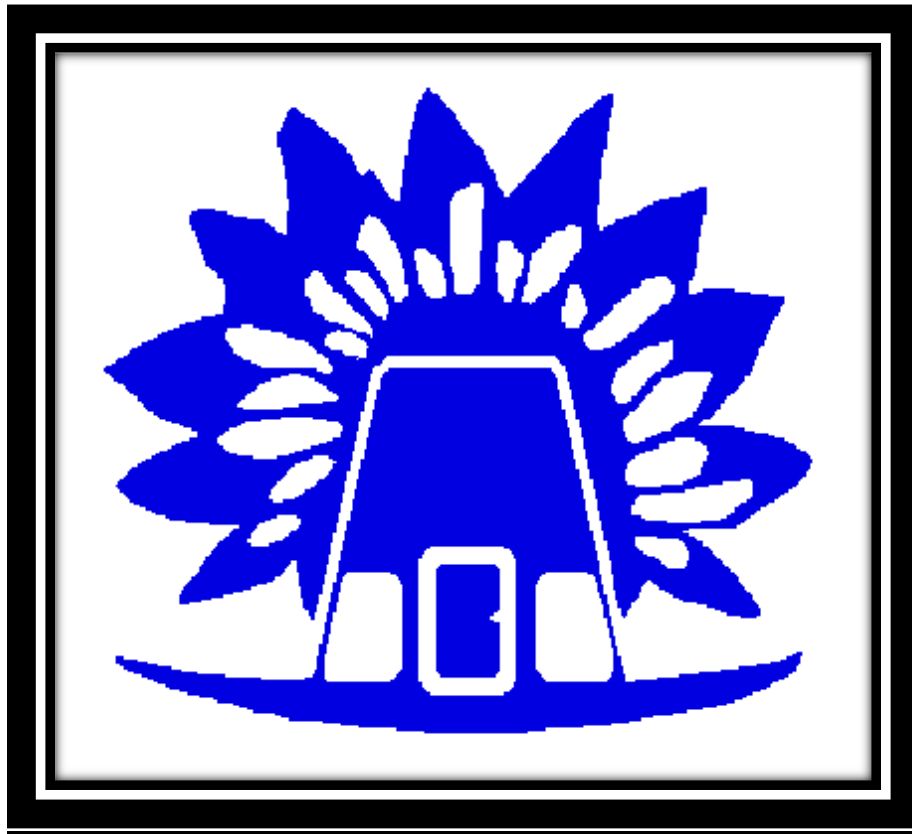


OLD COLONY PLANNING COUNCIL – AREA AGENCY ON AGING



2018-2021 Area Plan on Aging

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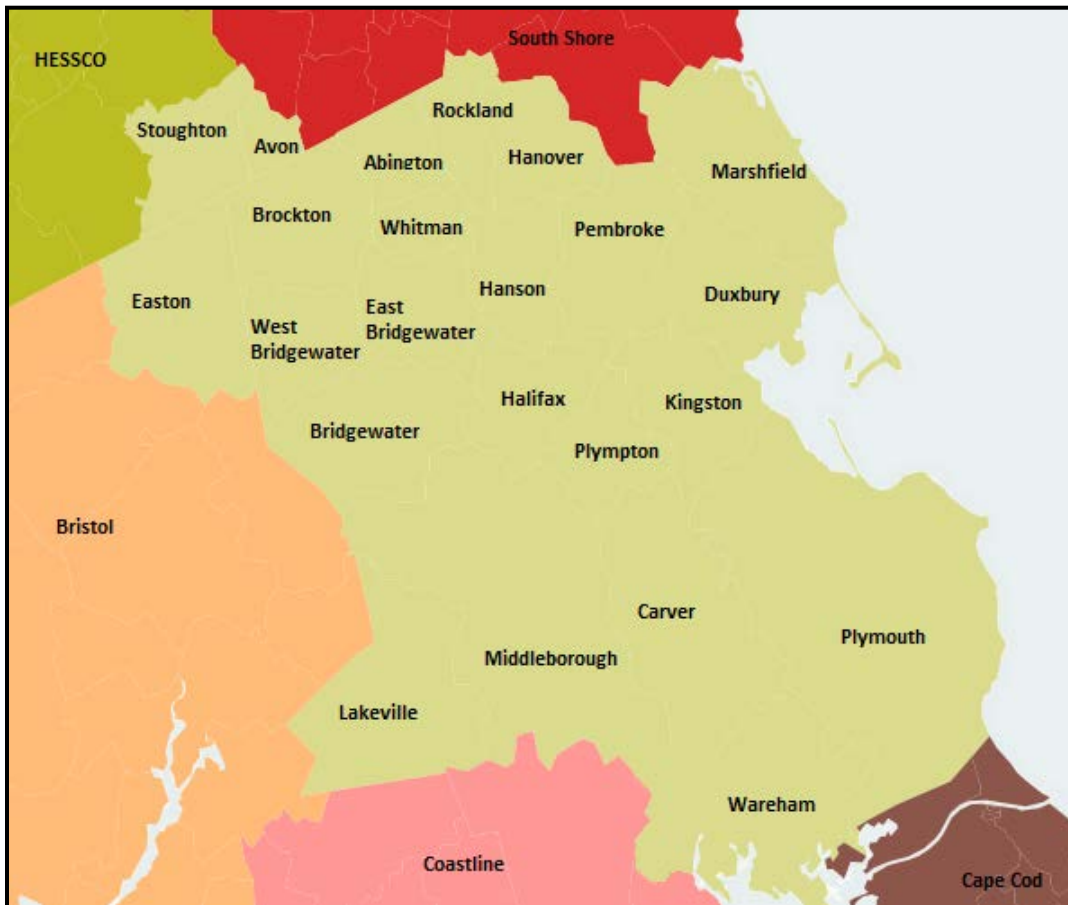
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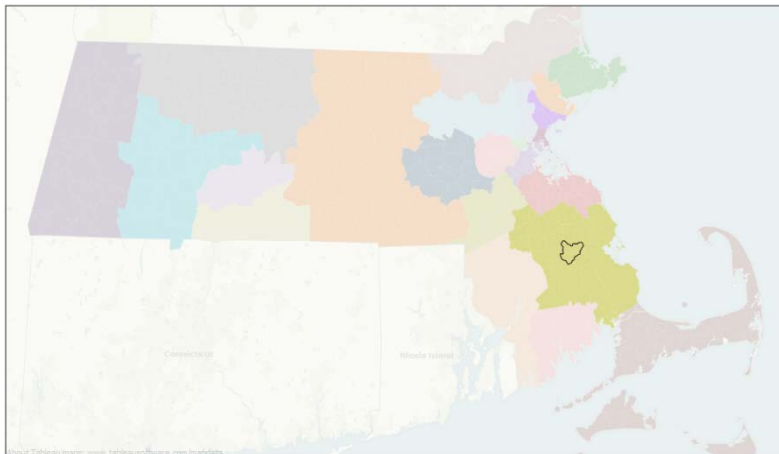
## Old Colony Planning Council Area Agency on Aging

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**Executive Summary:**

**Introduction:**

The Old Colony Planning Council-Area Agency on Aging (OCPC-AAA) is the designated entity responsible for administering Older Americans Act (OAA) funding in a 23-community region in Southeastern Massachusetts. We are partners with the Massachusetts Executive Office of Elder Affairs (EOEA), the U.S. Administration on Aging within the Administration for Community Living (ACL), and numerous public and private organizations and individuals that comprise the elder service network.

Our mission and purpose is driven by the vision of EOEA and ACL: *“To develop a comprehensive, coordinated and cost-effective system of home and community-based services that help elderly individuals maintain their health and independence in their homes and communities...and to ensure that elders in Massachusetts have the supports necessary to maintain their wellbeing and dignity.”*

**Needs Assessment:**

Part of our responsibility as an AAA is to maintain a comprehensive understanding of the greatest unmet or under-met needs of elders who reside in the region. This is accomplished through various means, including surveys of provider agencies and older people. Our most recent 2016 elder needs assessment project identified the following as significant needs for elders in our region:

1. Transportation
2. Homemaker
3. Affordable Housing
4. In-Home Personal Care
5. Information and Assistance

**ACL Focus Areas:**

In addition to the Title III funded service goals, the OCPC-AAA also works as a partner with various organizations in seeking to address the focus areas established by the ACL. Specifically, the OCPC-AAA seeks to address the needs of target elders in relation to OAA core programs, ACL discretionary grants, participant-directed/person-centered planning, and elder justice. We do so by requiring responding agencies to specify their plans for providing identified services to target group elders in the region. This Area Plan provides a detailed explanation of our efforts to address the established focus areas; either directly with Title III funded programs and services, and/or indirectly with administrative support to other agencies and programs working on these focus areas.

