current cadre of older seniors brings with them. In addition to the potential stress to the system in terms of sheer numbers, the Baby Boomers will likely have different needs and interests.

Potential impacts could be as significant as the potential needs due to lifestyle differences with regard to health, financial needs, and family support between 'younger' and 'older' seniors that will impact the type and frequency of services, to relatively minor things such as meal tastes and senior center activity interests. Meeting the needs of the younger and growing cohort, while still attending to the existing needs of the seniors currently served will be a challenge.

4. Alzheimer's Disease

The Utah State Legislature recently passed a bill creating a taskforce to research the effects of Alzheimer's disease on the state, along with the needs of individuals and families impacted by the disease, and to recommend steps that should be taken by the state to meet

these needs in the future. The Division will chair and participate in the taskforce. The Division anticipates the effect of Alzheimer's will continue to grow and the state's aging network will continue to see growth of the disease among the clients served. Given the impact and expense associated with this issue, the Division feels the taskforce and any follow up legislation will be important for future planning within the aging network.

5. General Funding and Economic Issues

Aging services in Utah relies on a blend of funding sources including federal, state, and local government sources, along with contributions by the seniors themselves, along with their families. Issues and events at the various levels has had the effect of reducing or increasing funds correspondingly, while overall funding has typically been stable in the aggregate. Despite this stability, funding for aging services has always been a difficult subject at all levels of government, and budget issues are a constant source of concern, particularly as the number of individuals eligible to receive services increases, as do the costs of providing those services.

Federal Funding Uncertainties

Historically, federal resources have been the most consistent and reliable source of funding for aging services. This has been particularly true during the last three years, as the recession has taken its toll on state and local resources, and has also reduced individuals' ability to contribute. However, with the recent changes in Congress and the growing public sentiment to reduce public spending, we anticipate federal funding will be reduced at least somewhat for at least the next few budget cycles.

State Funding Issues

Utah's policy makers, while supportive of human services generally and aging services specifically, encourages the use of informal supports. Utah's culture encourages individual responsibility, support from families, neighbors and community organization, while providing limited funding for government programs. With this in mind, while the Division does not anticipate the large cuts seen in the past few budget cycles brought on by reduced revenues during the recession, we also do not anticipate significant new funding being added to aging programs.

Political and Economic Considerations

Historically, members of the Utah State Legislature have been supportive of aging services and has been encouraging of the aging network's efforts. However, the economy has put a strain on state and local government resources and the result has been significant cuts throughout government that have been particularly acute in the human services fields. Given the high proportion of personnel costs in the services we provide, budget cuts have resulted

in a smaller staff, which directly impacts the number of individuals who can be served, particularly on in-home service programs. Historically, Utah has exceeded Maintenance of Effort requirements, but has not made large investments in aging services. We anticipate this will continue to be the case going forward.

The Division sees the economy improving and feels that significant cuts are unlikely in the upcoming budget cycles, but at the same time do not believe we will see new infusions of funding at the state level. At this point, we are optimistic that funding will be stable, although with possible cuts at the federal level, we anticipate that program funding will be flat at best, and more likely will decrease slightly. Given this, we do not see much likelihood for significantly increasing the scope of services, not the number of individuals served, and see limited opportunities for new initiatives.

One of the main trends experienced in the last few legislative sessions is a push for more accountability among state agencies, which the Division views as a benefit in that clear and identifiable outcome measures allow agencies to show progress, value for taxpayer investments, and efficiency in delivering services. The challenge has been to develop measures that show value and tell the story of the benefits the aging network's programs provide, while being actually measurable and fairly readily available.

For instance, Congregate Meals provide improved nutrition, decreasing medical costs and institutional stays, and provide increased socialization, improved well-being and the possibility for increased participation in other beneficial programs available in senior centers. However, finding easily obtainable, measurable data that supports these ideas is very difficult. As a result, we tend to report on outcomes such number of meals served, number of clients served, average cost per meals, etc. These quantitative measures are viewed critically by policy makers, who are looking for more outcome based data. It has been a challenge for the Division to meet these requests.

Another is involves perceptions about the function of government generally. At times there has been difficulty in connecting the need and appreciation of aging services, and the administration of those services. As a result, many programs such as Meals on Wheels, are seen as valuable and needed, while the government operations that run the programs are sometimes viewed as wasteful, overgrown and unneeded. As a result, recent years have seen flat levels of funding for programs, but cuts to program administration, which have made the effective operation of services difficult. We anticipate this will continue to be the case in future funding cycles.

9. Senior Advocates

In terms of increasing funding for aging services, one of the main challenges is a lack of desire for self-advocacy on the part of the seniors themselves. While many seniors around the country are hesitant to ask for help and do not feel it proper to advocate for their own needs, the general culture of Utah's seniors is even more so, and there is a distinct hesitancy to contact legislators and other policy makers with regard to increasing funding of aging services.

10. Meeting the Needs of a Diverse Constituency

Another challenge facing Utah is the growth of seniors from the baby Boom generation as well as the fast growth in the oldest age segments of the state. Further, along with the rest of the state population, Utah's seniors are becoming an increasingly diverse group in terms of race, culture, language and religion. Many of historically successful approaches to aging services will need to be reviewed and updated as we move forward and see a further divergence of the needs of increasingly varied client demographics.

11. Olmstead Compliance

The Division feels strongly that clients should be given choices in their care and also believes in-home and community services are more cost effective, do a better job of maintaining networks of informal care, and provide more positive outcomes for the people we serve. As a result, in addition to the Medicaid Aging Waiver, which seeks to prevent premature institutionalization of Medicaid eligible individuals, the state funds the Alternatives which provides basic care to individuals in their homes, who might be at risk of needing institutional care due to issues with Activities of Daily Living. This program, funded solely with state funds, brings in chore services and other basic needs to individuals who are otherwise able to live independently, thus allowing them to stay in their homes and in their communities, while tailoring services to needs and efficiently using resources..

Additionally, the Caregiver Support Program and Home Delivered Meals programs are other less obvious means for individuals to stay in their homes, by supporting their supporters and by providing basic nutritional needs, all with the focus of keeping people safely in their homes. Further, Utah runs the New Choices Waiver which helps individuals in institutional settings return to the community. While the Division is not directly involved in the program, several AAAs are also providers under the program and we feel it is in keeping with the Division's desire to help seniors remain healthy, safe and independent. Supporting the independence of the individual is in keeping with their desires, and also has the effect reduced costs for efficiently delivered services that make the most sense for the recipient.

E. DESCRIPTION OF THE UTAH DEPARTMENT OF HUMAN SERVICES AND DIVISION OF AGING AND ADULT SERVICES

1. The Agency and its Mission

The Division of Aging and Adult Services is part of the Utah Department of Human Services which includes four other Divisions – Child and Family Services, Services to People with Disabilities, Juvenile Justice, and Substance Abuse and Mental Health. Further the Department contains a number of offices that interact with the Division – Public Guardian, Licensing, Fiscal Operation, Services Review, Bureau of Internal Review, and others. Following is additional information about the agency:

2. The Utah Department of Human Services Desired Outcomes:

- Children, Adults And Families Are Safe From Further Harm.
- Children Have Stable Living Arrangements That Provide Long-Term, Nurturing

Relationships.

- Children, Adults, And Families Live In Safe, Supportive Communities.
- Consumer Independence/Self-Sufficiency Is Maximized .
- Consumer Quality Of Life Is Improved.
- The Department Maintains The Public's Trust.
- The Department Delivers Quality Services.

3. The Department reviews the following to determine whether it delivers quality services:

- Adherence to Preferred/Best Practices
- Consumer satisfaction
- Consumer accessibility to services
- Staff management
- Consumer responsibility

To achieve these goals, the Department developed the following set of Guiding Principles to establish and monitor expectations for how Department employees operate and how they work with all Department clients:

4. Guiding Principles

a. Services

- All clients and families are treated with dignity, courtesy, and respect.
- Needs of the clients and families guide the types and mix of services provided.*
- Clients and families are actively engaged in planning, implementation, and evaluation of their supports and services.
- Services are provided within the community in which the client and family reside.
- Service teams are uniquely designed to meet the needs of individual clients and families.
- Assessments and services build upon a foundation of client and family strengths.
- Services and staff are sensitive and responsive to client and family culture, traditions, and special needs.
- Services are designed to promote, and where necessary enforce, personal

responsibility.

- Services focus on the safety and well being of clients, employees, and the public.

b. Administration

- Employees are well-trained, credible, and committed.
- Clients and families are encouraged to be involved in Department activities and decision-making.
- Agencies and employees are accountable to the community and those they serve.
- The public will receive needed services regardless of organizational charts and jurisdictions.”

5. The Division of Aging and Adult Services

The Division of Aging and Adult Services is the smallest of the five Department Divisions and one of the most diffuse, with the bulk of the services provided being carried out by the Area Agencies on Aging with support by a relatively small state staff.

1. Vision Statement

Offering Choices for Independence

2. Mission Statement

The mission of the Division of Aging and Adult Services in administering Utah’s aging services is to provide leadership and expertise in addressing issues that impact older Utahns, those providing care for older Utahns, as well as adults suffering from various forms of abuse. It’s mission is also to ensure the availability of community-based services in both urban and rural areas of the state; to ensure services that support independent living; and to encourage citizen involvement in the planning and delivery of services.

6. Division Authority

The Division of Aging and Adult Services was created as Utah's State Unit on Aging by Utah statute (62A-3-104) giving the Division the legal authority to establish and monitor programs that serve the needs of Utah's seniors.

The Division is the sole state agency, as defined by the Older Americans Act of 1965 as amended to; (1) serve as an effective and visible advocate for the aging and adult population of Utah; (2) develop and administer a state plan under the policy direction of the Board; and (3) take primary responsibility for state activities relating to the Older Americans Act.

7. Utah’s Division of Aging and Adult Services

The Division of Aging and Adult Services (DAAS) was created as Utah's State Unit on Aging in accordance with the Older Americans Act. By Utah statute (62A-3-104) the Division was granted the legal authority to establish and monitor programs that serve the needs of Utah's seniors. Local Area Agencies on Aging (AAA) have been designated to cover all geographic regions of the state and have responsibility for providing a comprehensive array of services and advocacy for the needs of seniors residing in these Planning and Service Areas.

In 1986, the Division was given the administrative authority for Adult Protective Services, a program to protect vulnerable adults from abuse, neglect, and exploitation. Adult Protective Services workers provide services designed to assist victims and prevent further abuse, neglect, and exploitation. Staff is located in a statewide system of offices and work in cooperation with local law enforcement to investigate cases involving seniors and disabled adults.

8. Guiding Principles in Servicing Utah's Elderly and Vulnerable Adult Population

- a. A coordinated and comprehensive system shall operate to efficiently and effectively deliver services to this population.
- b. Elderly persons having the greatest economic and social needs shall have adequate access to basic services.
- c. Public and private organizations will work cooperatively to enable elderly persons, as well as abused adults, to lead meaningful and independent lives.
- d. Community-based services will be made available to Utah's elderly population, and vulnerable adults who wish to maintain their personal independence and self-sufficiency. Such services shall include non-institutional services such as Home Health Aides, Homemaker/Personal Care, The Alternatives Program (TAP), legal assistance, caregiver support including respite and targeted training opportunities, and other services and supports, as appropriate.
- e. Abuse, neglect, and exploitation will be reduced regarding elderly persons and adults.
- f. Make effective use of volunteers for delivering services to the elderly, abused adults, and disabled adults.
- g. Services available to seniors will focus on proven results and measurable outcomes to ensure efficiency and effectiveness in meeting client needs. Services, particularly those involving preventative health services, such as fall prevention and substance abuse prevention training, will focus on Evidence-Based Disease and Disability Prevention programs by involving programs such as the evidence-based Stanford Model.

9. State and Other Services

A discussion of the various Older Americans Act Programs administered in the state is included in the objectives portion of this plan. In addition there are a number of programs funded by the state or by other federal agencies. These are:

- 1) **Adult Protective Services (APS):** The purpose of this program is to assist vulnerable adults in need of protection to prevent or discontinue abuse, neglect, or exploitation until the condition no longer requires further intervention. APS works closely with law enforcement, AAA, legal and other community resources to prevent elder abuse and to resolve the protective needs of victims.
- 2) **The Alternatives Program (TAP):** This state-funded program provides services that enable adults 18 years and over, who are at high risk for institutionalization, to remain in their own homes. The Alternatives Program coordinates family or other support service and makes a wide variety of in-home services available to seniors based on a case manager's assessment of personal needs. TAP is a model of the Choices for Independence concept of empowered, self directed care by providing clients with the opportunities to direct much of their own care, including the hiring and direction of support staff and "cash and counseling." Further, the program's focus on keeping seniors safely at home, while engaging the existing family and community support networks, allows seniors to maintain independence and efficiently use government resources by providing only those services deemed essential to the client thus avoiding nursing home placement.

In keeping with the Choices for Independence concept of providing choices for high-risk individuals, the TAP program provides for a broader range of potential clients, by having looser financial eligibility criteria than the more stringent Medicare requirements, and as such, provides services that are normally not available through other services, including the family. Income and eligibility guidelines have been established that clients must meet to receive alternative services, and the fees assessed on a sliding scale based on the individual's ability to pay. Seventy-five percent of the TAP available funding must be for clients aged sixty or older; the remaining 25% of available funding may be spent on clients 18 to 59 years of age. Services are similar to those listed under the Homemaker/Personal Care Program. Other services may also be arranged as needed.

- 3) **Senior Medicare Patrol (SMP) and Senior Health Insurance Information Program (SHIP):** Funding for the SHIP program is from the Center for Medicare and Medicaid Services (CMS). It provides information on Medicare, Medigap Insurance, Long-term Care Insurance and Medicaid to people who are eligible, or will be eligible for Medicare coverage.

The Senior Health Insurance Information Program (SHIP) coordinates with the Utah SMP through a formal memorandum of agreement. The Utah SMP is one of 64 projects across the country funded by the Administration on Aging for the purpose of educating Medicare/Medicaid beneficiaries on how to better monitor what is paid

on their behalf, and what to do about identified discrepancies.

