IOWA DEPARTMENT ON AGING
510 E 12TH ST., STE. 2 | DES MOINES, IA 50309 | IOWAAGING.GOV

Signed Verification of Agency Intent and Compliance

Agency Name: **Heritage Area Agency on Aging**

(AAA) accepts full authority and responsibility to develop and administer the SFY 2020 Update to the SFY 2018 - SFY 2021 Area Plan on Aging in accordance with all requirements of the Older Americans Act as amended through P.L. 114-144 (2016), state laws, rules, and procedures. The Parties agree that Area Plan is incorporated herein by this reference as if fully set forth in this Agreement. The AAA verifies that the following conditions are and will continue to be met:

1. The AAA agrees it will comply with the Area Plan Assurances. These assurances are available at https://iowaaging.gov/area-agencies-aging/area-plan-aging-guidance.The Parties agree that Area Plan Assurances are incorporated herein by this reference as if fully set forth in this Agreement.

2. The AAA agrees it will comply with the Procurement Terms and Conditions for Services as set forth by the Iowa Department of Administrative Services. These Procurement Terms and Conditions for Services are available at https://das.iowa.gov/procurement/terms-and-conditions. The Parties agree that Procurement Terms and Conditions for Services are incorporated herein by this reference as if fully set forth in this Agreement.

3. The AAA agrees it will comply with the Department of Health and Human Services Standard Terms and Conditions related to Federal Financial Assistance. These Standard Terms and Conditions related to Federal Financial Assistance are available at https://iowaaging.gov/area-agencies-aging/area-plan-aging-guidance. References to "agency" in the Standard Terms and Conditions means the Iowa Department on Aging. The Parties agree that Standard Terms and Conditions related to Federal Financial Assistance are incorporated herein by this reference as if fully set forth in this Agreement.

4. The AAA agrees it will comply with the requirements of Iowa code chapter 8F. These Terms are available at https://iowaaging.gov/area-agencies-aging/area-plan-aging-guidance. The Parties agree that 8F Terms and Conditions related to Federal Financial Assistance are incorporated herein by this reference as if fully set forth in this Agreement.

5. The AAA agrees it will comply with the process and procedures described in the reporting manual. The Reporting Manual is available https://iowaaging.gov/area-agencies-aging/area-plan-aging-guidance. The Parties agree the Reporting Manual is incorporated herein by this reference as if fully set forth in this Agreement.

By accepting this authority and responsibility, the area agency agrees to develop and administer the Area Plan for a comprehensive and coordinated system of service and to serve as the advocate and focal point for all Iowans 60+ years of age in the area agency's planning and service area. The Area Plan on Aging reflects input from a cross section of service providers, consumers, and caregivers that are representative of all areas and culturally diverse populations in the planning and service area; its contents are true, accurate, and incorporate the comments and recommendations of the Area Agency's Advisory Council and has been reviewed and approved by the Area Agency's Governing Body. It is acknowledged that intentional misrepresentation or falsification may result in the termination of financial assistance.

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The **Advisory Council** has reviewed and commented on the SFY 2020 Update to the SFY 2018 - SFY 2021 Area Plan on Aging, and hereby submits the SFY 2020 Area Plan Update to the Iowa Department on Aging for acceptance by the Iowa Commission on Aging.

Lawrence Kudej

NAME OF ADVISORY COUNCIL SIGNER

Lawrence D. Kudej Digitally signed by Lawrence D. Kudej
Date: 2019.04.25 14:37:44 -05'00'

ADVISORY COUNCIL SIGNATURE

The **Governing Body** has reviewed and approved the SFY 2020 Update to the SFY 2018 - SFY 2021 Area Plan on Aging, and hereby submits the SFY 2020 Area Plan Update to the Iowa Department on Aging for acceptance by the Iowa Commission on Aging.

Renee Riffey

NAME OF GOVERNING BODY SIGNER

Renee Riffey Digitally signed by Renee Riffey
Date: 2019.05.09 14:11:20 -05'00'

GOVERNING BODY SIGNATURE

The **Executive Director** has reviewed and approved the SFY 2020 Update to the SFY 2018 - SFY 2021 Area Plan on Aging, and hereby submits the SFY 2020 Area Plan Update to the Iowa Department on Aging for acceptance by the Iowa Commission on Aging.