**Area Plan Goals and Objectives:**

Using the findings from the needs assessment, in conjunction with mandates from the OAA, and focus area concentrations established by the ACL, the OCPC-AAA has established the following service priorities for OAA funding for the region:

- Transportation
- In-Home Health and Supportive Services
- Legal Services
- Regional Family Caregiver Support
- Regional Nutrition Services
- Evidence-based Medication Management
- Evidence-based Mental Health Services
- Supportive Services to Target Populations

The OCPC-AAA places an emphasis on meeting the needs of “Target Group” elders in the region, defining target groups as elders who are low-income, minority, have limited English-speaking ability, disabled elders, and older people suffering from different forms of dementia, and their caregivers.

Our request for proposal process establishes minimum standards for addressing specific target group service provision requirements, and outlines goals for responding agencies in meeting the service requirements for the region. Proposals that do not meet this standard are not considered for funding.

**Quality Management:**

All Title III funded programs are required to maintain a level of performance and service that is monitored on an ongoing basis by the OCPC-AAA. Monitoring is accomplished by regular contact with grantee agencies, review and analysis of monthly program performance reports and funding requisition requests, and annual site visits. With this system, we monitor and track program performance in relation to the agency proposal and OCPC-AAA’s expectations for performance.

# 2018-2021 Area Plan on Aging

## **Introduction:**

The Old Colony Planning Council is the designated Area Agency on Aging (OCPC-AAA) for the 23-community region in Southeast Massachusetts known as Region IV-A. The OCPC-AAA is a working partner with the Massachusetts Executive Office of Elder Affairs (EOEA), and the federal Administration on Community Living (ACL). Through our role in this partnership, we seek to promote and advance the mission and vision of the ACL and EOEA:

*“To develop a comprehensive, coordinated and cost-effective system of home and community-based services that helps elderly individuals maintain their health and independence in their homes and communities” (ACL)*

*“To ensure that elders in Massachusetts have the supports necessary to maintain their wellbeing and dignity” (EOEA)*

These two brief statements describe the purpose, role, and focus of the OCPC-AAA.

The OCPC-AAA is one small part of an extensive network of government and private agencies, organizations and individuals that comprise the elder service network. This is a complex network of different programs and services, administered under different rules, guidelines, and eligibility criteria. Despite the complexity of the network, the above stated mission and vision provide a simple, straight-forward path for the efforts and focus of the network.

With this 2018-2021 Area Plan on Aging, we seek to outline our role and function in the Massachusetts elder service network, and provide a framework for achieving the goals of the mission and vision statement. This Plan presents a detailed explanation of our most recent elder needs assessment process, the goals and partnerships for addressing the focus areas of the ACL, the OCPC-AAA Area Plan goals and objectives for the next four years, and a summary of the quality management measures used to monitor program and agency performance.

## **Needs Assessment Process:**

The OCPC-AAA is responsible for administering Older Americans Act (OAA) funding in Greater Plymouth County. As part of this responsibility, we seek to maintain an ongoing understanding of the needs and issues facing older people from throughout the region. We accomplish this in various ways, including maintaining an understanding of existing elder service agency experiences and demands, the types of requests for information and assistance that different information and referral sources receive, the mandates and requirements of the OAA, and most importantly, the views, perspectives and needs of elders from the region. One method of gathering information directly from older people is to conduct periodic needs

assessment surveys in the region. Our most recent needs assessment project was conducted in 2016. A complete report of the 2016 Needs Assessment project is available on the OCPC web site (ocpcpa.org). Using different methodologies, the survey process identified the following as some of the greatest, most pressing needs of elders in the region:

1. Transportation
2. Homemaker
3. Affordable Housing
4. In-Home Personal Care
5. Information and Assistance

### **ACL/EOEA Focus Area Coordination:**

The ACL has asked State Units on Aging to address the following focus areas in their 2018-2021 State Plans (Older Americans Act Core Programs, ACL Discretionary Grants, Participant-Directed/Person-Centered Planning, and Elder Justice). EOEA has asked each AAA in the Commonwealth to respond to the specific focus areas, with particular emphasis on the focus area impact on particular target populations:

1. Living Alone (isolated) Elders
2. Low Income Elders
3. Minority Elder Populations
4. Native American Populations (where applicable)
5. Rural Elder Populations (where applicable)
6. Socially Isolated Populations (including limited English proficient elders)

1. **Older Americans Act Core Programs:** The Old Colony Planning Council-Area Agency on Aging (OCPC-AAA) has established the following service priorities for the 2018-2021 Area Plan on Aging:

- Transportation
- In-Home Health and Supportive Services
- Legal Services
- Regional Family Caregiver Support
- Regional Nutrition Services
- Long-term Care Ombudsman Services
- Evidence-based Medication Management/Healthy Living Services
- Mental Health Services
- Supportive Services to Target Populations

These service areas are identified as priorities for the region, based on existing demand for assistance, feedback and input from provider agencies, and regional elder needs assessment data. These service areas are similar to those identified over the past twenty years in the region, reflecting ongoing needs in these important areas.

The majority of Title III funding that is administered by the OCPC-AAA goes to programs designed or intended to address the needs of “target population” groups. For example, 59% of all Title III-B funding (\$176,200) is applied to the categories of In-home Health and Supportive Services, Legal Services, and Supportive Services to Target Populations. Programs funded under these categories have specific target population goals (low-income, minority, economically and socially isolated), and specific unit of service provision requirements. The majority of service provision from these service categories is to elders in the identified target groups. The OCPC-AAA currently provides limited funding (\$9,000) to one minority-owned and operated agency (Cape Verdiana De Brockton) for the specific purpose of outreach and assistance to minority elders in Brockton and surrounding communities. Also, the OCPC-AAA provides approximately \$7,000 in Title III-B funding for the purpose of subsidizing the cost of Social Day Program attendance for low-income elders (low-income, isolated). Additionally, the OCPC-AAA provides funding to support the Dorn-Davies Senior Center, a private, non-profit agency that is housed in one of the public housing high-rise facilities in Brockton. This program serves target population elders (low-income, minority, socially and economically isolated) from Brockton and surrounding communities. During FFY 2016, the above noted “target” programs provided more than 36,000 units of service to approximately 3,400 unduplicated elders, all of whom are considered to fall into one of the “target population” groups.

Additionally, the OCPC-AAA provides funding for emergency assistance and service to disabled elders. In FFY 2016, the OCPC-AAA provided approximately \$114,000 in Title III-B funding for these two service categories, generating more than 2,000 units of service to approximately 150 unduplicated elders. It is noted that in the category of emergency assistance, the majority of the funding (90%) was used for critical financial assistance to ensure basic survival (heating oil, food, medication). The emergency assistance program is for elders who are in an emergency situation that cannot be addressed through any other sources. It is our contention that the elders served through this program all fall into one of the “target population” categories.

The OCPC-AAA believes that the current service priorities for the region reflect some of the most critical, unmet or undermet needs of the “target population” elders in the region. It is our hope and expectation that existing programs will continue to strive to meet the needs of the target groups, with the understanding that any increase in Title III- funding will include an increase in service provision, where possible.

## 2. **ACL Discretionary Grants:**

As noted in the 2018-2021 Area Plan priorities, the OCPC-AAA has established Medication Management/Healthy Living as a formal category of Evidence-based Disease and Disability



Prevention Program (DDPP) priorities for the region. The establishment of this priority is based on ongoing need and demand for such service and activity in the region. During FFY 2016, the OCPC-AAA provided 100% of our III-D allocation (\$24,940) for the purpose of funding medication management/Healthy Living. In FFY 2016, this program provided 34 units of service to 19 unduplicated elders.