The Utah SMP program has awarded sub-grants to the Utah's Area Agencies on Aging (AAA) and the Senior Health Insurance Information Program (SHIP). The staff and volunteers of these programs enable the SMP to cover the state of Utah and educate the Medicare and Medicaid beneficiaries on how to be aware and report possible health care fraud. The SMP also makes available this education to providers and caregivers. Through these partnerships, the programs are able to reach urban, rural, Native American residents along with the large groups of ethnic populations that reside in Utah.

The Utah SMP also has a formal memorandum of agreement with the Long Term Care Ombudsman Program. Nursing home residents can be easy prey for nursing home care providers and suppliers who may abuse or defraud the Medicare and Medicaid system. The very ill or elderly can be vulnerable to exploitation as they are often unable to monitor their own bills for fraudulent charges. Medicare fraud affects every citizen including nursing home residents who depend on Medicare. In addition fraud can diminish the quality of treatment they receive, and influence decisions on resident's care based on financial incentives rather than medical necessity. An overwhelming majority of healthcare professionals and other caregivers are honest but those that commit fraud decrease the availability of funding and other important health care programs. Utah plans to apply for SMP expansion grants to maintain the momentum of the program moving forward.

- 4) **Home and Community-Based Waiver (Medicaid Aging Waiver):** Like the Alternatives Program outlined above, the Medicaid Aging Waiver provides clients the chance to remain independent by avoiding nursing home placement, having a voice in their personal care plan, and ensuring their health needs are met. Waiver services are available to persons 65 years of age and over who meet the nursing home level of care criteria for Medicaid eligibility, as well as financial eligibility, which sets potential Waiver clients apart from TAP clients. The services are specifically intended to provide home and community-based options to nursing home care, which supports Medicaid long-term care reform by providing services at a much lower cost than traditional Medicaid nursing home placement, while allowing seniors to remain independent in their own homes. Waiver services are available statewide through the AAA system.

F. OVERVIEW OF THE SERVICE SYSTEM AND CONTRACTING

The Older Americans Act services are primarily provided under contract with Utah's twelve local Area Agencies on Aging (AAA). There are also contracts with four Area Agencies on Aging that act as service providers for Title V (Senior Community Service Employment Program). The Medicaid Home and Community-Based Waiver is administered by the Division and contracted with eleven Area Agencies on Aging, but the service is provided in all areas of the state.

The Division monitors each program at all twelve AAAs annually, and reports and applicable corrective action are presented to the AAAs and to Department Contracting contacts. During state FY 11, the Division was restricted by legislative intent language from conducting on-site, in-person monitoring. As a result electronic monitoring and teleconferencing tools were used to conduct this analysis. While there were limited benefits to conducting these off-site monitoring visits, on the whole the process was more work and more time consuming for the AAAs. In state FY12, the Division will return to an on-site monitoring system.

The Adult Protective Services Program is administered by the Division through its regional offices. These offices contract individually with local providers. (Refer to map and lists of regional offices and Area Agencies on Aging in Part V: Designations).

G. DAAS PARTNERSHIPS WITH OTHER AGENCIES

The Division understands it has limited ability on its own to positively impact the lives of seniors in the state. Rather, the Division sees the best possible outcomes to its goals by working closely with partner agencies within the aging network to provide services to individuals and to maximize resources in meeting the needs of Utah's seniors. Additionally, in an environment of limited resources and difficult economics, the need to reduce redundancy, stretch resources, and better coordinate with like-minded agencies is all the more critical. The following are notable partnerships, but is by no means an exhaustive list and are not necessarily presented in any particular order:

AAAs

The AAAs are the Division's main partners in providing services to Utah's seniors and the Division highly values these relationships. Division and AAA staff meet regularly to coordinate, share best practices and training, and partner on various program initiatives.

ADRC

During several rounds of ADRC funding, Utah's Departments of Human Services and of Health made decisions not to pursue an ADRC grant due to the obligation for additional state resources, given the difficulty of funding new initiatives in the state and the concern over funding being diverted from existing programs. In 2009, an agency within the University of Utah applied for and received ADRC funding.

The Division is fully supportive of the work performed by the ADRC and has a strong relationship with ADRC staff. While the Division does not control or fund the ADRC, Division staff have worked to support the program, have served on the steering committee and provided technical support. The Division feels its mission is linked to that of the ADRC and will continue to partner with it going forwards. The Division hopes to see the ADRC succeed and continue to add to Utah's aging network.

The Department of Human Services (DHS)

As part of the Department of Human Services, the Division works to support the overall mission of the Department and to meet the Governor's goals for supporting Utah's vulnerable populations. The Division has specific regular interactions with the Division of Services to People with Disabilities and the Division of Substance Abuse and Mental Health regarding the health and well being of seniors who are served by the other divisions.

URSTA

URSTA provides training opportunities to small agencies such as senior centers by pooling resources and accessing opportunities that would typically not be available to very small agencies. The Division is one member of the aging network represented on the URSTA board and feels strongly that URSTA provides great opportunities and support of the small, often rural, providers of transportation to Utah's seniors.

Wasatch Front Regional Coordinating Council (RCC)

The Division is represented on the Regional Coordinating Council to explore new and better ways for seniors to receive effective and convenient transportation services.

Caregiver Coalition

The Utah Coalition for Caregiver Support (UCCS) was formed in March 2002, and consists of member organizations from across the state. Members represent entities serving caregivers across the lifespan – from birth to death.

DAAS and UCCS work collaboratively to create a greater awareness of the continuum of services that are available to Utah caregivers and their families by encouraging working relationships with all entities in the caregiving services network.

DAAS and UCCS have worked jointly over the years to develop and maintain caregiver-training modules to support both family and professional caregivers across the lifespan. DAAS and UCCS are aligned in terms of their purpose to improve the quality of life for caregivers and care receivers through advocacy, information and referral, support, and access to resources, while working to decrease the chance of duplication of services and increase community knowledge and skills related to caregiving issues.

Guardianship Alliance

Office of the Public Guardian (OPG) has asked Adult Protective Services (APS) to be an active member of the Guardian Alliance Committee. The Guardian Alliance Committee consist of representatives from the Salt Lake County District Attorney's Office, Administrative Office of the Courts, Long Term Care Ombudsman, the Housing Specialist for the Division of People with Disabilities, Private Guardian/conservators, Office of the Public Guardian and the Veterans Administrative Hospital. All agencies involved have agreed to take a multidisciplinary approach to create a continuum of support and services to

Elder and Vulnerable Adults that are integrated, collaborative and coordinated in a manner so the voice of the Elder and Vulnerable adult is heard in the justice system.

Utah's Senior Community Service Employment Program (SCSEP) Older Worker Council

At SCSEP, we believe that achieving the American Dream is possible for everyone, regardless of age. Our mission is to promote economic self-sufficiency for older individuals who are working to achieve this dream.

SCSEP enhances employment opportunities for unemployed older Americans and promotes them as a solution for businesses seeking trained, qualified, and reliable employees. Older workers are a valuable resource for the 21st century workforce, and SCSEP is committed to providing high-quality job training and employment assistance to participants.

In order to achieve this goal the Utah SCSEP program designed the Older Worker Council. This Council is made up of several partners in the community. Partners include Salt Lake County Aging Services, Davis County Senior Services, Weber Human Services, Rocky Mountain Easter Seals, Social Security Administration, Senior Corps of Retired Executives (SCORE), USDA Forest Service, Utah Developmental Disabilities Council, IRS, Utah Medicaid, Utah Department of Workforce Services, and Salt Lake Community College Skills Center. Accomplishments of this partnership include; Utah SCSEP four year Strategic plan 2008-2012, Employment training arrangements at local Community colleges and trade schools, Yearly updates of Federal programs, several Memorandums of Understanding (access to Utah Workforce Services information sharing agreements), and access to Federal data bases to assist clients.

The Elder and Vulnerable Adult Abuse Committee

The Elder and Vulnerable Adult Abuse (EVAA) Committee is a multi-disciplinary screening team consisting of members from Salt Lake County District Attorney's office, Unified Police Department, Adult Protective Services and Salt Lake County Aging and Center for Human Potential. Law Enforcement Officers throughout Salt Lake County are encouraged to utilize the EVAA screening team to present their criminal case investigations involving an Elder or Vulnerable Adult. In addition to getting their criminal case screened with the District Attorney, Law Enforcement Officers receive a continuum of support from the participating agencies. Central Region APS finds the EVVA team to be a valuable collaborative tool in assistance with serving the vulnerable population with a multitude of helpful resources. The networking amongst the many agencies involved in the EVVA Committee has resulted in numerous successful problem resolutions for those clients in which we serve.

SLEAP

The Salt Lake Elder Abuse Project (S.L.E.A.P.) is a grant received by Salt Lake City Police Department (SLPD) that is funded by the Office on Violence Against Women, Enhanced Training and Services to End Violence Against the Abuse of Women Later in Life Program. DAAS' APS group is contracted to carry out the project on behalf of SLPD.

The goal of S.L.E.A.P. is to improve awareness, reporting, intervention, investigation, and the prosecution of elder abuse crimes in Salt Lake County and to improve the provision of outreach and direct services to victims through a two-phased approach of: 1) training and planning and 2) training and implementation over three years. The Salt Lake County District Attorney's Office, Salt Lake City Police Department, Adult Protective Services, and the Young Women's Christian Association (YWCA) are committed to serving as the lead collaborative agencies for S.L.E.A.P.

The United States Administration on Aging (AoA)

Obviously the Division is closely aligned with the Administration on Aging and coordinates its activities with them on an ongoing basis. The AoA provides extensive support and technical expertise to the Division and the Division is both appreciative for their efforts and committed to maintaining this critical partnership.

Other Partners

In addition, the Division works with a number of other agencies at various levels. Some of these include:

- The Utah Department of Community and Culture
- The US Department of Labor
- The Utah Department of Workforce Services
- Easter Seals
- The Social Security Administration
- The Internal Revenue Service
- Salt Lake Community College
- Senior Corps Of Retired Executives
- USDA Forest Service
- The Utah Developmental Disabilities Council
- The Utah Northern Coalition
- Centro Hispana
- The Utah Office of Health Disparities Reductions
- The Alzheimer's Association Utah Chapter
- Jewish Family Service
- The Goodwill Initiative on Aging Coalition
- The Utah Hospice and Palliative Organization
- The U of U Stroke Survivors Program
- Utah's Parkinson's Association
- The Utah State Veteran Administration
- KUED-Channel 7

- Multiple Sclerosis Society
- Utah State University

I. THE PUBLIC PROCESS

Area Agency planned levels of service are discussed during public meetings conducted by the local advisory councils prior to their adoption by the Area Agency. In addition, the adopted levels are reviewed during public meetings conducted by the State Board of Aging and Adult Services. During the public meeting the Board has the opportunity to review both planned levels of service and success each Agency has had in achieving its prior year goals.

All Board of Aging and Adult Services meetings are conducted as public meetings and the public is notified of meetings in advance. The public is invited and encouraged to present their concerns and express their opinions as to the level of services provided to them.

Additionally, public notice was placed on the Utah Public Notices web site inviting the public to receive and comment on the new plan. Responses to the plan received through public meetings, or directly from interested parties, are recorded by the Division and presented to the State Board of Aging for consideration in the plan. At this time, there have been no official comments received by the Division.

Part III

Guiding Principles in Developing State Plan Objectives

Part III – GUIDING PRINCIPLES IN DEVELOPING GOALS AND OBJECTIVES

In looking at the many ways in which the Division interacts with and serves Utah's seniors, as well as the aging network in Utah, the Division has broken its efforts and goals into four main focus areas, which are listed below. Specific objectives for the four focus areas can be found in the objectives section.

- 1. Focus on most vulnerable target populations – With current funding issues, the realities of limited resources may reduce the number of individuals served. Given that, when triaging clients and services, additional emphasis on reaching and serving frail, low income, minority and others should be prioritized.**

Seniors in Utah are, for the most part, healthy, independent, and surrounded with strong formal and informal care networks. As such, the percentage of the constituents eligible for service who actually participate is relatively low. However, despite this good news, there is still a core group of seniors in the state who are not so fortunate. Health issues, financial difficulties, often despite the best efforts of the individuals to plan and save), and a lack of family or other helps, have deep impacts on a small, but very needy group of Utah's seniors.

Data and anecdotal evidence suggest minority seniors, older, frailer seniors, and those for who English is a second language are more likely to need this additional help. This coincides with the Older American's Act's emphasis on these populations. Given the current economic environment nationally and in the state, and the overall reductions in budgets and resources, the Division feels the need to focus more of the limited resources on those most in need and with fewest outside options.

- 2. Efficiencies and initiatives for best practices in service delivery – Given current financial constraints, the need for improved efficiency and effectiveness in delivering services is more critical than normal.**

As has been previously stated, the economy has taken its toll on the ability of the Division and its partner agencies to meet the needs of Utah's seniors. As in all areas of the economy, it is incumbent on the aging network to find ways to meet needs with its reduced budgets by being smarter, looking for efficiencies and finding improved service delivery models. Although recovery will happen slowly, but progressively over the next few budget cycles, the network does not anticipate an increase in existing state or federal funding streams during that time, and may actually see additional reductions. As a result, the need to make existing resources go farther and better will be enhanced over the next several years. Understanding the projected size of Utah's older populations in coming years may mean updating definitions of standard service delivery based on new economic realities, evolving responsibilities of public entities at all levels, family responsibility and continuing use of technologies to improve service.

3. Empowering seniors in maintaining health, safety and independence – Using community resources and supports, in home services and other resources including evidence based preventive health models and abuse prevention resources, develop goals to allow seniors to remain in their homes and communities while creating healthy and safe environments.

Although, federal, state and local agencies and leaders are committed to supporting seniors in need to remain healthy and independent, seniors and their families, communities, and caregivers have a responsibility in meeting their own needs and being wise stewards of the support available to them. As a result, the Division feels a strong obligation to provide tools and information that will allow them to better meet their needs in an appropriate and effective way while maximizing formal and informal care networks.

By promoting on the roles of family and community life, building on the abilities and combined strengths of people of all ages to enhance community life in Utah, the Utah's aging network believes seniors can live better and healthier lives while reducing the need for government intervention. As a result, the Division will work with its partners to develop and communicate information on programs, preventative health options, and other community resources to that seniors and their families can make wise, informed decisions about their needs.

4. Develop and strengthen community partnerships – set goals for using and developing community networks and partners to more effectively meet client needs and to build collaborative relationships that allow access to resources and assistance found outside of the traditional aging network.

The Division serves primarily as a pass-through, monitoring, and technical expertise agency for the benefit of its partners and the aging network. As such, the Division is committed to see its partner agencies, with special emphasis on the AAAs, succeed in their efforts to provide services to Utah's seniors. Building and strengthening partnerships and relationships is key to the success of the Division and its partners, and the Division seeks to build bridges and provide tools to its collaborators.

Part IV

Plan Objectives

PART IV: PLAN OBJECTIVES

Introduction: Objectives for Utah's aging services are divided into the three Focus Areas outlined by the Administration on Aging (AoA). These are Older Americans Act (OAA) Core Programs, AoA Discretionary Grants, and Consumer Control and Choice.

A. FOCUS AREA 1 - TITLE III OF THE OLDER AMERICANS ACT

A variety of programs and services are made possible through the Division, and its contractees, Area Agencies on Aging, that enable older persons and vulnerable adults to remain independent in their communities.

- 1) **Access Services:** Provides transportation, outreach, information and assistance, and case management services.

Objective: The Division of Aging and Adult Services (DAAS) shall coordinate and monitor efforts by the aging network to improve access by Utah's seniors to services needed to maintain and/or improve their well being and quality of life to permit them to remain independent, with a special emphasis on improving access for vulnerable and special needs individuals, including minority populations, low income individuals, and frail older seniors.

Outcomes:

- Through its work with URSTA, the Division will seek to increase AAA participation in URSTA sponsored trainings by 25%
- By the end of the plan period, all twelve AAAs will be fully participating with the ADRC's I&R activities.
- Monitoring efforts will demonstrate an improvement in case management and documentation on the part of AAA staff.

Task 1: DAAS staff will continue to assist local area agencies in the development and operation of their transportation programs, including providing information about transportation needs and monitoring the funds available for transportation support to AAA, as well as community resources available to assist with transportation services through association with transportation associations including URSTA and the Wasatch Front Regional Coordinating Council.

Responsibility/Time frame: Program managers FY '12-FY '15

Task 2: DAAS staff will participate with and encourage ADRC Information and Referral (I&R) services and will provide technical expertise and support to AAAs in their I&R efforts.

Responsibility/Time frame: Director, Assistant Director and Program managers FY '12-FY '15

Task 3: DAAS staff will provide technical assistance to AAAs to improve and expand case management skills and documentation of efforts. Staff will also work with other community and private entities engaged in case management efforts to increase collaborative efforts and improve the level of services available to seniors.

Responsibility/Time frame: Program managers FY '12-FY '15

- 2) **Advocacy:** As the State Unit on Aging, the Division has a responsibility for advocating to policy makers and legislators on behalf of seniors. The Division believes it fills an important role in bringing aging issues to the fore in policy and funding discussions and will work with AAAs and other organizations to effectively and accurately represent Utah's seniors and their needs.

Objective: The Division of Aging and Adult Services (DAAS) shall serve as a leader on the behalf of Utah's elderly and the aging network. In this capacity, DAAS will aggressively promote public and private activities to secure and maintain the rights and benefits of this growing segment of the state's population.

Outcomes:

- The Division will partner with U4A to achieve at least one joint policy or funding campaign during each legislative session in which Division and AAA staff jointly advocate for the initiative with lawmakers.
- The Division will work with the State Board on Aging and Adult Services to rewrite all Board position papers currently on file.
- The Division will seek to meet with County and/or Association of Government policy makers for each of the AAAs on an annual basis.
- The Division will respond to all requests from the aging network to attend and/or present at any trainings, conferences, summits, etc.

Task 1: DAAS staff will continue to actively participate in the activities of public and private agencies and organizations which may: a) express an interest in the needs of Utah's elderly, and/or b) provide direct services to elderly individuals or those who care for them.

Responsibility/Time: Division Director and Program Managers/FY'12 - FY '15.

Task 2: Division will continue to participate in planning processes to include area agencies on aging, the Utah State Board on Aging, and other aging network partners to set priorities for activities and actions to be undertaken during the next year.

Responsibility/Time: Director and Assistant Director /FY '12 - FY '15

Task 3: DAAS will assist in supporting various advocacy strategies set out by the State's twelve Area Plans. The final information will be shared with any other community groups or individuals expressing an interest.

Responsibility/Time: Director, Assistant Director and Program managers /FY '12 – FY '15

Task 4: The Division will continue to make materials and public presentations available to all persons and organizations requesting information about the rights and benefits of Utah's elderly and caregivers, and on the aging network generally. Further, the Division will accept invitations to present information on senior issues as staff resources and travel requirements permit.

Responsibility/Time: All Program Managers/FY '12 – '15

Task 5: The Division shall produce an annual publication that documents the state of Utah's senior population. The publication shall document changes in status of seniors, document performance of area agencies in responding to needs of the senior community and special studies commissioned by the Division.

Responsibility/Time: Director, Assistant Director and Program managers /FY '12 – '15

Task 6: The Division will participate, with other members of the aging network, Senator Hatch's Senior conference and other conferences regarding aging as appropriate.

Responsibility/Time: Director and Assistant Director /FY '12 - FY '15

3) Disaster Management: As leaders in aging services and as representatives of the Utah Department of Human Services, the aging network plays a role in preparing for possible disasters and in working with AAAs in their planning for these events. The Division is able to tap into state expertise and resources in disaster planning and will work with AAAs to be able to effectively and realistically plan for future issues that may occur in their particular areas.

Objective: Support services shall be effectively coordinated in conjunction with Area Agencies on Aging (AAA) in the event that a disaster is declared by the President or Governor in accordance with the Disaster Relief and Emergency Assistance Plan.

Outcomes:

- The Division will update current Division level emergency plans to coordinate with Department of Human Services, Department of Health, Homeland Security, and AAA plans.
- The Division will ensure all AAA emergency plans are current each spring during the state planning process.

Task 1: Coordinate disaster management training for the AAAs upon request, and encourage the coordination at the community level.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 2: Ensure AAAs have adequate Disaster Management plans in place to anticipate disasters ranging from weather to natural events to manmade events, and ensure annual updates via the AAA Annual Plan process.

Responsibility/Time: Program Manager/FY'12 - FY'15

Task 3: Coordinate efforts with the State Homeland Security Agency.

Responsibility/Time: Director, Assistant Director and Program managers /FY '12 - FY '15

4.) Utah Caregiver Support Program (UCSP): The UCSP differs from other in-home services programs in that these services are offered to the caregiver, a new client population, and may only be provided on an intermittent and short-term basis. UCSP services are available to adult family members (age 18 years or older) or other adult informal caregivers providing care to individuals 60 years of age and older, or individuals of any age with Alzheimer's disease and related disorders. UCSP services are also available to grandparents and other relatives (not parents) 55 years of age and older providing care to children under the age of 18 years or providing care to adults, age 18-59 years, with disabilities.

Program goals are to develop multifaceted systems of support services for family caregivers, including information; assistance; individual counseling, support groups and training; respite; and supplemental services. The program enables caregivers, in consultation with the professional care coordinator, to obtain identified services that will provide relief and enable them to continue their caregiving duties.

Objective: To implement the five service categories, including changes brought about by the 2006 reauthorization of the Older Americans Act for the NFCSP into a multi-faceted program that provides a seamless service delivery system of caregiver support services to adults caring for elderly persons.

Outcomes:

- The Division will ensure individual programs at the local level are following established guidelines and requirements, and are following best practices the highest degree possible for local circumstances.
- The Division will continue to provide leadership within the Utah Caregiver Coalition, while supporting the desires and efforts of the coalition.
- The Division will work with the AAAs and Caregiver Coalition to review the current Caregiver program state rule when it is up for its five year review in 2012 and will make needed changes based on the feedback of the network.

Task 1: Assure that activities will take place in all five service categories i.e., Information including outreach; Assistance; Training/Counseling/Support Groups; Respite; and Supplemental Services with special emphasis on serving clients with Alzheimer's or related neurological diseases.

Responsibility/Time: Program Manager/FY '12 - '15

Task 2: Annually review the percentage of funds that will be utilized to provide services in each of the five categories by developing the administrative rule stating the requirements.

Responsibility/Time: Program Manager/FY '12 – '15

Task 3: Assure that caregiver needs are assessed and resources to meet their needs are provided, or assistance is provided to locate and/or develop the needed services.

Responsibility/Time: Program Manager/FY '12 - '15

Task 4: Work with AAAs to develop volunteer networks at the local level, including senior volunteers and others with an emphasis on service learning to engage student populations in caregiving activities for seniors.

Responsibility/Time: Program Manager/FY '12 - '15

Task 5: Assure that the current services to caregivers are being integrated with other OAA in-home and community-based service programs as well as existing caregiver services throughout the state.

Responsibility/Time: Program Manager/FY '12 - '15

Task 6: Actively participate in a statewide Coalition for Caregiver Support to encourage collaborative working relationships with all entities in the aging services network, with specific attention on identifying and reaching those in greatest social and economic need.

Responsibility/Time: Program Manager/FY '12 - '15

Task 7: Provide technical assistance and training to AAAs and contract service providers in implementing the services under the NFCSP, with particular attention to educating agencies on the changes to the NFCSP program due to the 2006 reauthorization of the Older Americans Act.

Responsibility/Time: Program Manager/FY '12 - '15

Task 8: Maintain policies and procedures that reflect the requirements in the amended OAA, with regular review of requirements and state rules.

Responsibility/Time: Program Manager/FY '12 – '15

Task 9: Monitor the AAAs compliance with established policies.

Responsibility/Time: Program Manager/FY '08 - '11

Task 10: Develop and implement community awareness activities regarding caregiver issues and the importance of early self-identification and development of community volunteers.

Responsibility/Time: Program Manager/FY '08 - '11

5) Disease Prevention and Health Promotion Services: DAAS is committed to assisting seniors in remaining active and independent by improving health and preventing disease through proven, evidence-based practices. By ensuring preventative health programs are founded in good science and best practices, DAAS feels seniors' health can be improved efficiently while overall care costs can be reduced, while senior individuals' well being can be dramatically improved. These services provide periodic screening and assessment of elderly persons to retain their capacity for self-care and to maintain independent living within the community. Examples of such services include: health risk assessment and diagnosis, routine health screening, nutrition counseling, fitness programs and dance therapy, home injury control, health education and medication management efforts.

Objective: Provide reliable information and current research to increase the knowledge, skills, and available resources needed by senior citizens and caregivers to practice sensible health measures and physical fitness.

Outcomes:

- The Chronic Disease Self Management and falls prevention programs will be rolled out to AAAs not currently involved in the grant activities.
- On an annual basis, AAA health promotion activities will be evaluated and recommendations will be provided regarding best practices and improvements to existing programs.

Task 1: Participate in the distribution of timely health promotion information to senior citizens and caregivers.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 2: Encourage local health promotion programs and services that target the elderly, caregivers, and particularly the rural and minority populations and coordinate efforts through coordination with the Governor's Office of Ethnic Affairs Committee, the Department of Health and other groups.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 3: Undertake efforts to increase the ease of access to a long-term care system that emphasizes prevention of illness, health promotion, and alternative programs that improve the quality of life, reduce premature death and disability, and maximize cost-effectiveness.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 4: Continue participation with the Department of Health on Arthritis and Falls

Prevention grants

Responsibility/Time: Program Manager/FY '12 - FY '15

- 6) **In-home Services:** Provides for home and community-based services that serve as options to nursing home care via case management and plan of care. Examples of services delivered as In-home Services include: Homemaker Services, Home Health Aides, Home Visiting, Telephone Assurance, Chore Maintenance, Support Services, and Home-Delivered Meals.

First Objective: Continue to improve the quantity and quality of in-home services providing services to older individuals with greatest economic need, older individuals with greatest social need and older individuals at risk for institutional placement. It is also important to provide services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas.

Outcomes:

- DAAS will resume in-person monitoring of in-home programs and will reinstate the policy of visiting a sampling of clients in their homes. Feedback based on these visits will be included in the annual monitoring reports for the AAAs.
- Annually, in at least one of the quarterly training sessions for AAA and Division staff, information will be presented regarding funding, requirements and best practices for in-home services.

Task 1: Monitor and evaluate the provision of “in-home” services through the use of applicable Title III B and III E funds within each Area Agency on Aging.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 2: On an ongoing basis, with emphasis on site visits, work with AAAs to ensure clients are receiving opportunities to make decisions with regards to providers and services.

Responsibility/Time: Program Manager/FY '12 - FY '15

Second Objective: Enhance current services to our population by incorporating principles of evidence based case management in coordination with relevant research, in order to provide older Utahns with the latest and best information on Aging issues.

Outcomes:

- Annually, in at least one of the quarterly training sessions for AAA and Division staff, information will be presented regarding current evidence based care principles and in-home services.

Task 1: Stay up to date with new information and technological improvements that will benefit our population.

Responsibility/Time: Program Manager/FY '12 - FY'15

- 7) **Legal Assistance:** Provides legal assistance to needy elderly persons. Direct legal services are provided by Utah Legal Services, Inc., the legal service corporation in Utah and some private attorneys through contract arrangements. Other services including information and referral, are provided by volunteer lawyers and the Division's Legal Services Developer.

First Objective: Provide the services of the state Legal Services Developer to ensure state leadership in securing and maintaining the legal rights of older persons, the coordination of the provision of legal assistance, and the continuing improvement of the quality and quantity of legal services provided to older persons in Utah.

Outcomes:

- The Division will complete and make available to the public its "Navigating Your Way" guide for senior legal services.
- The Division will implement its outreach training for financial institutions to reduce financial exploitation.
- The Division will conduct quarterly coordination with Utah Legal Services to ensure the existing suite of legal services contracted with AAAs is applicable and appropriate.