The OCPC-AAA views medication management/Healthy Living as a critically important component of the community-based supportive service system in our region. Feedback from clients and providers continually highlight the importance and necessity of this type of assistance for helping to keep some of the most at-risk elders living in their own homes in as safe and reasonable a manner as can be provided. While the OCPC-AAA has established the DDPP category of Medication Management/Healthy Living as a priority in the region, we also acknowledge the value and importance of other types of DDPP (Healthy Eating, Matter of Balance, Chronic Disease Self-Management). Although our Title III funding priorities are focused on medication management/Healthy Living, we are open to consider proposals from the local ASAP (Old Colony Elder Services) for the provision of service related to Health Eating, Matter of Balance, and Chronic Disease Self-Management.

### **3. Participant-Directed/Person-Centered Planning:**

As an organization dedicated to advocating for the needs and rights of older persons, the OCPC-AAA wholeheartedly supports the concept of participant-directed/person-centered planning and service/care decision making (PDPC). We believe that all decisions regarding community-based care and support, to the extent possible, should be made by the older person. It is our expectation that all Title III funded programs in the OCPC-AAA region will continue to give elder participants final decision making authority in terms of whether or not to receive service, the type and amount of service, the specific details of the service plan, etc. That said, not all community-based programs and services lend themselves well to PDPC. For example, limited funding often limits the amount of service available. Also, eligibility criteria for different programs and services will often limit who can receive service, and the extent of service that can be provided. Nevertheless, the OCPC-AAA supports the concept of allowing older persons the latitude to choose what is best for them.

As part of the regional response to this focus area, the OCPC-AAA asked our elder service network partner Old Colony Elder Services (regional ASAP) to provide a summary of their activities and efforts relative to this issue. Their response is provided here:

### **4. Elder Justice:**

As an Area Agency on Aging, the OCPC-AAA views elder justice issues as paramount to the work of the aging network. Too often, the frailest, most vulnerable older people in our society are harmed and/or exploited by others. The OCPC-AAA supports the efforts of all the different components of the network of elder justice providers (Adult Protective Services, law

enforcement, LTC Ombudsman, legal assistance, etc.) to address such issues. While the OCPC-AAA does not provide Title III funding for all these different components, we wholeheartedly support their efforts and are always willing to work in partnership to eliminate abuse, neglect, and exploitation.

The OCPC-AAA currently administers the Long-Term Care Ombudsman (LTCO) program for our region. In FFY 2016, the OCPC LTCO provided approximately 1,500 visits, generating 95,000 contacts with residents in 39 different facilities in the region. The program is staffed by 2.5 FTE's, and 14 volunteers, and puts in more than 12,000 hours per year just in LTC visits, plus additional time for administrative duties and responsibilities. The program utilizes \$113,000 in Ombudsman funding, \$8,000 in Title III funding, and a significant matching share provided by the volunteers. The program expects to generate similar service provision levels in FFY 2017. The OCPC believes strongly in the purpose and mission of the program, and most importantly the impact that the work has on the lives of the residents. The program empowers residents by providing advocacy, support, guidance, and problem resolution. More importantly, the program helps to provide residents with peace of mind and a sense that they remain important and valued members of the community.

As noted, the OCPC-AAA does not provide funding for the Adult Protective Services (APS) program in our region, but our LTC Ombudsman program maintains ongoing referral relationships Adult Protective Services, local law enforcement, Attorney General's office and others.

As noted, the OCPC-AAA serves on the Advisory Board for the regional Money Management Program. This program seeks to assist elders who require help with basic bill-paying and budgeting.

The OCPC-AAA provides \$100,000 in Title III-B for Legal Services in our region. This amount represents almost 28% of all Title III-B funding available to the region. This high percentage of funding for legal assistance is, in part, driven by State requirements, but is also a reflection of the importance of this type of assistance for a region like ours that has a large concentration of low-income and minority elders. In FFY 2016, the Legal Services program provided 1,613 hours of legal assistance to 167 unduplicated elders. Of the elders served, 22% were minority, 19% were low-income minority, and 63% of all clients served were low-income. The main categories for legal assistance were in the areas of housing (41% of all cases), public benefits (20% of all cases), and health and health insurance issues (9% of all cases). We anticipate similar service provision levels for the upcoming fiscal year (2017). It is our contention that the legal issues addressed and resolved by the legal assistance program would not have been resolved favorably for the elder without the assistance provided by the program. It is also our contention that the formal avenue to justice for elders provided through the program is an absolute necessity for our region. We continue to view the Legal Assistance program as one of our most important and impactful Title III funded programs in the region.

As part of the regional response to the four established focus areas, the OCPC-AAA asked our elder service network partner Old Colony Elder Services (regional ASAP) to provide a summary of their activities and efforts relative to the issues identified. Their responses are provided here:

**Feedback for the MA State Plan on Aging, 2018-2021**  
**Title III/Person -Centered Care planning Focus Area:**

**1. The Family Caregiver Support Program:**

- Music & Memory (M&M)– This will expand FCSP in two key ways. With M&M as a new offering, FCSP will reach additional caregivers and two people from Healthy Living (HL) will be completing caregiver assessments as part of the M&M protocol. M&M is non-threatening and we expect it to increase referrals to FCSP. M&M is an intervention that can be used universally – there are no cultural or language barriers.
- Savvy Caregiver – This new evidence-based class will reach additional caregivers and will provide significant support to caregivers of loved ones with dementia, helping to keep elders in the community.

**2. The Nutrition Program:**

- Kennedy meal site- Our plan is to open this new Community Dining Site as soon as the Brockton Housing Authority has their kitchen/dining area ready. This will bring the Nutrition Program to an additional public housing site in Brockton and will support elders living alone, low income elders, minority elders and socially isolated populations.
- Culturally-focused initiatives – The Haitian meal site and the Caribbean meal program will continue, in part through a one-time grant from MOWA. These serve all of the populations identified in the AAA focus area with the exception of #4,5. Opportunities for additional support will be pursued as they arise.
- Nutrition Education – Nutrition education presentations are scheduled throughout our catchment area, regardless of whether they are OCES meal sites. Individual in-home consultations are conducted when needed. In FFY18, a sharp focus will be on pay-for- service through insurance plans.

### **3. The Healthy Living Programs:**

- Honoring Choices (HC)- (Title IIID supports a number of Healthy Living expenses) - With 4 certified Honoring Choices facilitators, we will continue to offer group presentations. In FFY18, we will expand internally to training HC CMs. HL is funded in part by Title III and HC supports Person-Centered Planning.

### **4. The Home Care Program:**

- Home Care (HC) staff/I&R staff participated in BU CADER courses.
- I&R/Options Counselor's (OC) and Transition staff completed ACL No Wrong Door/ PCCTP courses.
- OCs provide short term assistance with consumer-directed decision support. We would like to expand this program to work with more hospitals to support safer discharges home.
- OCES is member of ADRC SE SM and supports No Wrong Door and Person Centered Counseling (PCC). ADRC supports all ages; elders, individuals living with disabilities and their caregivers.
- OCES has SHINE certified benefits advisors.
- HC also has experience administering/delivering person centered planning through the Consumer Directed Care (CDC) delivery option and the Veteran's Independence Plus (VIP) programs that offer individualized flexible care planning.
- Experience collecting consumer satisfaction data and incorporating feedback into practice.
- Transitions staff have successfully participated in Money Follows the Person (MFP) to promote safe transitions from skilled nursing facility care to community living with LTSS, incorporating consumers' needs and preferences.

#### **Elder Justice:**

### **1. The Protective Services Program:**

- PS staff participated in BU CADER courses; specifically around interdisciplinary care teams/planning, mental health and substance abuse issues and dementia. In addition, a few members of PS will attend a training at the end of the month regarding Elder Bullying. New PS staff has attended Basic Training for Protective Services.