Task 1: Continue to develop a comprehensive system of legal services that targets those older persons in greatest social and economic need while continuing to provide an array of legal services to all older Utahns.

Responsibility/Time: Legal Services Developer FY '12 – FY '15

Task 2: Undertake efforts to increase awareness among older and disabled adults of legal issues that affect them and the legal services available to them.

Responsibility/Time: Legal Services Developer FY '12 – FY '15

Task 3: Provide technical assistance and training regarding the legal issues affecting older and disabled adults to various Area Agencies on Aging, Adult Protective Services, long-term care organizations, other government and non-profit agencies, and other professionals including attorneys.

Responsibility/Time: Legal Services Developer FY '12 – FY '15

Second Objective: Legal assistance will continue to be made available to needy older persons in Utah as a priority service according to the Older Americans Act.

Outcomes:

- The Legal Services Developer will present to the AAAs at least twice a year on current topics.

- The Legal Services Developer will work with AAAs to update the Legal Needs Assessment every other year.

Task 1: Monitor the contracts between the various Area Agencies on Aging and legal services providers, including Utah Legal Services, Inc and private attorneys.

Responsibility/Time: Legal Services Developer/FY '12- FY '15

Task 2: Coordinate efforts with the various Area Agencies on Aging, local bar associations, the Utah State Bar, and the two law schools in Utah, to promote pro bono legal services handled on a case by case basis depending on the needs of the inquirer and the willingness of the volunteer provider. Clients will work through existing resources with Utah Legal Services. If they are not able to have their needs met, the State Legal Services Developer will work with the pro bono network to find additional options as appropriate.

Responsibility/Time: Legal Services Developer/FY '12 - FY '15

Task 3: Continue to work with the various Area Agencies on Aging and legal services providers to assure that priority will be given to legal assistance for needy older persons in Utah related to income, health care, long-term care, nutrition, housing and utilities, protective services, defense of guardianship, abuse, neglect, exploitation, and age discrimination. Contracted services include legal information, brief legal advice, assistance with drafting documents, and, in limited circumstances, providing representation for situations involving the most vulnerable (ie guardianship).

Responsibility/Time: Legal Services Developer/FY '12 - FY '15

8) Long-term Care Ombudsman: The Long-term Care Ombudsman is an advocate responsible for protecting the rights of elderly residents of Utah's long-term care facilities. The ways in which the Ombudsman serves as an advocate for long-term care residents, as mandated by the Older Americans Act, include the following:

- a) Investigates and resolves complaints made by or for older persons in long-term care facilities.
- b) Monitors issues and policies that relate to elderly long-term care residents.
- c) Provides information to the general public.
- d) Trains volunteers and assists with the development of citizen organizations to participate in the Ombudsman Program.
- e) Assists with problems of care, adequate nutrition, personal finances, choice of visitors, resident rights, and other related concerns.
- f) In addition to ensuring basic health and well being needs, as well as client concerns, work to ensure facilities meet the mental health needs of residents and assist residents in locating needed mental health services.

Objective: Strengthen Utah's existing long-term care system by fostering quality, personal choice and autonomy, and individualized services to foster a seamless continuum of quality services that effectively serve diverse populations.

Outcomes:

- The State Ombudsman will conduct quarterly phone conferences with AAA LTCO programs to provide training, address concerns, and all of exchange between the various agencies.
- The State Ombudsman will visit each AAA program annually and provide feedback and monitoring.

Task 1: The State Ombudsman will work with the legislative members on the Senate Health and Human Services Committee to provide education on the importance of the SLTCO Program. The education provided will help the legislative members understand the importance of the program in protecting the elderly individuals residing in long-term care facilities within the State of Utah.

Responsibility/Time: Legal Services Developer/FY '12- FY '15

Task 2: The Ombudsman Program will be working on increasing it's volunteer program in order to minimize the effects of the previous loss of state funds Utah's rural areas are in the most need of volunteer support programs. The SLTCO Program will be working with the Local AAA Programs to develop a system of encouraging local volunteerism, maintaining volunteers, and developing a volunteer coordinator position to ensure the continued benefits of such a program.

Responsibility/Time: Legal Services Developer/FY '12- FY '15

Task 3: In order to maintain exceptional performance standards the SLTCO Program will be working on the integration of pertinent documents into Utah State Rules. This integration will be completed by the SLTCO and State of Utah Legal Council. The revised rules will incorporate the current SLTCO Program Policies and Procedures, current Utah State Rules, Utah State Code, and the OAA. The new revised state rules will provide the LTCO Program state wide uniformity.

Responsibility/Time: Legal Services Developer/FY '12- FY '15

Task 4: The SLTCO Program will develop and administer a timely and appropriate monitoring survey system to provide quality assurance and compliance with all applicable federal and state laws and regulations. The monitoring survey will be implemented with residents of long-term care facilities, family members, and the facilities themselves to ensure that the Local Ombudsman Program is in compliance and providing appropriate standards of care.

9) Multipurpose Senior Centers: Senior centers are supported primarily by local communities with the assistance of the Older Americans Act. These centers function as sites for the organization and provision of various health, social, nutritional, and educational services for older persons. While often viewed as primarily a delivery site for congregate meals, the centers provide a holistic approach to senior health by reducing isolation by providing social interaction, stimulation, and education for

seniors who may not have other opportunities for activities and community involvement. A primary focus, with regard to senior centers, is developing strategies to make senior centers attractive for the coming baby boom generation, and to ensure services are available and appropriate for the various generations of seniors who will utilize the same centers. DAAS is working with local and national partners, as well as seniors and soon-to-be-seniors to share best practices and develop strategies.

Within several planning and service areas there are some senior centers that, while preferring not to receive any federal or state financial support are provided with technical programming assistance. Seniors who frequent such centers are provided opportunity to attend OAA and state fund supported centers.

Objective: Senior Centers are community facilities for the organization and provision of a broad spectrum of services, which shall include the provision of health (including mental health), social, nutritional, and educational services and the provision of facilities for recreational activities for older individuals. In various planning and service areas, Focal Points and Multipurpose Senior Centers are combined as single entities.

Outcomes:

- Program staff will conduct on-site visits to senior centers, included unscheduled visits, to provide feedback on programs and share best practices.
- Program staff will participate in state and national organizations to learn best practices that can then be presented to AAAs during one of the quarterly training sessions with AAA and Division staff.

Task 1: On an ongoing basis, the Division, along with its AAA partners, shall assess the role and capacity of the various AAA Senior Centers that receive support from the Older Americans Act, to provide essential services to enhance contracted programming.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 2: The Division shall monitor the involvement/participation of economically disadvantaged, socially needy, and minority individuals in center activities.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 3: Participate in statewide conferences or regional training for nutrition coordinators and senior center managers, as well as participating with national nutrition related support organizations.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 4: Encourage Area Agencies on Aging to use trained volunteers, especially in rural areas and to recruit minority individuals for volunteer opportunities.

Responsibility/Time: Nutrition Program Manager/FY '12-FY'15

10) **Nutrition Services:** Services include, but are not limited to, the following areas of service; nutrition assessment and counseling, therapeutic meals including nutritional supplements, as medically warranted, and a full complement of daily meals. The services provide nutrition education to the elderly and prepares meals for the senior centers' congregate meal programs, in addition to delivering nutritionally appropriate meals to the homes of older persons who are unable to prepare meals for themselves. As a part of their regular assessment procedures, health and social service professionals are encouraged to routinely evaluate the nutritional status of elderly persons for possible occurrences of malnutrition. These services promote and emphasize preventive approaches that utilize nutrition services to maintain the health and independence of older persons. Local level screening is completed using a risk screen evaluation tool and collecting demographic data. Nutrition program directors are provided technical expertise and monitoring by DAAS. Both the state and federal partners provide the bulk of funding for these programs.

Objective: Senior citizens shall have the opportunity to maintain or improve their nutritional intake status. DAAS will ensure that nutrition projects supported with OAA funds use an approved nutritional determinative checklist for all persons receiving OAA supported home delivered meal, congregate meal nutritional counseling and case management.

Outcomes:

- Program staff will resume in person monitoring of AAA nutrition programs to ensure requirements and standards are being achieved.

Task 1: Provide training to providers and dietitians on nutrition requirements of OAA nutrition programs, including the American Dietary Guidelines and RDI's.

Responsibility/Time: Nutrition Program Manager/FY '12 - FY '15

Task 2: On an ongoing basis, current demand patterns of home-delivered meals as compared to previous years performance, and identify trends in service delivery, secondary meals and nutritional supplements.

Responsibility/Time: Nutrition Program Manager/FY '12 - FY '15

Task 3: Help coordinate strategies to improve transportation services to congregate meal sites for minorities and rural elderly.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 4: Monitor the AAAs' compliance with established nutrition policy.

Responsibility/Time: Nutrition Program Manager/FY '12 - FY '15

Task 5: Review fiscal allocations and expenditures on a quarterly basis to ensure that they are being expended in accordance with the plan.

Responsibility/Time: Nutrition Program Manager/FY '12 - FY '15

Task 6: Review the NSIP cash-in-lieu to determine the Area Agencies on Aging use of these funds.

Responsibility/Time: Nutrition Program Manager/FY '12 - FY '12

Task 7: Promote nutrition/malnutrition screening, nutrition risk assessments, and nutrition education.

Responsibility/Time: Nutrition Program Manager/FY '12 - FY '15

Task 8: Assess and advise the AAA nutrition program for home and community-based programs.

Responsibility/Time: Nutrition Program Manager/FY '12 - FY '15

Task 9: Promote the use of Registered Dietitians for nutritional therapy when needed in all planning and service areas of the State.

Responsibility/Time: Nutrition Program Manager/FY '12 - FY '15

Task 10: Coordinate with agencies that serve Native American individuals to ensure they are provided the nutrition and health services mandated by federal statutes.

Responsibility/Time: Nutrition Program Manager/FY '12 - FY '12

11) Native American Outreach and Coordination: The Division of Aging and Adult Services coordinates Title VI Programs with the Area Agencies in the adjacent planning and service areas. The Utes, Navajos, and Piutes are always included as participants in the congregate meals programs in Utah. The Division is a participant in the Governor's Annual Native American Summit, and meets with its Title VI counterparts to coordinate services for Native American seniors. DAAS' Director recently visited Fort Duchesne with our Administration on Aging contact and is working to set up a future meeting with his counterpart in Arizona, representatives of the Navajo Nation, and appropriate federal contacts to further coordinate and improve services for Utah's large number of Navajo seniors. DAAS will continue to improve coordination with tribal leaders, particularly in the San Juan and Uintah Basin service areas, which contain the greatest concentration of Native Americans in the state.

San Juan and Uintah Basin area agencies train their personnel, together with Native American personnel, for working in tribal senior centers. One of the agency's provides a second home delivered meal to tribal members who have been identified as malnourished and in need. The agency in turn is able to access the home setting of these tribal senior citizens for other needed services each time they deliver the meal to the home and can monitor for any signs of abuse or neglect. If signs of mistreatment are present, Adult Protective Services can be contacted immediately. Additionally, transportation is provided to bring Adult Day Care services to the tribal members as well as all senior center programming.

Objective: The Division will continue to work with tribal representatives and members of Utah's Native American tribes to improve outreach and services to tribal members living in the various AAAs.

Outcomes:

- The Division will be represented at all six Department Indian Issues meetings each year.
- The Division will attend and present at the quarterly meetings with the Indian Walk-In Center in Salt Lake.
- The Division will finalize the agreement with the Piute tribe to be able to provide APS services on tribal lands.

Task 1: The Division will continue to participate in the Department of Human Services Indian Issues workgroup.

Responsibility/Time: Division Director and APS staff/FY '12 - FY '15

Task 2: APS will continue to work with the Piute tribe to develop an agreement to allow APS to assist with elder abuse and neglect issues on tribal land. This agreement will then be used as a template for working with other tribes on similar agreements.

Responsibility/Time: APS/FY '12 - FY '15

Task 3: The Division will participate in ongoing activities with the Indian Walk-In center to assist tribal elders with accessing services and connecting with various agencies to meet needs of the urban Native American seniors.

Responsibility/Time: APS/FY '12 - FY '15

12) **Outreach:** Although most seniors in Utah are able to research and seek services as needed, there are a significant number of individuals in the state who for a variety of reasons are either unaware of services available to them or choose not to participate. As a result, it is incumbent on the aging network to seek ways to reach out to these individuals to ensure they are aware of all options available to them.

First Objective: The Division will monitor and provide assistance regarding outreach/promotion whenever needed or requested by any Area Agency on Aging. Such assistance will enable AAAs to identify potential clients and encourage the use of existing services and benefits.

Outcomes:

- The Division will provide continued training to AAAs regarding the Harmony data tracking system to better capture client information and demographics.
- The Division will continue to support ADRC efforts to ensure effective information and referral for at-risk individuals to receive needed services.
- Using Elder Abuse Prevention funds, the Division will update its APS reporting campaign to better educate the public on the need to report issues dealing with

abuse, neglect and exploitation of seniors and vulnerable adult.

Task 1: The Division and AAAs shall continue to identify those individuals who require special emphasis under the Act. These individuals include: (1) older individuals residing in rural areas, (2) older individuals with greatest economic need (with particular attention to low-income minority individuals), (3) older individuals with greatest social need (with particular attention to low-income minority individuals), (4) older individuals with severe disabilities, (5) older individuals with limited English-speaking ability, and (6) older individuals with Alzheimer's disease or related disorder with neurological and organic brain dysfunction (and caregivers of such individuals).

Responsibility/Time: All Program Managers/FY '12 - FY '15

Task 2: Support AAA's outreach efforts for all Older Americans Act and Utah state programs by supplying training, expertise, consultation, resource materials and expertise to assist agencies and volunteers as needed to support their efforts to provide services, while empowering individual agencies to design programs that work best for their particular planning and service areas.

Responsibility/Time: All Program Managers/FY '12 - FY '15

Task 3: As funding allows, participate in statewide promotion campaigns to create a greater awareness of the continuum of aging services available throughout the state.