- PS has access to a new FAST team for difficult financial exploitation cases.
- PS/MMP have assisted in community outreach to include issues regarding SCAMs.
- PS has provided specific community outreach to several banks this year on financial exploitation.
- PS is planning on assisting in doing trainings on elder abuse and protective services to local law enforcement.
- OCES is a founding member of The Brockton Area Hoarding Task Force (GBAH) which meets regularly to share community resources and educational events. This collaboration assists PS staff with effective strategies to engage with consumers with hoarding concerns from a **person-centered planning** perspective, using a harm reduction model. The GBAH also utilizes the interdisciplinary model to have other agencies representatives brainstorm solutions and offer referrals and guidance. We are currently able to offer two support groups in two locations for consumers who suffer with hoarding issues. One in Brockton and one in Plymouth the Buried in Treasures (BIT) support group. Our Intensive Care Manager assists with being a member of the task force and works closely with PS, and HC to assist with these difficult hoarding cases. We are also offering a 'sorting and discarding' training for professionals in May at OCES. We will continue with professional outreach for the GBAH on the topic of hoarding. We plan to have a professional development in the fall to continue to discuss the issues with hoarding for the individual and for the community.
- OCES PS staff also participate in the Plymouth Cares (Triad), The Brockton Triad and The Senior Safety Task Force to strengthen community collaborations around elder safety concerns. This has helped enhance OCES and PS relationships with the Council on Aging, Law enforcement and other relevant agencies.
- OCES PS staff are also active in the Plymouth County Suicide Prevention Coalition. PCSPC has assisted with training several OCES staff on QPR and hosted ASIST trainings. We will be offering Mental Health First Aid in April.
- OCES PS participate in events to promote elder justice issues by sponsoring two events in the greater Brockton and Plymouth areas

to recognize World Elder Abuse Awareness Day and bring awareness to the communities. This has also helped enhance OCES and PS relationship with local law enforcements for collaboration, trainings on Protective Services and Elder Abuse, mandated reporting, and consultation. We have done a mass emailing campaign for our consumers that receive HDM's in order to assist with educating them on the signs and symptoms of elder abuse.

## **2. The Nutrition Program:**

- MAMOW Driver Training video (scheduled for 9/30/17 completion) – This is a Nutrition Program initiative that directly relates to “Elder Justice” and will be rolled out to all volunteers and employee drivers and will be part of on-going Nutrition Program Driver Training. It addresses all procedures including the safety check and reporting issues/problems to MSMs.
- Meals on Wheels – Continuing and expanding MOW contributes to the focus on elder safety by providing for regular contact with elders.

### **Ways we would like to expand programming in Title III/Person -Centered Care Planning if we had additional Funding:**

#### **1. Nutrition Program:**

If we had additional funding, we would like to expand the nutrition program in the following ways:

- Some of the COA's that have their own program are not able to offer meals 5 days/week. We would be interested in exploring how to supplement this.
- We would like to target more of the cultures we serve to offer culturally sensitive/appropriate meals. We have done this very successfully with a 2x/week Caribbean meal and we have 1 Haitian Meal site but we would like to expand and increase the types of cultures served and offer at more housing locations to ensure accessibility to these meals. We would need access to additional funding to do this in a sustainable manner.
- Increase access to nutritionally fresh foods

#### **2. The Home Care Program:**

If we had additional funding, we would expand the HC Program to offer:

- Additional financial supports for individuals w/ disabilities under age 60
- We would expand our abilities to meet the unmet needs for housing and funding to preserve housing
- Additional assistance with the extreme costs associated with hoarding situations and preservation of housing.
- Reduce the cost of transportation
- Expand transportation resources
- Expand resources to address socially isolated elders, including limited English proficient elders
- Support aging in place resources/services with increase access to LTSS services or social supports identified by consumer that are not funded through ASAP contracts
- Increase dementia friendly communities
- Access to affordable health care and medications

**Ways we would like to expand Elder Justice programming:**

**1. The Protective Services Program:**

If we had additional funding, we have identified ongoing needs in the following areas that we would like to develop:

- Elder abuse shelters (in facilities or outside, to meet elders' care needs)
- Expand elder abuse taskforces
- Expand Outreach for PS- could include banks, medical doctors, ER, and law enforcement
- All of the cities and towns learning and implementing 'silver alerts'
- Expand public guardianship slots to serve more people
- Develop & distribute domestic violence resources/supports specifically for elders
- Develop or partner with others on substance abuse centers that are specific to meet elders' needs
- Develop/expand hoarding programs.
- Expand resources to address socially isolated elders, including limited English proficient elders
- Expand resources to provide assistance with loneliness/isolation (i.e. friendly visitor programs)

### **Area Plan Goals and Objectives:**

As noted, the OCPC-AAA views its role and responsibility as that of furthering the mission and vision of the ACL and EOEA:

*“To develop a comprehensive, coordinated and cost-effective system of home and community-based services that helps elderly individuals maintain their health and independence in their homes and communities” (ACL)*

*“To ensure that elders in Massachusetts have the supports necessary to maintain their wellbeing and dignity” (EOEA)*

Using data and feedback from the needs assessment project, as well as mandates from the OAA, the OCPC-AAA has established the following priorities for the 2018-2021 Area Plan:

- Transportation
- In-Home Health and Supportive Services
- Legal Services
- Regional Family Caregiver Support
- Regional Nutrition Services
- Long-Term Care Ombudsman Services
- Evidence-based Health Promotion Services
- Mental Health Services
- Supportive Services to Target Populations

These priorities are established through a combination of OAA mandates, focus area efforts, ongoing service needs and requests, and feedback and input of elders from the region. These priorities are the basis for Title III grant funding for the region, and establish the overall service provision objectives for the region. The OCPC-AAA conducts an intensive Request for Proposal (RFP) process which outlines specific service priorities (listed above), and attaches Title III funding amounts and minimum service provision requirements for responding agencies.

For example, in the service category of transportation, we established the total grant funding amount as \$32,000, with a minimum provision requirement of 3,307 units of Transportation (one-way trips) to a minimum of 3,275 unduplicated elders. These minimum requirements are based on prior-year’s funding and provision levels, OAA service provision requirements, and the desire to maintain or exceed existing service provision in critical programming categories.

A second example is Legal Services. The OCPC-AAA established a specific Title III grant amount of \$100,000 for FFY 2017, with a minimum service provision requirement of 1,195 units (hours) of Legal Assistance to a minimum of 410 unduplicated elders. Again, these minimum requirements are based on prior-year’s funding and provision levels, OAA service provision requirements, and the desire to maintain or exceed existing service provision in critical programming categories. It is important to note that the funding level established for Legal Services is actually in excess of the minimum amount established by EOEA. The reason for this



is that the OCPC-AAA region has a high concentration of low-income and minority elders who benefit greatly from the efforts of the Legal Services program. As such, the OCPC-AAA views this program as a priority for meeting critical needs of target group populations.

In the above two examples, the projected service provision amounts are the quantifiable objectives. All the service priority categories have similar service provision levels which are used to establish Area Plan objectives.

**Quality Management:**

The Old Colony Planning Council is proud to be designated as the Area Agency on Aging for the region. We view our designation as an honor and privilege, and strive to meet the responsibility in a professional and efficient manner. Our role as an AAA, while primarily dictated by administrative rules and regulations from the OAA, EOEA, and the ACL, is intimately and most directly rooted in the lives of the older people of the region. We value the trust and authority placed on us by EOEA and the older people of the region and take the responsibility seriously. With our designation as an AAA, we strive to ensure that the basic necessities for community living are available to all elders. We recognize the critical standard that public agencies must meet to maintain the trust of the public. It is for this reason that we place a high standard of performance and expectation on Title III funded grantee agencies.

All Title III funded programs are required to maintain a level of performance and service that is monitored on an ongoing basis by the OCPC-AAA. Monitoring is accomplished by regular contact with grantee agencies, review and analysis of monthly program performance reports and funding requisition requests, and annual site visits. With this system, we monitor and track program performance in relation to the agency proposal and OCPC-AAA's expectations for performance. The use of public funding for elder services is a great responsibility, and we strive to ensure that grantee agencies understand this responsibility, and meet the level of performance expected by the ACL, EOEA, OCPC-AAA, and most importantly, the older people of the region.

# Attachments A through H:

**Attachment A: Area Agency on Aging Assurances and Affirmation**

*For Federal Fiscal Year 2014, the Area Agency on Aging makes the following assurances as required by the Older Americans Act of 1965 as amended, and all relevant regulations:*

1) 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, outreach, information and assistance, and case management services);

(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance;

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. ((a)(2))

(2) Each area agency on aging shall provide assurances that the area agency on aging will set specific objectives for providing services to older individuals with greatest economic need and older individuals with greatest social need, include specific objectives for providing services to low-income minority individuals and older individuals residing in rural areas, and include proposed methods of carrying out the preference in the area plan. ((a)(4)(A)(i))

(3) Each area agency on aging shall 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:

(A) specify how the provider intends to satisfy the service needs of low-income minority individuals and older individuals residing in rural areas in the area served by the provider;

(B) to the maximum extent feasible, provide services to low-income minority individuals and older individuals residing in rural areas in accordance with their need for such services; and

(C) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals and older individuals residing in rural areas within the planning and service area. ((a)(4)(A)(ii))

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

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

(B) describe the methods used to satisfy the service needs of such minority older individuals; and

(C) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i). ((a)(4)(A)(iii))

(5) 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:

(A) older individuals residing in rural areas;

(B) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(C) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(D) older individuals with severe disabilities;

(E) older individuals with limited English-speaking ability; and

(F) older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and inform the older individuals referred to in (A) through (F), and the caretakers of such individuals, of the availability of such assistance. ((a)(4)(B))

(6) 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. ((a)(4)(C))

(7) 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, with agencies that develop or provide services for individuals with disabilities. ((a)(5))

(8) 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. ((a)(9))

(9) 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. ((a)(11))

(10) 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. ((a)(13)(A))

(11) Each area agency on aging shall provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State agency:

(A) 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

(B) the nature of such contract or such relationship. ((a)(13)(B))

(12) 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. ((a)(13)(C))

(13) 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.  
((a)(13)(D))

(14) 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. ((a)(13)(E))

(15) 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. ((a)(14))

(16) Each area agency on aging shall provide assurances that preference in receiving services under this title will not be given by the area agency on aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title.  
((a)(15))

*The undersigned acknowledge the Area Plan Assurances for Federal Fiscal Year 2014 and affirm their Area Agency on Aging's adherence to them.*

Old Colony Planning Council AAA

(Area Agency on Aging)

\_\_\_\_ (Signed) \_\_\_\_\_  
(Date) (Chairperson of Board of Directors)

\_\_\_\_ (Signed) \_\_\_\_\_  
(Date) (Chairperson of Area Advisory Council)

\_\_\_\_ (Signed) \_\_\_\_\_  
(Date) (Area Agency on Aging Executive Director)

**Attachment B: Area Agency on Aging Information Requirements**

**Section 306 (a)(4)(A)(i)**

*Describe the mechanism(s) for assuring that the AAA will:*

(aa) Set specific objectives, consistent with State policy, for providing services to older individuals with the 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 older individuals, older individuals with limited English Proficiency, and older individuals residing in rural areas: The Older Americans Act (OAA) identifies the following target groups: Older Individuals with the greatest economic need and social need, with particular attention to low-income minority elders and rural elders, older individuals with limited English-speaking ability, older individuals with severe disabilities, and older individuals with Alzheimer’s Disease and related disorders. In keeping with the language and intent of the Older Americans Act, The OCPC-AAA seeks to provide Title III funding for services and programs that address the needs of older persons in the all the target groups noted above. Our strategy is to identify and engage agencies and individuals in the region who have unique access to and/or involvement with older persons in the target groups.

The OCPC-AAA region is comprised of 23 communities, with a total population of 472,076 persons. The U. S. Census indicates that there are 90,599 persons age 60 and over in the region, and 8,382 persons age 85 and over. Plymouth County Census data estimates indicate the approximate ethnic composition of the region to be as follows:

Caucasian =	87%
Black =	8%
Native American =	less than 1%
Asian=	1.6%
Native Hawaiian and Other Pacific Islander	less than 1%
Some Other Race=	4%

*(American Fact Finder, 2010)*

The highest concentration of low-income and minority persons is in the greater Brockton Area. With the Brockton area having the greatest concentration of target populations for the region, and the greatest number of older persons in the region as a whole, the OCPC-AAA seeks to provide funding to agencies and programs in the area that can most effectively address the needs of the identified target groups. As such, the OCPC-AAA provides grant funding to organizations that are uniquely suited for this role. Some examples of agencies and programs that receive funding for specific target population services are Catholic Charities South, Cape Verdian Association, the LIFE Center, the Dorn-Davies Senior Center, Old Colony Elder Services Emergency Assistance, and Legal Services. Each of the agencies identified above have clientele that are comprised primarily of target group older individuals. For example, the Cape Verdian Association is a well-known and trusted resource for a significant portion of the Cape Verde immigrant population, including older individuals. The LIFE Center is an organization dedicated to serving disabled persons of all ages. The Dorn-Davies Senior Center is a service agency located in one of the elder high-rise public housing facilities in the City, with a large



concentration of target population older individuals. All these agencies have been in the Brockton area for over 20 years, and have a history of service to the target groups. Each of these agencies has submitted a proposal to the OCPC-AAA identifying specific service objectives for the FFY 2018 year. These objectives, which are summarized in Attachment F of this document, comprise the OCPC-AAA service objectives for target populations for the upcoming year. Total service unit projections (objectives), by agency, are identified below:

- Catholic Charities South – 1,800 units of service (various categories) to 1,219 unduplicated elders, 953 of which will be low-income and/or minority.
- Cape Verdian Association – 955 units of service (various categories) to 60 unduplicated elders, all of whom will be low-income and minority.
- LIFE Center – 1250 units of service (various categories) to 28 unduplicated elders, all of whom will be low-income and disabled.
- Dorn-Davies Senior Center – 21,700 units of service (various categories) to 2,950 unduplicated elders, all of whom will be low-income and/or minority.
- OCES Emergency Assistance –
- Legal Services -

Predictions on the determination of low-income status and minority status are based on the past experience of the agencies and programs identified. Low-income status is often estimated.

The OCPC-AAA does not suggest or imply that the Title III funded programs identified above are able to address and remedy all needs of the identified target populations. Nor does the OCPC-AAA suggest that all persons served under these programs are from the identified target groups. It is simply our contention that these agencies and programs are the best option available for trying to address the needs of the target groups.

It is critically important to note that because the OAA prohibits means testing for Title III services, it is simply not possible to guarantee that the most economically needy older individuals are served. Title III resources are limited, service is provided on a first-come-first-served basis, and to the extent possible, no one over the age of 60 can be denied service. As such, limited resources will only go so far, and they may not go far enough to address all the needs of target group older individuals.

No portion of the OCPC-AAA region (Region IV-A) is considered rural.

**Section 306 (a)(5)**

*Include information detailing how the AAA will:*

Provide assurances that the Area Agency on Aging will coordinate planning, identification, assessment of needs, and provision of services to 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;

As noted, the OCPC-AAA places emphasis on the target populations identified by the OAA, including disabled elders. This segment of the elder population is a growing concern for the network, as is evidenced by the establishment of the Aging and Disability Resource Centers (ADRC's). Additionally, the OCPC-AAA currently provides limited Title III funding to two (2) agencies/programs that specifically serve disabled elders. These agencies/programs include the Living Independently for Equality (LIFE) Program in Brockton that provides recreation, socialization, education, and meals to wheel-chair bound people from Brockton and surrounding areas. This program serves disabled persons of all ages, including people over the age of 60. The OCPC-AAA also provides limited grant funding to New England Homes for the Deaf for the operation of a regional deaf senior center located in Quincy. Although this center is out of our geographic region, we have deaf seniors from our area that attend the center regularly. In addition to the two programs identified above, all other Title III funded programs and services are expected and encouraged to address the needs of disabled elders, to the extent possible. The OCPC-AAA supports the efforts of OCES and their Southeast Coalition in striving to provide Disease Prevention/Health Promotion services. More information about the OCES efforts is included in the body of the Area Plan.

**Section 306 (a)(6)**

*Describe the mechanism(s) for assuring that the AAA will:*

(A) Take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan; (B) serve as an advocate and focal point for older individuals within the community by (in cooperation with agencies, organizations, and individuals participating in activities under the plan) monitoring, evaluating, and commenting upon all policies, programs, hearings, levies, and community actions which will affect older individuals.

The OCPC-AAA is one component of a very large, diverse elder service network in the region. The most important and critical component in this mix are the views and opinions of needy elders. The OCPC-AAA views the perspective of older people as our primary and guiding principle. We solicit their views through public hearings, advisory committee participation, and regional needs assessments. The OCPC-AAA priorities are shaped and guided by a variety of sources including past needs, provider feedback, and mandates and focus areas of the Administration for Community Living (ACL) and the Executive Office of Elder Affairs (EOEA). However, the most important perspective will always be that of the older people of the region.