Responsibility/Time: All Program Managers/FY '12 - FY '15

Second Objective: In conjunction with Utah's Area Agencies on Aging, the Division will assure that preference in providing services will go to the following elderly populations:

- 1) individuals with greatest economic need (especially low-income minority persons),
- 2) individuals with greatest social need (especially low-income minority individuals),
- 3) those residing in rural areas,
- 4) older individuals with severe disabilities,
- 5) individuals with limited English-speaking ability, and
- 6) those with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and caregivers of such individuals).

Outcomes:

- During the plan period, the Division and AAAs will revisit the funding formula to ensure at risk and priority populations are still being effectively accounted for.
- With the conclusion of the Alzheimer's Disease and Related Dementias Task Force, implement a state plan for addressing the needs of clients and caregivers related to these diseases.

Task 1: Meet with the staff of the various ethnic agencies within the Governor's Office to inform them of programs available to seniors and caregivers and to solicit

their input on how to make the aging and adult service programs more accessible to their constituents. Involve other agencies such as AAAs and non-profits where appropriate.

Responsibility/Time: Program Managers/FY '08 - FY '11

Task 2: Encourage the Area Agencies on Aging to be involved with groups and organizations that address the needs and concerns of Utah's minority populations, with particular emphasis on Utah's elderly minority individuals.

Responsibility/Time: Program Managers/FY '08 - FY '11

Task 3: Distribute an updated list of community agencies and organizations throughout Utah that address the specific needs of minority individuals, and/or are comprised of a predominantly minority membership.

Responsibility/Time: Program Managers/FY '08 - FY '11

Task 4: The Division will compile and analyze the responses in the Area Plans regarding targeting and share the summary results with all Area Agencies.

Responsibility/Time: Program Managers/FY '08 - FY '11

13) Senior Community Services Employment Program (SCSEP): This program provides subsidized part-time employment for low-income persons age 55 and older. The expectation is that these persons will become employed in unsubsidized positions. The services available from three Area Agencies on Aging (Weber, Davis, and Salt Lake) and a national contractor (Easter Seals), assist approximately 380 individuals annually.

Objective: Subsidized part-time employment and training opportunities shall continue to be made available to low-income persons 55 years of age and older.

Outcomes:

- Meet all national goals including the retention goal of 69.5% and the most in need goal of 2.35.
- Continue to hold and lead the Older Workers Coordinating Council to provide guidance and best practice with regard to the program/

Task 1: Achieve an 80 percent level of SCSEP Performance Measures

Responsibility/Time: Program Manager/FY '12 - FY '15

Desired Outcome: Retention rate of 69% and a Most in Need goal of 2.35

Task 2: Ensure that eligible participants receive the best possible training experience.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 3: Work with the Department of Workforce Service to tap into "emerging"

Utah employment trends.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 4: Continue the Older Workers Coordinating Counsel's advocacy in the Utah employment market and emphasize the importance of senior employees.

Responsibility/Time: Program Manager/FY '12 – FY '15

B. Focus Area 2 – AoA Discretionary Grants

Utah seeks to improve services available to seniors and has a strategy of applying for grants that complement existing services and which can be sustained on a long-term basis.

1) Aging and Disabilities Resource Center: During several rounds of ADRC funding, Utah's Departments of Human Services and of Health made decisions not to pursue an ADRC grant due to the obligation for additional state resources, given the difficulty of funding new initiatives in the state and the concern over funding being diverted from existing programs. In 2009, an agency within the University of Utah applied for and received ADRC funding.

The Division is fully supportive of the work performed by the ADRC and has a strong relationship with ADRC staff. While the Division does not control or fund the ADRC, Division staff have worked to support the program, have served on the steering committee and provided technical support. The Division feels its mission is linked to that of the ADRC and will continue to partner with it going forwards. The Division hopes to see the ADRC succeed and continue to add to Utah's aging network.

Outcomes:

- The Division will participate with all ADRC steering committee meetings and will fully participate in ADRC initiatives.
- The Division will work with the ADRC and the Department of Human Services to develop a plan for the future of the ADRC and the best available options for its success going forward.

2) Alzheimer Evidence Based Grant: Persons with Alzheimer's disease and related dementias are most often cared for in the home. As Alzheimer's disease progresses; memory loss, impaired ADL abilities and behavior disturbances cause caregiver distress and burden. The proposed "Creating Care Champions" project will replicate the "Counseling Intervention for Caregivers: Effect on neuropsychiatric Symptoms" study to reduce caregiver distress by reducing neuropsychiatric symptoms and behaviors of the care recipient. The selected intervention category is "Intervention for Family Caregivers of Persons with Dementia." Pharmacologic treatment can reduce neuropsychiatric symptoms, but access to such care is limited, particularly, among rural and ethnic families in Utah.

Outcomes:

- The Division will support the full implementation of the grant and will accurately monitor grant activities to ensure the grant is administered to the requirements of the approved proposal.
- The Division will assist with using aging network contacts to promote the grant and increase access by potential participants.
- With the conclusion of the Alzheimer's Disease and Related Dementias Task Force, implement a state plan for addressing the needs of clients and caregivers related to these diseases.

Task 1: Increase caregiver access to non-pharmacologic treatment and supportive services.

Responsibility/Time: Alzheimer's Association / Program Manager/FY '12 – FY '15

Task 2: Apply and study the amelioration effects of caregiver counseling on disturbing dementia behaviors.

Responsibility/Time: Alzheimer's Association / Program Manager/FY '12 – FY '15

Task 3: Improve aging services partnerships in order to reach and connect caregivers of veterans with dementia to untapped services, and provide them with intervention skills and support to address behavioral symptoms of their care recipients.

Responsibility/Time: Alzheimer's Association / Program Manager/FY '12 – FY '15

3) Alzheimer's Innovation Grant: The Utah Division of Aging and Adult Services, the Alzheimer's Association Utah Chapter, and specific Area Agencies on Aging will support an evidence-informed Early Stage Dementia Project (stage 3 and 4 on the Global Deterioration Scale) for family caregivers of persons with dementia, and implement the tools and strategies of the New York University Caregiver Intervention (NYUCI). Our goal is to employ this counseling and supportive intervention in a coordinated community-based program to improve caregiver well-being in communities that are newly racially integrated, increasingly diverse culturally, and continually isolated geographically (rural).

Outcomes:

- The Division will support the full implementation of the grant and will accurately monitor grant activities to ensure the grant is administered to the requirements of the approved proposal.

- The Division will assist with using aging network contacts to promote the grant and increase access by potential participants.
- With the conclusion of the Alzheimer's Disease and Related Dementias Task Force, implement a state plan for addressing the needs of clients and caregivers related to these diseases.

Task 1: Achieve the original NYUCI participant outcomes

Responsibility/Time: Alzheimer's Association / Program Manager/FY '12 – FY '15

Task 2: Demonstrate an innovative strategy for communities newly challenged by diversity

Responsibility/Time: Alzheimer's Association / Program Manager/FY '12 – FY '15

Task 3: Maintain fidelity with the NYUCI program to achieve effective results

Responsibility/Time: Alzheimer's Association / Program Manager/FY '12 – FY '15

Task 4: Embed the intervention at sites across Utah for standardization

Responsibility/Time: Alzheimer's Association / Program Manager/FY '12 – FY 15

- 4) Lifespan Respite Grant:** The Utah Division of Aging and Adult Services, Utah Aging and Disability Resource Center (ADRC), Veteran's Administration (VA), Developmental Disabilities Council, National Alliance on Mental Illness Utah, Alzheimer's Association and other agencies of the Utah Coalition for Caregiver Support (UCCS) will initiate a coordinated statewide lifespan respite care program. The grant plan is working to utilize AAA and other existing entities to distribute respite funds and services. The primary objective is to improve access to information and lifespan respite.

Objectives:

- The Division will continue to provide leadership within the Utah Caregiver Coalition, while supporting the desires and efforts of the coalition.
- The Division will support the full implementation of the grant and will accurately monitor grant activities to ensure the grant is administered to the requirements of the approved proposal.

Task 1: Institute a comprehensive lifespan respite care program with a accessible point of entry for caregivers seeking information, support and respite with a telephone helpline and web-based access utilizing the state's Access Utah Network.

Responsibility/Time: Utah Caregiver Coalition / Program Manager/FY '12 – FY '15

Task 2: Expand respite care services and respite scholarships to lifespan family caregivers, and develop private funding sources to sustain lifespan respite scholarships.

Responsibility/Time: Utah Caregiver Coalition / Program Manager /FY '12 – FY '15

Task 3: Implement a new “UCare” caregiver training program statewide for lifespan caregiver audiences and added modules related the ADRC services and support to growing numbers of non-service connected Utah caregivers of Veterans with dementia.

Responsibility/Time: Utah Caregiver Coalition / Program Manager /FY '12 – FY '15

Task 4: Facilitate training and job access for candidates entering the field of professional caregiving, and provide volunteer training for those desiring to engage in lifespan respite care

Responsibility/Time: Utah Caregiver Coalition / Program Manager /FY '12 – FY 15

5) Chronic Disease Self Management: Implementing the Chronic Disease Self-Management Program (CDSMP) in Utah is a continual work in progress, and we mean this in the best of ways. Through this process the Utah Arthritis Program (lead for CDSMP Grant) have worked closely with our State Aging partner. Whenever necessary, Division of Aging has promoted the program and encouraged future partners to buy into the program. Additionally, since the beginning of implementing the CDSMP, Division staff been critical in advising the Utah Arthritis Program when working with rural Area Agencies on Aging. The Utah Arthritis Program is currently in areas throughout the state where they have never had their programs implemented before. This means we are reaching out to those areas that will have first class information and assistance in managing their health care, and it is exciting to see how much they appreciate these efforts, especially that of implementing the CDSMP.

Sustainability is crucial and we keep that concept a part of all our conversations with partners and continually address it with our efforts and interventions. In conversations we have had about how the Chronic Disease Self-Management Program will be sustained after funding discontinues, many have indicated their continual efforts to embed CDSMP into their system. Many have also admitted that though they would like to be able to run the program with no additional funds, they feel they will still need to search for additional funding sources and have a plan in place to do so. Many are working with a variety of businesses, hospital locations, senior centers, churches, and other agencies to get further buy in so that they will be supported in their implementation efforts once AoA funding discontinues. There are certain areas in the state with more success than others and the

ones that are most successful in embedding the program into their system are the ones that collaborative and integrate with the many partners in their community.

There are Chronic Disease FOAs that have been mentioned to come about in the next few months. There is a large Coordinated Chronic Disease Grant that will be involved with Diabetes, Arthritis and a few other programs, with a July 22 deadline. It can be found on grants.gov and only State Health Departments can apply. Additionally, there is the Community Transformation Grant, the Medicaid Grant which deadline already passed, and the upcoming CDC Chronic Disease "Block" or Collaborative grant. As new grants become available that we can apply for we will continue to apply so that funds may be obtained.

Outcomes:

- The Chronic Disease Self Management will be rolled out to AAAs not currently involved in the grant activities.
- The Division will support the full implementation of the grant and will accurately monitor grant activities to ensure the grant is administered to the requirements of the approved proposal.

Task 1: Develop, strengthen and significantly expand existing capacity for the statewide delivery of CDSMP programs designed to help older adults maintain their health and independence within their local communities.

Responsibility/Time: Program Manager/FY '12 – FY '15

Task 2: Increase utilization of evidence-based programs to reach 1,200 older adults with chronic conditions by the end of the Cooperative Agreement.

Responsibility/Time: Program Manager /FY '12 – FY '15

Task 3: Specifically collaborate with agencies serving low-income, minority and limited English speaking older adults.

Responsibility/Time: Program Manager /FY '12 – FY '15

Task 4: Utilize adequate evaluation measures to assess program successes, identify challenges and guide future efforts.

Responsibility/Time: Program Manager /FY '12 – FY 15

Task 5: Work with other Chronic Disease Programs to leverage resources to reach people with chronic diseases.

Responsibility/Time: Program Manager /FY '12 – FY 15

Task 6: Develop statewide systems to generate referrals into local Chronic Disease Self-management Programs.

Responsibility/Time: Program Manager /FY '12 – FY 15

Task 7: Develop a plan to sustain the systematic delivery of the Chronic Disease Self-Management Program in established systems.

Responsibility/Time: Program Manager /FY '12 – FY 15

C. Focus Area 3 – Consumer Choice and Control

The concept of consumer choice and control is one that clearly complements Utah's culture and its approach to aging services. Allowing individuals to make their own choices and to control, as much as program constraints allow, the manner in which services are delivered to them is both empowering to the individual and often eases the load of the provider. Upon assessment, each new participant working with an AAA is screened and informed of services they may be eligible for and options available to them. The client is then able to make decisions based on their individual needs and, as much as possible, services are then tailored to their requests. Additionally, many clients are more likely to participate and to receive the support they need if given the chance to be an active participant in their care, rather than simply being looked after.

While not an Older Americans Act program, the Division's Medicaid Aging Waiver actively promotes consumer choice in allowing clients to choose and change providers, and also follows a self directed model where Waiver participants are able to hire and pay their own staff by means of a Fiscal Management Agency that assists them with payment needs. Similarly, our in-home services Alternatives program allows clients to be involved in choosing the staff that support them and has provisions for non-traditional provider support, which allows greater control and flexibility for the client.

Although consumer choice most often applies to in-home services, Utah's senior centers demonstrate the concept through their advisory boards which make decisions and plan activities based on the wishes of its particular constituency. Centers also provide an array of activities to allow seniors to spend time in the way most comfortable for them. Once Utah AAA has moved to a swipe card system for tracking senior center participation, which allows the senior greater control while providing better data for future planning.

Further, with regard to meals served in senior centers, many AAAs have worked to provide greater options than has been typical in the past, in some cases allowing different meal choices including soup and salad bars as opposed to the regular hot lunch. All of these changes add up to a culture where seniors feel their opinions matter and feel that they have a voice in which services they receive and how they are delivered. The result is greater client satisfaction, less waste as unwanted services are eliminated, and a more responsive and effective aging network.

Objective: Empower seniors and their caregivers to make more decisions regarding care and services available through the aging network.

Outcomes:

- The Division and AAAs will work to provide tools and options to clients and

- caregivers for better determining and meeting their needs.
- AAAs will be provided networking opportunities through quarterly training to share best practices and ideas regarding Consumer Choice and Control.

Task 1: Develop a caregiver registry to track caregivers and provide a one-stop resource for information and services available.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 2: Develop an internet based resource for helping clients and caregivers identify and locate community resources available through the aging network in order to replace or supplement current print materials.

Responsibility/Time: Program Manager/FY '12 - FY '15

Task 3: In the annual monitoring of programs, include a conversation with each AAA by specific program to discuss and document additional options for increasing consumer choice and control.

Responsibility/Time: Program Manager/FY '12 - FY '15

Part V

FINANCIAL

PART V: FINANCIAL

A. INTRASTATE FUNDING FORMULA: FISCAL YEAR 2012

NOTE: The State Division of Aging and Adult Services, and the State Board of Aging and Adult Services, has approved the existing intrastate funding formula for allocation of Older Americans Act funds to the 12 Area Agencies on Aging. The intrastate funding formula was last revised in FY 2001 and reviewed in FY 2007. During Fiscal Year 2012, the formula for the prior State Plan will be used. The population numbers in the formula are updated annually from population estimates provided by the Governor's Office of Planning and Budget. The formula to be used is as follows:

R510-100. Funding Formulas.

R510-100-1. Compliance with State and Federal Law for Older Americans Act.

- 1.1 The Division of Aging and Adult Services shall develop an intrastate funding formula for distribution of Older Americans Act, Title III funds and State general funds for social and nutrition services which complies with 45 CFR, Subchapter C, Part 1321.37 and with 62A-3-108.
- 1.2 The formula shall be reviewed whenever a new State Plan on Aging is required to be submitted.

R510-100-1. Affected Funding Sources for Older Americans Act.

- 2.1 The funding formula shall include:
 - A. All federal funds received under Title III of the Older Americans Act, with the exception of:
 - (1) Allowable state administrative funds, and
 - (2) Funds allocated to the State-delivered Long-Term Care Ombudsman Program.
 - B. All state funds appropriated for Title III social and nutrition services.
- 2.2 The funding formula shall not include state or federal funds appropriated for:
 - A. The Alternatives Program,
 - B. Adult Services under the Division, or
 - C. Funds identified under 62A-3-108(2).

R510-100-3. Funding Formula Factors for Older Americans Act.

- 3.1 The funding formula shall incorporate the following factors:
 - A. Base factor divided equally among the twelve Area Agencies on Aging in existence on July 1, 1986.
 - B. Population factor comprised of each Area Agency's proportion of the State's weighted elderly population; and
 - C. Land area factor consisting of each Area Agency's proportion of the State's total adjusted square miles.

- 3.2 Weighted elderly population shall consist of:
 - A. The number of persons age 60 and over who have annual incomes below 125% of poverty, plus
 - B. The number of persons age 75 and over weighted two times, plus
 - C. The number of minority persons, Hispanic, Native American, Asian/Pacific Islander, and Blacks, age 60 and over.
- 3.3 All population figures utilized shall reflect the most recent U.S. Census figures adjusted on an annual basis based on available population estimates from the Governor's Office of Planning and Budget.

R510-100-4. Base Restrictions for Older Americans Act.

- 1.1 If any Area Agency on Aging in existence on July 1, 1986 should in the future subdivide into two or more Area Agencies on Aging, the base amount allocated to the original Area Agency shall be divided proportionately among the new Area Agencies.

R510-100-5. Funding Distribution for Older Americans Act.

- 1.1 Distribution of funds under the formula shall be as follows:
 - A. 7.5% of total formula funds allocated to the base factor;
 - B. 7.5% of total formula funds allocated to the land area factor; and
 - C. 85% of total formula funds allocated to the population factor.

**OLDER AMERICANS ACT
PROJECTED FUNDING PLAN
FFY 2011**

PROGRAM	FEDERAL PROJECTED AWARDS	STATE PROJECTED FUNDING	TOTAL FUNDS PROJECTED
Title III-B			
Supportive Services	\$ 2,006,878	\$ 1,263,600	\$ 3,270,478
Legal Services, Title III-B			
Supportive Services	\$ 41,900	\$ 50,800	\$ 92,700
Ombudsman, Title III-B			
Supportive Services	\$ 46,000	\$ 18,500	\$ 64,500
Title III-C-1			
Congregate Meals	\$ 2,191,666	\$ 592,400	\$ 2,784,066
Title III-C-2			
Home-Delivered Meals	\$ 1,309,623	\$ 2,130,900	\$ 3,440,523
Title III-D			
Preventative Health	\$ 114,870	\$ -	\$ 114,870
Title III-E			
Family Caregiver Support	\$ 906,402	\$ 332,300	\$ 1,238,702
TITLE III State Admin			
Admin portion of Title III	\$ 500,000	\$ 440,300	\$ 940,300
Title VII			
Elder Abuse Prevention	\$ 30,030	\$ -	\$ 30,030
Title VII			
Ombudsman Activity	\$ 101,393	\$ 172,000	\$ 273,393
NSIP			
Nutrition Service Incentive Program	\$ 1,329,610	\$ -	\$ 1,329,610
Title V			
Senior Community Service Employment Program	\$ 799,150	\$ -	\$ 799,150
SHIP			
Health Insurance Program	\$ 325,509	\$ -	\$ 325,509
SMP			
Senior Medicare Patrol	\$ 158,000	\$ -	\$ 158,000
TOTALS	\$ 9,861,031	\$ 5,000,800	\$ 14,861,831

Part VI

State Plan Assurances

PART V: State Plan Assurances

STATE PLAN ASSURANCES, REQUIRED ACTIVITIES AND INFORMATION REQUIREMENTS Older Americans Act, As Amended in 2006

By signing this document, the authorized official commits the State Agency on Aging to performing all listed assurances, required activities and information requirements as stipulated in the Older Americans Act, as amended in 2006.

ASSURANCES

Sec. 305(a) - (c), ORGANIZATION

(a)(2)(A) The State agency shall, except as provided in subsection (b)(5), designate for each such area (planning and service area) after consideration of the views offered by the unit or units of general purpose local government in such area, a public or private nonprofit agency or organization as the area agency on aging for such area.

(a)(2)(B) The State agency shall provide assurances, satisfactory to the Assistant Secretary, that the State agency will take into account, in connection with matters of general policy arising in the development and administration of the State plan for any fiscal year, the views of recipients of supportive services or nutrition services, or individuals using multipurpose senior centers provided under such plan.

(a)(2)(E) The State agency shall provide assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the State plan;

(a)(2)(F) The State agency shall provide assurances that the State agency will require use of outreach efforts described in section 307(a)(16).

(a)(2)(G)(ii) The State agency shall provide an assurance that the State agency will undertake specific program development, advocacy, and outreach efforts focused on the needs of low-income minority older individuals and older individuals residing in rural areas.

(c)(5) In the case of a State specified in subsection (b)(5), the State agency and area agencies shall provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

States must assure that the following assurances (Section 306) will be met by its designated area agencies on aging, or by the State in the case of single planning and service area states.

Sec. 306(a) AREA PLANS

(2) Each area agency on aging 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, health services (including mental health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services);
- (B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
- (C) legal assistance; and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

(4)(A)(i)(I) provide assurances that the area agency on aging will—

- (aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;
- (bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and
- (II) include proposed methods to achieve the objectives described in items (aa) and (bb) of subclause (I);
- (ii) provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—
 - (I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;
 - (II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and
 - (III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and

(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each area agency on aging shall--

- (I) identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area;

- (II) describe the methods used to satisfy the service needs of such minority older individuals; and
- (III) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

(4)(B)(i) Each area agency on aging shall provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on--

- (I) older individuals residing in rural areas;
- (II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- (III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- (IV) older individuals with severe disabilities;
- (V) older individuals with limited English proficiency;
- (VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
- (VII) older individuals at risk for institutional placement; and

(4)(C) Each area agency on agency shall provide assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

(5) Each area agency on aging shall provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities.

(6)(F) Each area agency will:
in coordination with the State agency and with the State agency responsible for mental health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the area agency on aging with mental health services provided by community health centers and by other public agencies and nonprofit private organizations;

(9) Each area agency on aging shall provide assurances that the area agency on aging, in carrying out the State Long Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

(11) Each area agency on aging shall provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including-

- (A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency

on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

- (B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and
- (C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

(13)(A) Each area agency on aging shall provide assurances that the area agency on aging will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

(13)(B) Each area agency on aging shall provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State agency--

- (i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
- (ii) the nature of such contract or such relationship.

(13)(C) Each area agency on aging shall provide assurances that 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 such commercial relationships.

(13)(D) Each area agency on aging shall provide assurances that 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.

(13)(E) Each area agency on aging shall provide assurances that 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.

(14) Each area agency on aging shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(15) provide assurances that funds received under this title will be used-

- (A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and
- (B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;

Sec. 307 STATE PLANS

(7)(A) The plan shall provide satisfactory assurance that such fiscal control and fund accounting procedures will be adopted as may be necessary to assure proper disbursement of, and accounting for, Federal funds paid under this title to the State, including any such funds paid to the recipients of a grant or contract.

(7)(B) The plan shall provide assurances that--

- (i) no individual (appointed or otherwise) involved in the designation of the State agency or an area agency on aging, or in the designation of the head of any subdivision of the State agency or of an area agency on aging, is subject to a conflict of interest prohibited under this Act;
- (ii) no officer, employee, or other representative of the State agency or an area agency on aging is subject to a conflict of interest prohibited under this Act; and
- (iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

(9) The plan shall provide assurances that the State agency will carry out, through the Office of the State Long-term Care Ombudsman, a State Long-term Care Ombudsman program in accordance with section 712 and this title, and will expend for such purpose an amount that is not less than an amount expended by the State agency with funds received under this title for fiscal year 2000, and an amount that is not less than the amount expended by the State agency with funds received under title VII for fiscal year 2000.

(10) The plan shall provide assurance that the special needs of older individuals residing in rural areas will be taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

(11)(A) The plan shall provide assurances that area agencies on aging will--

- (i) enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance;
- (ii) include in any such contract provisions to assure that any recipient of funds under division (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
- (iii) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

(11)(B) The plan contains assurances that no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the area agency on aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

(11)(D) The plan contains assurances, to the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals;

(11)(E) The plan contains assurances that area agencies 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.

(12) The plan shall provide, whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals, the plan contains assurances that any area agency on aging carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for--

- (A) public education to identify and prevent abuse of older individuals;
- (B) receipt of reports of abuse of older individuals;
- (C) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and
- (D) referral of complaints to law enforcement or public protective service agencies where appropriate.

(13) The plan shall provide assurances that each State will assign personnel (one of whom shall be known as a legal assistance developer) to provide State leadership in developing legal assistance programs for older individuals throughout the State.

(14) The plan shall, with respect to the fiscal year preceding the fiscal year for which such plan is prepared—

- (A) identify the number of low-income minority older individuals in the State, including the number of low income minority older individuals with limited English proficiency; and
- (B) describe the methods used to satisfy the service needs of the low-income minority older individuals described in subparagraph (A), including the plan to meet the needs of low-income minority older individuals with limited English proficiency.

(15) The plan shall provide assurances that, if a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the area agency on aging for each such planning and service area—

- (A) to utilize in the delivery of outreach services under section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability; and
- (B) to designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include--
 - (i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and

- (ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effectively linguistic and cultural differences.

(16) The plan shall provide assurances that the State agency will require outreach efforts that will—

- (A) identify individuals eligible for assistance under this Act, with special emphasis on—
 - (i) older individuals residing in rural areas;
 - (ii) older individuals with greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;
 - (iii) older individuals with greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;
 - (iv) older individuals with severe disabilities;
 - (v) older individuals with limited English-speaking ability; and
 - (vi) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
- (B) inform the older individuals referred to in clauses (i) through (vi) of subparagraph (A), and the caretakers of such individuals, of the availability of such assistance.

(17) The plan shall provide, with respect to the needs of older individuals with severe disabilities, assurances that the State will coordinate planning, identification, assessment of needs, and service for older individuals with disabilities with particular attention to individuals with severe disabilities with the State agencies with primary responsibility for individuals with disabilities, including severe disabilities, to enhance services and develop collaborative programs, where appropriate, to meet the needs of older individuals with disabilities.

(18) The plan shall provide assurances that area agencies on aging will conduct efforts to facilitate the coordination of community based, long-term care services, pursuant to section 306(a)(7), for older individuals who--

- (A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;
- (B) are patients in hospitals and are at risk of prolonged institutionalization; or
- (C) are patients in long-term care facilities, but who can return to their homes if community based services are provided to them.

(19) The plan shall include the assurances and description required by section 705(a).

(20) The plan shall provide assurances that special efforts will be made to provide technical assistance to minority providers of services.

(21) The plan shall

- (A) provide an assurance that the State agency will coordinate programs under this title and programs under title VI, if applicable; and

- (B) provide an assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title, if applicable, and specify the ways in which the State agency intends to implement the activities.

(22) If case management services are offered to provide access to supportive services, the plan shall provide that the State agency shall ensure compliance with the requirements specified in section 306(a)(8).

(23) The plan shall provide assurances that demonstrable efforts will be made--

- (A) to coordinate services provided under this Act with other State services that benefit older individuals; and
- (B) to provide multigenerational activities, such as opportunities for older individuals to serve as mentors or advisers in child care, youth day care, educational assistance, at risk youth intervention, juvenile delinquency treatment, and family support programs.

(24) The plan shall provide assurances that the State will coordinate public services within the State to assist older individuals to obtain transportation services associated with access to services provided under this title, to services under title VI, to comprehensive counseling services, and to legal assistance.

(25) The plan shall include assurances that the State has in effect a mechanism to provide for quality in the provision of in-home services under this title.

(26) The plan shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the State agency or an area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(27) The plan shall provide assurances that area agencies on aging will provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care.