This service network is comprised of public and private organizations, both for profit and non-profit. This network includes the local councils on aging (COA's), the regional Aging Service Access Point (Old Colony Elder Services), hospitals, physicians, nursing homes and rest homes, home health agencies (VNS's), day programs, and many others. The most important component of this network is the elders themselves. All of these component parts have a voice and/or opinion regarding policies and operations of elder services. The OCPC-AAA welcomes and encourages public input on any and all matters related to elder issues.

While the OCPC-AAA does not have administrative or decision-making authority over partner agencies, we view our relationship with them as one of cooperation and support within the entire

network. Ultimately, in the view of the OCPC-AAA, the elder service network is working towards the same goal: keeping elders safe, healthy, and independent in their homes and communities for as long as possible, hopefully for the remainder of their lives. We view this as the ultimate goal of the elder service network, and seek to support this notion and advocate for the policies that best achieve this goal. Ultimately, we view the highest level of authority and influence in the elder service network as EOEA. EOEA has credibility, influence, and impact greater than the OCPC-AAA. As such, we forward our comments, perspectives, and opinions to EOEA as the filter, and ultimately, the appropriate entity for any and all formal advocacy, public comment, and legislative efforts. As part of our responsibility, the OCPC-AAA continually seeks input from Advisory Committee members, OCPC Board of Directors, provider agencies, and most importantly, the older people of the region. When and where appropriate, we forward such comments and perspectives to our network legislative advocate, Mass Home Care, and EOEA.

### **Section 306 (a)(7)**

*Include information detailing how the AAA will:*

(7) provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by-(A) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care. (C) implementing, through the agency or service providers, evidence-based programs to assist older individuals in making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals.

As noted, the OCPC-AAA is one component of a much larger, diverse network of providers and agencies that server older people in the region. The general consensus amongst the elder service network, as is confirmed by numerous academic studies, is that people wish to remain independent, in their own homes for as long as possible. The State of Massachusetts has taken a proactive approach to this matter, with the majority of the service network working to ensure that community-based care and support exists in the manner and volume that can sustain the community-first philosophy. The network that exists operates under different rules, regulations, and guidelines, depending on the agency and service. The OCPC-AAA does not necessarily have decision making authority over the myriad agencies and programs that comprise the elder service network, only Title III related matters relevant to the OCPC-AAA. That said, the OCPC-AAA still has an advocacy role for all older people in the region. To the extent possible, the OCPC-AAA will always seek to support and encourage the further development and refinement of the existing community-based elder care system in Massachusetts. We will lend our voice of support and encouragement, primarily through our affiliation with Mass Home Care and EOEA, on matters related to community-based care, with a solid understanding that it is the preference and desire of most citizens to remain in their own homes for as long as possible.

The OCPC-AAA will also continue to support the efforts of agencies and individuals that seek to deliver Disease Prevention/Health Promotion services and programs to the older people in the region. As noted in the body of the Area Plan, our most significant partner in the elder service

network, OCES, continues to make strides in providing such services. When and where appropriate, the OCPC-AAA will also consider funding requests for such activities.

**Section 306 (a)(10)**

*Include information detailing how the AAA will:*

(10) provide a grievance procedure for older individuals who are dissatisfied with or denied service under this title. The OCPC-AAA maintains a grievance procedure for older individuals dissatisfied with or denied services funded by Title III that is similar to our appeal procedure for agencies claiming to be aggrieved in the OCPC-AAA Request for Proposal and funding process. Our procedure for older individuals dissatisfied with or denied service funded by Title III is as follows:

Any individual who is dissatisfied with or denied service funded under Title III has the right to bring a formal complaint to the attention of the OCPC-AAA. The complaint can be filed formally with the Administrator of the OCPC-AAA, either by written copy or digital copy. The OCPC-AAA Administrator will investigate the matter, seeking input and details from both the individual with the complaint and the agency or program that is in question. After a review of all materials related to the complaint, the OCPC-AAA Administrator will meet with the individual to seek resolution. If, in the eyes of the OCPC-AAA Administrator, a Title III grantee agency has made a mistake or has intentionally mistreated an older individual, the OCPC-AAA Administrator will prepare formal notification informing the Grantee agency of a finding that constitutes an unacceptable action by a Title III funded program, and the action must cease if the agency wishes to continue as a Title III agency. The OCPC-AAA will request a formal plan of action from the grantee agency explaining their efforts and/or steps to be taken to ensure that the same of similar problems will not arise in the future.

This policy is in place with the explicit understanding that Title III funded agencies and programs are not unlimited in their ability and resources to provide service. This policy is also in place with the explicit understanding that all information and relevant opinions, from all parties, are considered when making an administrative decision regarding dissatisfaction with or denial of service.

**Section 306 (a)(17)**

*Describe the mechanism(s) for assuring that the AAA will:*

(17) include information detailing how the area agency on aging will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for disaster relief service delivery. The OCPC-AAA is housed within a Regional Planning Agency (RPA). We are the only RPA in Massachusetts that is also designated as an Area Agency on Aging. We are proud of this exclusive designation, and believe that our background in regional planning offers us a unique and advantageous position when it comes to disaster preparedness and response.

In FFY 2005, the OCPC received a contract from the Department for Homeland Security to develop disaster preparedness planning data (DPPD) for vulnerable populations in the OCPC-

AAA district. The outcome of this effort was a CD-based product that provides software and digital data layers regarding the twenty-three (23) communities within the AAA Region of Southeastern Massachusetts. Data layers included in this project are:

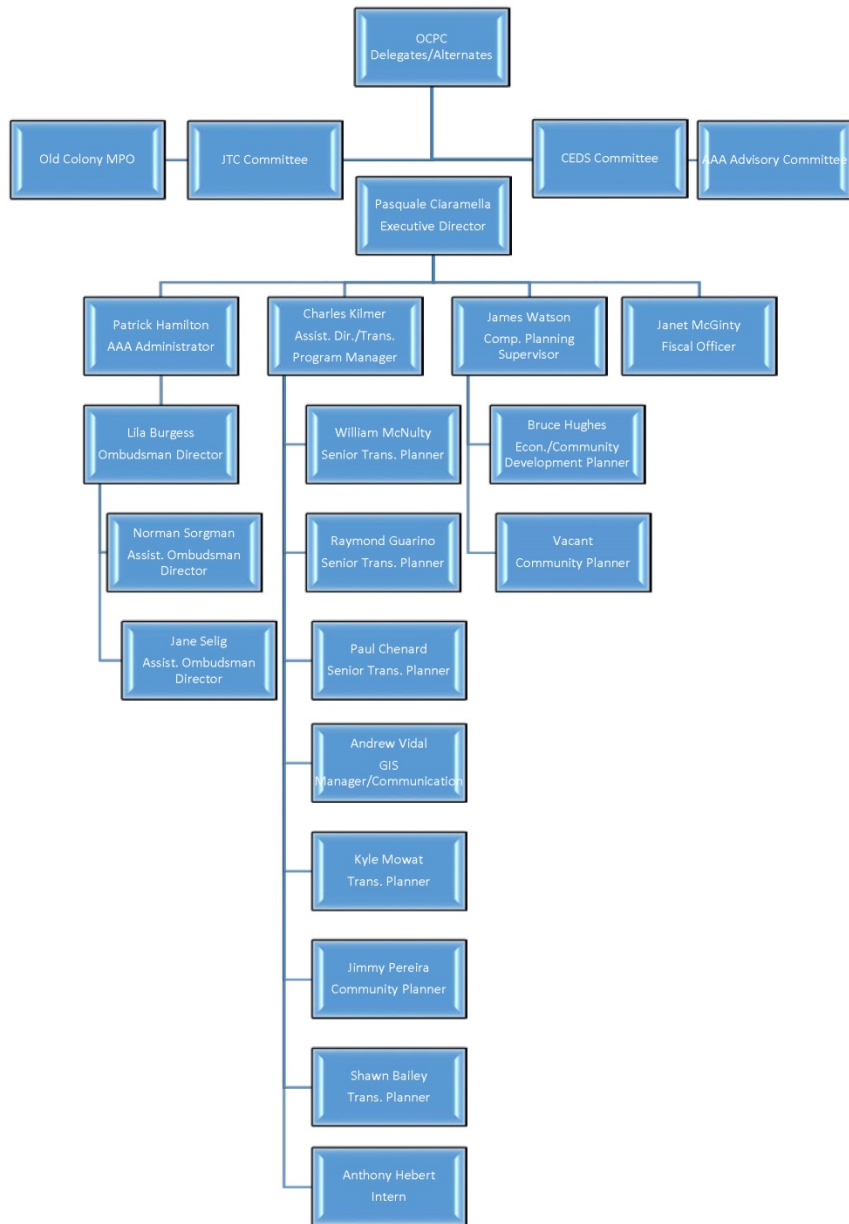
- Vulnerable Populations (developed by OCPC)
- MHD Road Inventory 2005 (developed by MassGIS)
- AAA Region of 23 Communities (developed by MassGIS)
- Surrounding Communities (Massachusetts Cities and Towns, developed by MassGIS)

All data layers can be queried by each point, line segment or polygon, or by selecting a geographic area (circle, polygon, and rectangle). Each query will allow first responders to access all data pertinent to each digital location with a click of the mouse.