Sec. 308 PLANNING, COORDINATION, EVALUATION, AND ADMINISTRATION OF STATE PLANS

(b)(3)(E) No application by a State under subparagraph (b)(3)(A) shall be approved unless it contains assurances that no amounts received by the State under this paragraph will be used to hire any individual to fill a job opening created by the action of the State in laying off or terminating the employment of any regular employee not supported under this Act in anticipation of filling the vacancy so created by hiring an employee to be supported through use of amounts received under this paragraph.

Sec. 705 ADDITIONAL STATE PLAN REQUIREMENTS (as numbered in statute)

(1) The State plan shall provide an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter.

(2) The State plan shall provide an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle.

(3) The State plan shall provide an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights.

(4) The State plan shall provide an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter.

(5) The State plan shall provide an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5).

(6) The State plan shall provide an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3—

- (A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for--
 - (i) public education to identify and prevent elder abuse;
 - (ii) receipt of reports of elder abuse;
 - (iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and
 - (iv) referral of complaints to law enforcement or public protective service agencies if appropriate;
- (B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and
- (C) all information gathered in the course of receiving reports and making referrals shall remain confidential except--
 - (i) if all parties to such complaint consent in writing to the release of such information;
 - (ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or
 - (iii) upon court order.

REQUIRED ACTIVITIES

Sec. 307(a) STATE PLANS

(1)(A) The State Agency requires each area agency on aging designated under section 305(a)(2)(A) to develop and submit to the State agency for approval, in accordance with a uniform format developed by the State agency, an area plan meeting the requirements of section 306; and

(B) The State plan is based on such area plans.

Note: THIS SUBSECTION OF STATUTE DOES NOT REQUIRE THAT AREA PLANS BE DEVELOPED PRIOR TO STATE PLANS AND/OR THAT STATE PLANS DEVELOP AS A COMPILATION OF AREA PLANS.

(2) The State agency:

(A) evaluates, using uniform procedures described in section 202(a)(26), the need for supportive services (including legal assistance pursuant to 307(a)(11), information and assistance, and transportation services), nutrition services, and multipurpose senior centers within the State;

(B) has developed a standardized process to determine the extent to which public or private programs and resources (including Department of Labor Senior Community Service Employment Program participants, and programs and services of voluntary organizations) have the capacity and actually meet such need;

(4) The plan shall provide that the State agency will conduct periodic evaluations of, and public hearings on, activities and projects carried out in the State under this title and title VII, including evaluations of the effectiveness of services provided to individuals with greatest economic need, greatest social need, or disabilities (with particular attention to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas). *Note: "Periodic" (defined in 45 CFR Part 1321.3) means, at a minimum, once each fiscal year.*

(5) The State agency:

(A) affords an opportunity for a public hearing upon request, in accordance with published procedures, to any area agency on aging submitting a plan under this title, to any provider of (or applicant to provide) services;

(B) issues guidelines applicable to grievance procedures required by section 306(a)(10); and

(C) affords an opportunity for a public hearing, upon request, by an area agency on aging, by a provider of (or applicant to provide) services, or by any recipient of services under this title regarding any waiver request, including those under Section 316.

(6) The State agency will make such reports, in such form, and containing such information, as the Assistant Secretary may require, and comply with such requirements as the Assistant Secretary may impose to insure the correctness of such reports.

(8)(A) No supportive services, nutrition services, or in-home services are directly provided by the State agency or an area agency on aging in the State, unless, in the judgment of the State agency--

(i) provision of such services by the State agency or the area agency on aging is necessary to assure an adequate supply of such services;

- (ii) such services are directly related to such State agency's or area agency on aging's administrative functions; or
- (iii) such services can be provided more economically, and with comparable quality, by such State agency or area agency on aging.

INFORMATION REQUIREMENTS

Section 102(19)(G) – (required only if the State funds in-home services not already defined in Sec. 102(19))

The term “in-home services” includes other in-home services as defined by the State agency in the State plan submitted in accordance with Sec. 307.

Section 305(a)(2)(E)

provide assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the State plan;

Section 306(a)(17)

Each Area Plan will include information detailing how the Area Agency will coordinate activities and develop long-range emergency preparedness plans with local and State emergency response agencies, relief organizations, local and State governments and other institutions that have responsibility for disaster relief service delivery.

Section 307(a)

(2) The plan shall provide that the State agency will:

(C) Specify a minimum proportion of the funds received by each area agency on aging in the State to carry out part B that will be expended (in the absence of a waiver under sections 306 (c) or 316) by such area agency on aging to provide each of the categories of services specified in section 306(a)(2) (*Note: those categories are access, in-home, and legal assistance*).

Section (307(a)(3)

The plan shall:

(A) include (and may not be approved unless the Assistant Secretary approves) the statement and demonstration required by paragraphs (2) and (4) of section 305(d) (concerning distribution of funds); (*Note: the “statement and demonstration” are the numerical statement of the intrastate funding formula, and a demonstration of the allocation of funds to each planning and service area*)

(B) with respect to services for older individuals residing in rural areas:

- (i) provide assurances the State agency will spend for each fiscal year of the plan, not less than the amount expended for such services for fiscal year 2000.

- (ii) identify, for each fiscal year to which the plan applies, the projected costs of providing such services (including the cost of providing access to such services).
- (iii) describe the methods used to meet the needs for such services in the fiscal year preceding the first year to which such plan applies.

Section 307(a)(8) (Include in plan if applicable)

(B) Regarding case management services, if the State agency or area agency on aging is already providing case management services (as of the date of submission of the plan) under a State program, the plan may specify that such agency is allowed to continue to provide case management services.

(C) The plan may specify that an area agency on aging is allowed to directly provide information and assistance services and outreach.

Section 307(a)(10)

The plan shall provide assurance that the special needs of older individuals residing in rural areas are taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

Section 307(a)(21)

The plan shall:

(B) provide an assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title (*title III*), if applicable, and specify the ways in which the State agency intends to implement the activities .

Section 307(a)(28)

(A) The plan shall include, at the election of the State, an assessment of how prepared the State is, under the State's statewide service delivery model, for any anticipated change in the number of older individuals during the 10-year period following the fiscal year for which the plan is submitted.

(B) Such assessment may include—

- (i) the projected change in the number of older individuals in the State;
- (ii) an analysis of how such change may affect such individuals, including individuals with low incomes, individuals with greatest economic need, minority older individuals, older individuals residing in rural areas, and older individuals with limited English proficiency;
- (iii) an analysis of how the programs, policies, and services provided by the State can be improved, including coordinating with area agencies on aging, and how resource levels can be adjusted to meet the needs of the changing population of older individuals in the State; and
- (iv) an analysis of how the change in the number of individuals age 85 and older in the State is expected to affect the need for supportive services.

Section 307(a)(29)

The plan shall include information detailing how the State will coordinate activities, and develop

long-range emergency preparedness plans, with area agencies on aging, local emergency response agencies, relief organizations, local governments, State agencies responsible for emergency preparedness, and any other institutions that have responsibility for disaster relief service delivery.

Section 307(a)(30)

The plan shall include information describing the involvement of the head of the State agency in the development, revision, and implementation of emergency preparedness plans, including the State Public Health Emergency Preparedness and Response Plan.

Section 705(a)(7)

In order to be eligible to receive an allotment under this subtitle, a State shall include in the State plan submitted under section 307:

(7) a description of the manner in which the State agency will carry out this title in accordance with the assurances described in paragraphs (1) through (6). *(Note: Paragraphs (1) of through (6) of this section are listed below)*

In order to be eligible to receive an allotment under this subtitle, a State shall include in the State plan submitted under section 307:

(1) an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter;

(2) an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle;

(3) an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights;

(4) an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter;

(5) an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5);

(6) an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3--

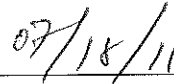
(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for:

(i) public education to identify and prevent elder abuse;

- (ii) receipt of reports of elder abuse;
 - (iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and
 - (iv) referral of complaints to law enforcement or public protective service agencies if appropriate;
- (B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and
- (C) all information gathered in the course of receiving reports and making referrals shall remain confidential except--
- (i) if all parties to such complaint consent in writing to the release of such information;
 - (ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or
 - (iii) upon court order.



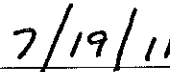
Nels Holmgren – Director, DAAS



Date



Palmer DePaulis – Executive Director, DHS



Date

Part VII

DESIGNATIONS

**DIVISION OF AGING AND ADULT SERVICES
UTAH DEPARTMENT OF HUMAN SERVICES
195 N 1950 W, Salt Lake City, Utah 84116
PHONE: (801) 538-3910
TOLL FREE: 1-877-424-4640
FAX: (801) 538-4395
Website: hsdaas.utah.gov**

Director:
Nels Holmgren
E-mail: nholmgren@utah.gov

Assistant Director: OAA
Michael Styles
E-mail: mstyles@utah.gov

Assistant Director: APS
Nan Mandenhall
E-mail: nmendenh@utah.gov

AREA AGENCIES ON AGING

June 13, 2007

Bear River Area Agency on Aging
Box Elder, Cache, Rich

Michelle Benson, Aging Svcs. Dir.
170 North Main
Logan, UT 84321
Phone: (435) 752-7242 or
1-877-772-7242
Fax: (435) 752-6962
E-Mail: michelleb@brag.utah.gov
Website: www.brag.utah.gov

**Davis County Bureau of Health Promotions
and Senior Services**
Davis

Sally Kershnik, Director of Family
Health and Senior Services
Courthouse Annex
50 East State (P. O. Box 618)
Farmington, UT 84025
Phone: (801) 451-3377
Fax: (801) 451-3434
E-Mail: skershnik@co.davis.ut.us
Web: www.co.davis.ut.us/agingservices

Five-County Area Agency on Aging
Beaver, Garfield, Iron, Kane, Washington

Carrie Schonlaw, Director
1070 West 1600 South, Bldg. B
(P. O. Box 1550, ZIP 84771-1550)
St. George, UT 84770
Phones: (435) 673-3548 (St George)
(435) 586-2975 (Cedar City)
(435) 676-2281 (Panguitch)
Fax: (435) 673-3540
E-Mail: cschonlaw@fcaog.state.ut.us

**Mountainland Dept. of Aging and Family
Services**

Summit, Utah, Wasatch

Scott McBeth, Director
586 East 800 North
Orem, UT 84097-4146
Phone: (801) 229-3800
Fax: (801) 229-3671
Website: www.mountainland.org
E-Mail: smcbeth@mountainland.org

Salt Lake County Aging Services
Salt Lake

Sarah Brenna, Director
2001 South State, #S1500
Salt Lake City, UT 84190-2300
Outreach: (801) 468-2480
Phone: (801) 468-2454
Fax: (801) 468-2852
E-Mail: sbrenna@slco.org
Website: www.slcoagingservices.org

**San Juan County Area Agency on
Aging**
San Juan

Tammy Gallegos, Director
117 South Main (P. O. Box 9)
Monticello, UT 84535-0009
Phone: (435) 587-3225
Fax: (435) 587-2447
E-Mail: tgalleghos@sanjuancounty.org

Six-County Area Agency on Aging
Juab, Millard, Piute, Sanpete, Sevier,
Wayne

Scott Christensen, Director
683 North Main
(P. O. Box 820)
Richfield, UT 84701
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Toll free: 1-888-899-4447
Fax: (435) 893-0701
E-Mail: schristensen@sixaog.state.ut.us

Southeastern Utah AAA
Carbon, Emery, Grand

Maughan Guymon, Director
Technical Assistance Center
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(P. O. Box 1106)
Price, UT 84501
Phone: (435) 637-4268 or 5444
Fax: (435) 637-5448
E-Mail: mguymon@seualg.dst.ut.us

**Tooele Co. Div. of Aging and Adult
Services**

Tooele

Joshua Maher, Director
59 East Vine Street
Tooele, UT 84074
Phone: (435) 843-4110
Fax: (435) 882-6971
E-Mail: jmaher@co.tooele.ut.us

Uintah Basin Area Agency on Aging
Daggett, Duchesne

Louise Warburton, Director
330 East 100 South
Roosevelt, UT 84066
Phone: (435) 722-4518
Fax: (435) 722-4890
E-Mail: louisew@ubaog.org

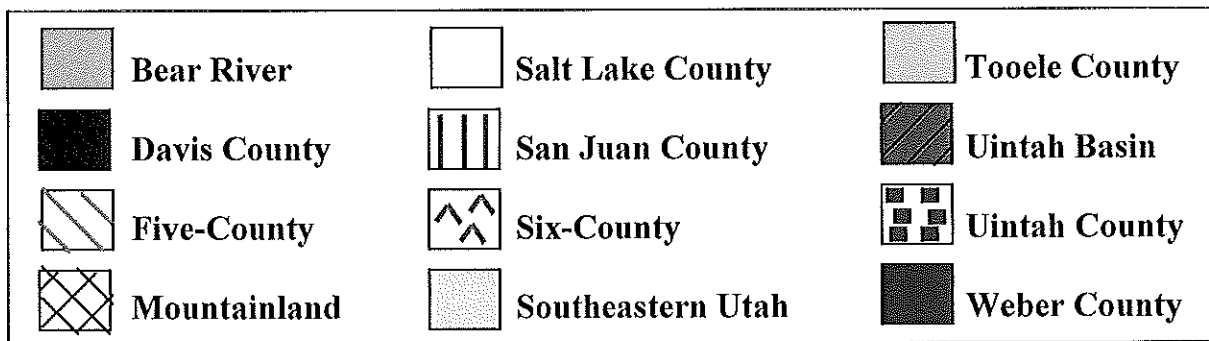
**Council on Aging/Golden Age Center --
(Uintah County PSA)**
Uintah County

Louise Martin, Director
155 South 100 West
Vernal, UT 84078
Phone: (435) 789-2169
Fax: (435) 789-2171
E-Mail: lmartin@co.uintah.ut.us

Weber Area Agency on Aging
Morgan, Weber

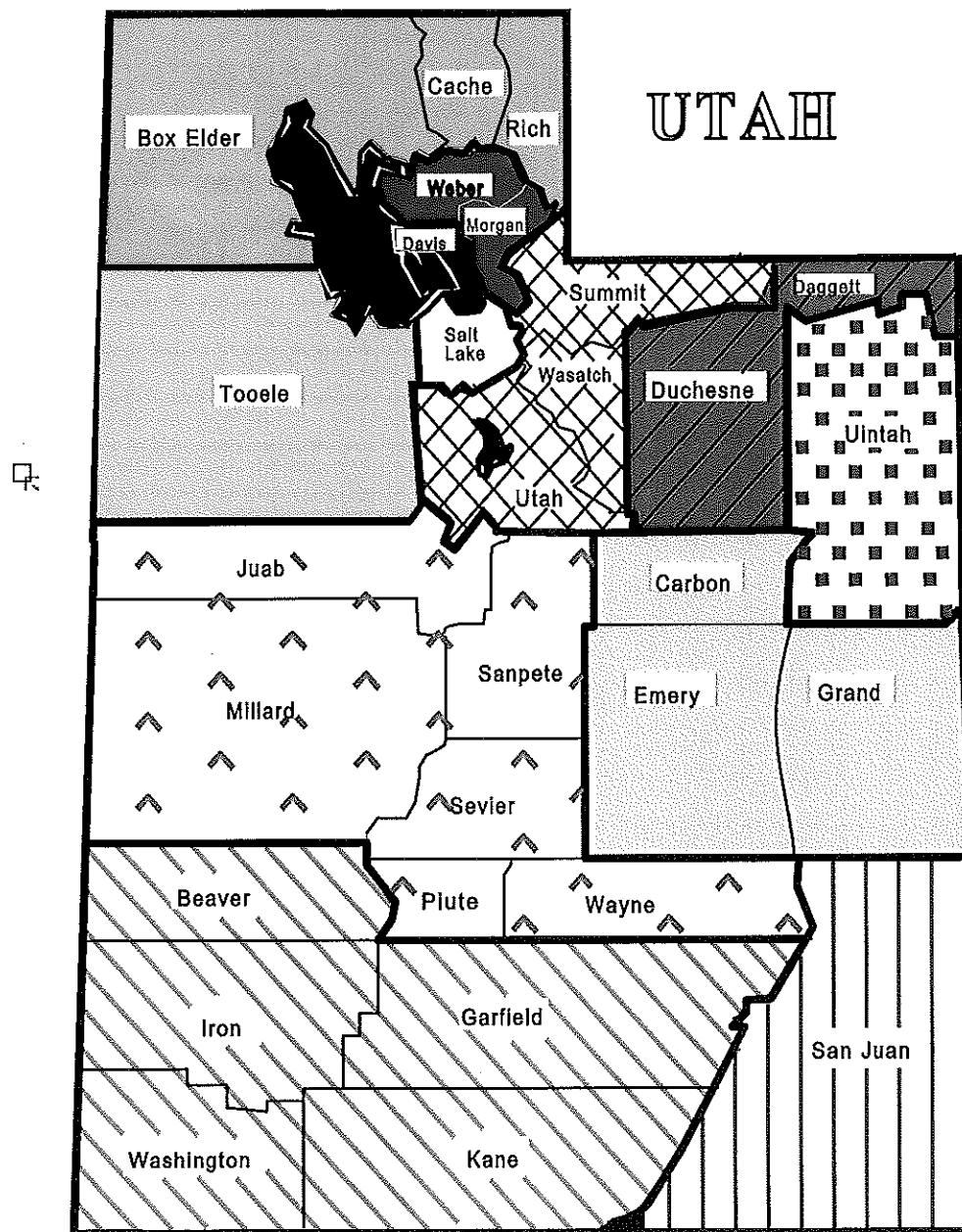
Kelly VanNoy, Director
237 26th Street, Suite 320
Ogden, UT 84401
Phone: (801) 625-3770
Fax: (801) 778-6830
E-Mail: kellyv@weberhs.org

Shared Lists/AAAs/AAA List



AREA AGENCIES ON AGING

Planning and Service Areas



ADULT PROTECTIVE SERVICES ADMINISTRATIVE OFFICES

195 No. 1950 WEST
SALT LAKE CITY, UTAH 84116
Phone: 801-538-3910
Fax: 801-538-4395

DIRECTOR: ADMINISTRATIVE SERVICES MANAGER: INFORMATION SPECIALIST IV: SENIOR BUSINESS ANALYST:	Nan Mendenhall Debbie Booth Susan Street	801-538-4591 801-538-4592 801-538-4339 801-538-4690
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TO MAKE A REFERRAL:

SALT LAKE COUNTY:	801-538-3567
ALL OTHER AREAS OF UTAH:	1-800-371-7897

ADULT PROTECTIVE SERVICES REGION OFFICES

NORTHERN REGION	CENTRAL REGION	SOUTHEAST REGION	
Director: Mark Perry	Director: Thomas Dunford	Director: Matthew Lyman	
Counties Served: Box Elder, Cache, Davis, Morgan, Rich, Weber	Counties Served: Salt Lake, Summit, Tooele, Wasatch	Counties Served: Beaver, Carbon, Daggett, Duchesne, Emery, Garfield, Grand, Iron, Juab, Kane, Millard, Piute, San Juan, Sanpete, Sevier, Uintah, Utah, Washington, Wayne	
Weber, Morgan	<i>Salt Lake</i>	Millard, Sanpete, Piute, Sevier, Wayne	
2540 Washington Blvd. 3 rd Floor Ogden, Utah 84401 Phone: 801-626-3385 Fax: 801-626-3153	168 No. 1950 West Ste. 203 SLC, UT 84116 Phone: 801-715-3425 Fax: 801-715-3428	835 East 300 North #700 Richfield, Utah 84701 Phone: 435-896-2791 Fax: 435-893-2054	
Davis	Summit, Wasatch	Utah, Juab	
1350 East 1450 South Clearfield, Utah 84015 Phone: 801-776-7300 Fax: 801-776-7383	1764 Prospector Avenue Park City, Utah 84060 Phone: 435-649-6018 Fax: 435-649-0351	150 East Center Street # 1500 Provo, Utah 84606 Phone: 801-374-7236 Fax: 801-374-7278	
Box Elder	Tooele	Daggett, Duchesne, Uintah	Carbon, Emery, Grand, San Juan
	305 North Main Tooele, Utah 84074 Phone: 435-833-7358 Fax: 435-833-7345	980 W. Market Drive Vernal, Utah 84078 Phone: 435-789-9336 x216 Fax: 435-789-6639	475 West Price River Dr. #262 Price, Utah 84501 Phone: 435-636-2394 Fax: 435-636-2397
Cache, Rich		Kane, Washington	Beaver, Iron
115 W. Golf Course Rd Ste B Logan, Utah 84321 Phone: 435-787-3425 Fax: 435-787-3444		359 Riverside Drive St. George, Utah 84790 Phone: 435-652-2922 Fax: 435-652-2929	106 North 100 East Cedar City, Utah 84720 Message Phone: 435-865-5660

Part VI

ADMINISTRATIVE STRUCTURE

PART VI: ADMINISTRATIVE STRUCTURE

A. LEGAL BASIS

Legal Basis for Single Organization
Utah Code Annotated 2005
Volume 3, Chapter 3, Part 1-p. 373

62A-3-102. Division created.

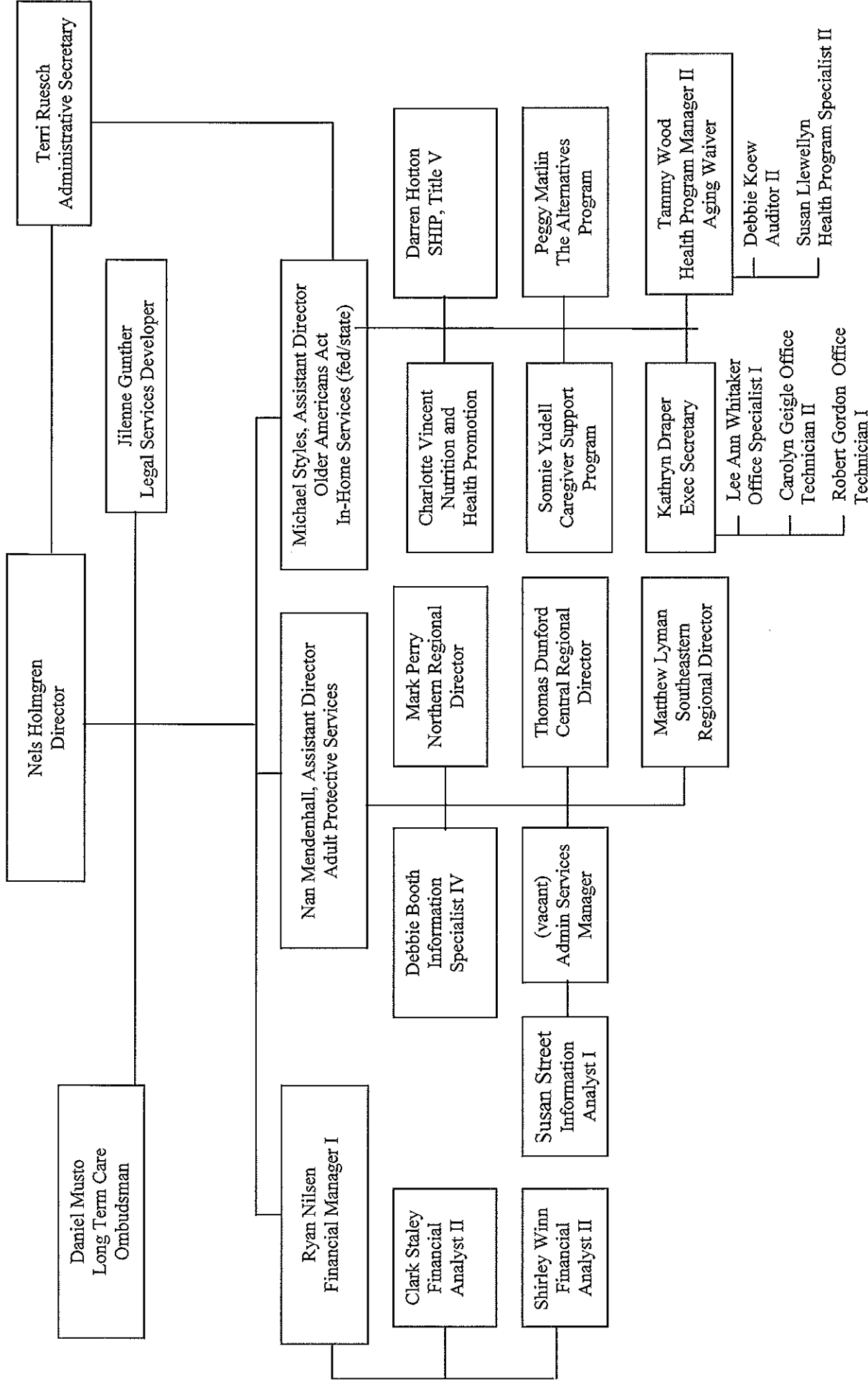
There is created a Division of Aging and Adult Services within the Department, under the administration and general supervision of the Executive Director of the Department.

62A-3-104. Authority of Division.

- (1) The Division is the sole state agency, as defined by the Older Americans Act of 1965, 42 U.S.C. 3001 et seq., to serve as an effective and visible advocate for the aging and adult population of this State, to develop and administer a state plan under the policy direction of the Board, and to take primary responsibility for state activities relating to provisions of the Older Americans Act of 1965.
- (2) (a) The Division has authority to designate planning and service areas for the State, and to designate an Area Agency on Aging within each planning and service area to design and implement a comprehensive and coordinated system of services and programs for the aging and adult populations of the State including, but not limited to, substitute care, nutrition services, access services, in-home services, legal services, day care, day treatment services, and protective services.
(b) That designation may be withdrawn upon request of the Area Agency on Aging or upon noncompliance with the provisions of the Older Americans Act of 1965, 42 U.S.C. 3001 et seq., the federal regulations enacted under that act, the provisions of this chapter, or the rules, policies, or procedures established by the Division.
- (3) The Division has authority to receive and distribute State and Federal funds for the Division's programs and services to the aging and adult population of the State.
- (4) The Division has authority to establish either directly or by contract, programs of advocacy, monitoring, evaluation, technical assistance, and public education to enhance the quality of life for aging and adult citizens of the State.
- (5) In accordance with the rules of the Division and Title 63, Chapter 56, Utah Procurement Code, the Division may:
 - (a) contract with the governing bodies of Area Agencies on Aging to provide a comprehensive program of services for aging and adult citizens of the State; and
 - (b) contract with public and private entities for special services.
- (6) The Division has authority to provide for collection, compilation, and dissemination of information, statistics, and reports relating to issues facing aging and adult citizens.

- (7) The Division has authority to prepare and submit reports regarding the operation and administration of the Division to the Department, the Legislature, and the Governor as requested.
- (8) The Division shall:
 - (a) implement and enforce policies established by the Board governing all aspects of the Division's programs for aging and adult persons in the State;
 - (b) monitor and evaluate programs provided by or under contract with the Division, Area Agencies on Aging, and any entity that receives funds from an Area Agency on Aging to ensure compliance with all applicable State and Federal statutes, policies, and procedures;
 - (c) examine expenditures of public funds;
 - (d) withhold funds from programs based on contract noncompliance;
 - (e) review and approve plans of Area Agencies on Aging in order to ensure compliance with Division policies and to ensure a statewide comprehensive program;
 - (f) promote and establish cooperative relationships with State and Federal agencies, social and health agencies, education and research organizations, and other related groups in order to further programs for aging and adult persons, and prevent duplication of services;
 - (g) advocate for the aging and adult population; and
 - (h) promote and conduct research on the problems and needs of aging and adult persons, and submit recommendations for changes in policies, programs, and funding to the Governor and the Legislature.

**B. Utah Division of Aging and Adult Services
Organizational Chart**



Updated 7/6/2007
F: Shared/Org Charts/DAAS Org Chart -MS Word