A copy of the final product from this undertaking is available for review by contacting the OCPC-AAA. The work of this project, and the final product, are the basis for our formal participation in the Disaster Preparedness efforts in the region. The OCPC-AAA views our role in the elder service network, and indeed the community service network as a whole, as flexible and open-ended. We are willing and able to help whenever and wherever possible and appropriate, as determined by local and State authorities.

Attachment C: Organization Chart:

### Old Colony Planning Council Organizational Chart 2017



**AREA PLAN ON AGING, 2018 - 2021**  
**Form 1 - AAA Corporate Board of Directors - Federal Fiscal Year 2018**

**Area Agency on Aging : Old Colony Planning Council**

Member Name	Identify Officers by Title	City/Town of Residence	Membership Affiliation
David Klein		Abington	Delegate
Frank Staffier	President	Avon	Delegate
Sandra Wright		Bridgewater	Delegate
Robert G. Moran, Jr.		Brockton	Delegate
Valerie Massard		Duxbury	Delegate
Richard O'Flaherty		East Bridgewater	Delegate
Jeanmarie Kent-Joyce		Easton	Delegate
John G. Mather		Halifax	Delegate
Robert Overholtzer		Hanson	Delegate
Thomas Bott		Kingston	Delegate
Daniel Trabucco		Pembroke	Delegate
Lee Hartmann		Plymouth	Delegate
Christine Joy	Treasurer	Plympton	Delegate
Robert E. Kuver		Stoughton	Delegate
Eldon F. Moreira		West Bridgewater	Delegate
Fred Gilmetti	Secretary	Whitman	Delegate
Troy E. Garron		At-Large	Delegate
Chris Aiello		Abington	Alternate
Charles Marinelli		Avon	Alternate
Preston Huckabee		Brockton	Alternate
George D. Wadsworth		Duxbury	Alternate
Stephen Donahue		Easton	Alternate
Phillip Lindquist		Hanson	Alternate
James Mulcahy		Plympton	Alternate
Forrest Lindwall		Stoughton	Alternate
Nancy Bresciani		West Bridgewater	Alternate
Daniel Salvucci		Whitman	Alternate

37%	Percentage of the Board that are 60+ years of age.
3	Percentage of the Board that are minority persons.
3%	Percentage of the Board that are 60+ and minority persons.

3%



**AREA PLAN ON AGING, 2018 - 2021**  
**Form 2 - AAA Advisory Council Members - Federal Fiscal Year 2018**

**Area Agency on Aging: Old Colony Planning Council**

<b>Member Name</b>	<b>Identify Officers by Title</b>	<b>City/Town of Residence</b>	<b>Membership Affiliation</b>
Suzanne Djusberg, COA Director		Abington	Town/COA Appointed
Gene Mazzella, COA Director		Avon	Town/COA Appointed
Lorraine Carrozza, COA Director		Bridgewater	Town/COA Appointed
Janice Fitzgerald, COA Director		Brockton	Town/COA Appointed
Carol Julius, COA Director		Carver	Town/COA Appointed
John Rutkowski		Duxbury	Town/COA Appointed
Joanne Moore, COA Director		Duxbury	Town/COA Appointed
Nancy Hill, COA Director		East Bridgewater	Town/COA Appointed
Kristen Kennedy, COA Director		Easton	Town/COA Appointed
Ellen Murphy		Halifax	Town/COA Appointed
Nancy Lester		Hanover	Town/COA Appointed
Tammy Murray, COA Director		Hanover	Town/COA Appointed
Stephanie McSweeney		Hanson	Town/COA Appointed
Linda Philbrook		Hanson	Town/COA Appointed
Robert Brady		Lakeville	Town/COA Appointed
Jim Gouveia		Lakeville	Town/COA Appointed
Martine Anderson		Marshfield	Town/COA Appointed
Carol Hamilton, COA Director		Marshfield	Town/COA Appointed
David Singer		Middleborough	Town/COA Appointed
Andrea Priest, COA Director		Middleborough	Town/COA Appointed
Josephine Hatch		Pembroke	Town/COA Appointed
Anna Seery, COA Director	Chair	Pembroke	Town/COA Appointed
Jennifer Young, COA Director		Plymouth	Town/COA Appointed
Joy Marble, COA Director		Plympton	Town/COA Appointed
Rita Howes		Rockland	Town/COA Appointed
Patricia Sherman		West Bridgewater	Town/COA Appointed
Wendy Adams		West Bridgewater	Town/COA Appointed
Barbara Garvey, COA Director		Whitman	Town/COA Appointed

61%
7%
0

Percentage of the Advisory Council that are 60+ years of age. \*

Percentage of the Advisory Council that are minority persons.

Percentage of the Advisory Council that are 60+ and minority persons.

\* Membership must be more than 50 percent older (60+) persons.

**AREA PLAN ON AGING, 2018 - 2021  
Form 3 - Focal Points - Federal Fiscal Year 2018**

**Area Agency on Aging: Old Colony Planning Council**

Focal Point Name	Address	Town	Focal Point Designations (Mark with "X")				
			Senior Center/ Council on Aging	Community Center	Nutrition Meal Site	SHINE Site	Adjacent Housing
Abington COA	441 Summer Street	Abington	X		X	X	
Avon COA	65 East Main Street	Avon	X				
Bridgewater COA	10 Wally Kruger Way	Bridgewater	X				
Brockton COA	10 Father Kenney Way	Brockton	X			X	
Duxbury COA	10 Mayflower Street	Duxbury	X		X	X	
Dom-Davies Senior Ce	1380 Main Street	Brockton	X		X	X	
East Bridgewater COA	355 Plymouth Street	East Bridgewa	X			X	
Halifax COA	506 Plymouth Street	Halifax	X		X		
Hanover COA	665 Center Street	Hanover	X		X		
Hanson COA	132 Maquan Street	Hanson	X		X	X	
Kingston COA	30 Evergreen Street	Kingston	X	X		X	
Lakeville COA	One Dear Crossing	Lakeville	X		X	X	
Marshfield COA	230 Webster Street	Marshfield	X		X	X	
Middleborough COA	558 Plymouth Street	Middleborough	X		X	X	
Easton COA	15 Barrows Street	Easton	X			X	
Pembroke COA	144 Center Street	Pembroke	X		X	X	
Plympton COA	NA	Plympton					
Rockland COA	317 Plain Street	Rockland	X		X		
Plymouth COA	44 Nook Road	Plymouth	X		X	X	
Carver COA	48 Lakeview Street	Carver	X		X	X	
Stoughton COA	110 Rockland Street	Stoughton	X		X	X	
Wareham COA	NA	Wareham					
West Bridgewater COA	97 West Center Street	West Bridgewa	X		X	X	
Whitman COA	16 Hayden Avenue	Whitman	X		X	X	



**AREA PLAN ON AGING, 2018 - 2021**  
**Form 4a - Title III-B Funded Services - Federal Fiscal Year 2018**  
**Programs Funded in Whole or in Part by Title III-B**  
**Area Agency on Aging: Old Colony Planning Council**

FUNDED SERVICES	Title III Funding Category	Direct Service Status (Y/N)	Goal Number	NAPIS Code # (1 to 121)	Priority Svc 'A', 'I', 'L', 'O' (#)	Evidence-Based Program in Use	FFY2018 FUNDING - PLANNED	
							Title III Award	Non-Title III Exp.
<b>PROVIDER</b>								
Brockton Area Multi-Services, Inc.	B	N	1	10	O		\$ 1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	12	O		1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	13	O		1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	14	O		1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	22	O		1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	32	O		1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	35	O		1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	36	O		1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	41	O		1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	43	O		1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	48	O		1,708.00	\$ 7,546.41
Brockton Area Multi-Services, Inc.	B	N	1	19	O		1,712.00	\$ 7,546.41
Cape Verdian Association	B	N	1	13	O		2,000.00	16,930.00
Cape Verdian Association	B	N	1	14	O		2,000.00	16,930.00
Cape Verdian Association	B	N	1	31	O		2,000.00	16,930.00
Cape Verdian Association	B	N	1	37	O		2,000.00	16,930.00
Cape Verdian Association	B	N	1	19	O		2,000.00	16,930.00
Catholic Charities South	B	N	1	13	O		6,111.00	5,957.00
Catholic Charities South	B	N	1	14	O		6,111.00	5,957.00
Catholic Charities South	B	N	1	33	O		6,111.00	5,957.00
Catholic Charities South	B	N	1	35	O		6,111.00	5,957.00
Catholic Charities South	B	N	1	36	O		6,111.00	5,957.00
Catholic Charities South	B	N	1	37	O		6,111.00	5,957.00
Catholic Charities South	B	N	1	41	O		6,111.00	5,957.00
Catholic Charities South	B	N	1	43	O		6,111.00	5,957.00
Catholic Charities South	B	N	1	19	O		6,111.00	5,957.00
Hanson Council for Elder Affairs	B	N	1	94	O		3,500.00	191,642.00
Living Independently for Equality	B	N	1	10	A		1,400.00	18,781.00
Living Independently for Equality	B	N	1	13	O		1,400.00	18,781.00
Living Independently for Equality	B	N	1	14	O		1,400.00	18,781.00
Living Independently for Equality	B	N	1	31	O		1,400.00	18,781.00
Living Independently for Equality	B	N	1	32	O		1,400.00	18,781.00
Middleborough Council on Aging	B	N	1	10	A		1,250.00	44,750.00
Middleborough Council on Aging	B	N	1	94	O		3,750.00	134,250.00
New England Homes for the Deaf	B	N	1	13	O		1,251.00	15,937.00
New England Homes for the Deaf	B	N	1	32	O		1,251.00	15,937.00
New England Homes for the Deaf	B	N	1	37	O		1,248.00	15,937.00
Old Colony Elder Services	B	N	1	3	I		1,000.00	301.00
Old Colony Elder Services	B	N	1	10	A		1,000.00	301.00
Old Colony Elder Services	B	N	1	48	I		80,000.00	28,483.00
Old Colony Elder Services	B	N	1	19	I		3,000.00	1,000.00
Old Colony Planning Council	B	Y	1	10	A		32,000.00	32,000.00
South Coastal Counties Legal Services	B	N	1	11	L		99,000.00	37,054.00
South Coastal Counties Legal Services	B	N	1	14	L		1,000.00	1,000.00
Total							\$ 321,749.00	\$ 841,316.92

# Priority services: A - access; I - inhome; L - Legal; O - other.



**AREA PLAN ON AGING, 2018 - 2021  
Form 5 - Title III-E Family Caregiver Breakout - FFY 2018**

**Area Agency on Aging:  
Old Colony Planning Council**

**Based on the FFY2018 Title III-E Planning Budget  
Total (refer to FFY2018 Title III-E column on Projected  
Budget Plan tab), provide percentage (%) estimates  
for the services listed.**

\$ 205,209.00

Wages/Personnel costs of AAA staff involved in Family Caregiver Support Program services (counseling, support groups, training, assess assistance and information outreach and other specific caregiver services).	66%
Contracted respite services.	2%
Contracted supplemental services.	0%
Contracted services that include: counseling, support groups, caregiver training, access assistance and information outreach.	32%
Other (explain below)	
Total	100%

**AREA PLAN ON AGING, FFY2018 - 2021**  
**PROJECTED BUDGET PLAN - FEDERAL FISCAL YEAR 2018**  
**Area Agency on Aging: Old Colony Planning Council**  
**OCTOBER 1, 2017 THROUGH SEPTEMBER 30, 2018**

	Area Plan Admin	Title III-B Supp Svs	Title III-C-1 Cong. Nutr Svs	Title III-C-2 HDM Nutr Svs	Title III-D Evi-Based Svs	Title III-E Caregiver Svs	Ombudsman Services
<b>Federal Planning Award:</b>							
FFY 2017 Title III Estimated Continuation	-	-	-	-	-	-	-
FFY 2018 Title III Income	141,035	359,452	128,211	512,842	24,698	153,876	113,087
FFY 2018 Total Title III Income	\$ 141,035	\$ 359,452	\$ 128,211	\$ 512,842	\$ 24,698	\$ 153,876	\$ 113,087

	Area Plan Admin	Title III-B Supp Svs	Title III-C-1 Cong. Nutr Svs	Title III-C-2 HDM Nutr Svs	Title III-D Evi-Based Svs	Title III-E Caregiver Svs	Ombudsman Services
<b>Other Income:</b>							
NSIP			58,159	232,635			
NSIP Commodity Credit			12,504	50,018			
Other Federal (non-Title III or NSIP)	-	-	-	-	-	-	-
Program Income (Client Contributions)		11,400	36,230	144,921	-	-	
State Home Care	-	-	309,821	1,239,285	-	-	-
State Elder Lunch			73,857	295,427			
State - Other	-	-	38,793	155,172	-	-	-
Non-Federal Inkind	63,653	840,316	-	-	49,757	51,333	55,482
Local	-	-	1,468	5,871	-	-	-
Other	-	-	1,209	4,835	-	-	-
<b>Total Other Income:</b>	\$ 63,653	\$ 851,716	\$ 532,041	\$ 2,128,164	\$ 49,757	\$ 51,333	\$ 55,482
<b>Total Available Income:</b>	\$ 204,688	\$ 1,211,168	\$ 660,252	\$ 2,641,006	\$ 74,455	\$ 205,209	\$ 168,569

	Area Plan Admin	Title III-B Supp Svs	Title III-C-1 Cong. Nutr Svs	Title III-C-2 HDM Nutr Svs	Title III-D Evi-Based Svs	Title III-E Caregiver Svs	Ombudsman Services
<b>Budgeted Expenditures:</b>							
Wages and Salaries	83,504	-	118,845	475,381	-	-	83,129
Payroll Taxes/Fringe Benefits	14,513	-	33,000	136,000	-	-	13,108
Mileage/Travel	824	-	9,000	39,000	-	-	13,747
Occupancy Costs	10,832	-	-	-	-	-	5,526
Equipment Purchase/Rental/Maintenance	-	-	-	-	-	-	2,760

**Area Plan on Aging 2018 - 2021**  
**PROJECTED BUDGET PLAN - FEDERAL FISCAL YEAR 2018**  
**Area Agency on Aging: Old Colony Planning Council**  
**OCTOBER 1, 2017 THROUGH SEPTEMBER 30, 2018**

	Area Plan Admin	Title III-B Supp Svs	Title III-C-1 Cong. Nutr Svs	Title III-C-2 HDM Nutr Svs	Title III-D Evi-Based Svs	Title III-E Caregiver Svs	Ombudsman Services
Meal Prep and Related Costs			422,561	1,690,244			
Other Program Support	13,739	-	76,846	300,381	-	-	10,299
Agency Admin Support Allocation	81,276	-	-	-	-	-	40,000
Direct Services to Caregiver						-	
Subgrants - Access		32,000					
Subgrants - In-Home		85,000					
Subgrants - Legal		100,000					
Subgrants - Other		153,852			24,698	153,876	-
Subgrants - Inkind		840,316			49,757	51,333	-
<b>Total Budgeted Expenditures:</b>	\$ 204,688	\$ 1,211,168	\$ 660,252	\$ 2,641,006	\$ 74,455	\$ 205,209	\$ 168,569

Signature of Area Agency on Aging Planner: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Area Agency on Aging Fiscal Manager: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Area Agency on Aging Executive Director: \_\_\_\_\_

Date: \_\_\_\_\_