Kellie Elliott-Kapparos

NAME OF EXECUTIVE DIRECTOR

Kellie Elliott-Kapparos Digitally signed by Kellie Elliott-Kapparos
Date: 2019.05.09 12:51:49 -05'00'

EXECUTIVE DIRECTOR SIGNATURE

Heritage Area Agency on Aging
PSA 4

Area Plan on Aging
SFY 2020 – 2021

Effective Dates: July 1, 2019-June 30, 2021

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Executive Summary

Heritage Area Agency on Aging (Heritage) is a 501c3 nonprofit entity located on the Kirkwood Community College Campus. Area Agencies on Aging (AAAs) are established under the Older Americans Act of 1965 (OAA) revised 2016, to respond to the needs of older adults over age 60 and family caregivers over age 55. Heritage is also designated as an Aging and Disability Resource Center (ADRC), branded as LifeLong Links, to enhance access to services for individuals with disabilities within its seven-county Planning and Service Area (PSA). Heritage serves Benton, Cedar, Iowa, Johnson, Jones, Linn, and Washington counties.

In goal one, Heritage will protect and enhance the rights and prevent the abuse, neglect, and exploitation of older adults through its Elder Abuse Prevention and Awareness (EAPA) program and Legal Services. The EAPA program commonly sees neglect, self-neglect, and/or financial abuse of older adults. Through its program, and with additional funding support from the Victims of Crime Act grant, the program will be able to enhance service to individuals at risk for abuse. Legal Services provides advice and counsel for numerous legal matters to older adults region wide. A focus group dedicated to this specific issue has been created to strengthen scope and reach, and address gaps with self-neglect cases, hoarding, and individuals in rural, difficult to reach areas of the region.

In goal two, Heritage will work with older adults, adults with disabilities, and caregivers as they engage in their communities, make informed decisions, and exercise self-determination about their independence, well-being in health through its LifeLong Links service and through nutrition education and counseling. LifeLong Links provides access to information and referral assistance to community support programs and to options counseling and caregiver support to assist individuals in developing a person-centered plan for maintaining independence in their community of choice. Nutrition education and counseling is provided to those at risk. The LifeLong Links advisory council will serve as a focus group for this Area Plan goal and will help measure determined strategies. A Nutrition focus group has been established to address health and nutrition-related goals including expanding outreach efforts to increase consumers in congregate meals, increased identification of clients at high nutritional risk for nutrition counseling and increasing education on OAA funded meals to help diminish utilizations stigma.

In goal three, Heritage will enable older adults with remaining in their residence/community of choice through its home and community-based services (HCBS). Primarily contracted to community-based providers, older adults receive congregate and home-delivered meals, transportation support, and others. Heritage provides non-Medicaid case management services and provides funding for material aid and unmet needs when funds are available. A focus group dedicated to HCBS issues has been created to strengthen Heritage's work on this Area Plan goal in the strategies of increasing clients from rural areas and of diverse backgrounds. Heritage views advocacy as a vital part of its mission. As such it will work with federal, state, county and local government officials to establish policies and programs, and provide funding that will enable its targeted population to age successfully.

Context

There are an estimated 92,707 individuals over the age of 60 in the Heritage service region, representing 19.8% of PSA 4's total population, while 6.3% of the population is over the age of 75 (U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates). In FY2018, 37% of persons served by Heritage were between the ages of 60-74 while 60% were over the age of 75.

Many of the consumers accessing services through Heritage are of low income and/or living below the poverty level. Nationally, 9.7% of older persons 60 and over lived at or below the poverty level in 2017 (U.S. Census Bureau, 2017 American Community Survey 1-Year Estimate). If cost-of living by region, non-cash benefits, and non-discretionary spending like out-of-pocket medical costs are taken into account, the percentage is closer to 14.5% (AOA, A Profile of Older Americans: 2017, web www.aoa.gov 01/18/19). In FY2018, 48% of total consumers served by Heritage lived at or below the poverty level (SFY2018: Final Report, Iowa Department on Aging).

Without a full array of services and level of care to choose from, older persons living in rural communities continue to be at risk for self-neglect and/or early institutionalization. According to the 2017 Edition of Rural America at a Glance published by the USDA, Cedar County and Iowa County are considered non-metro or rural counties while the remaining five are considered metro within PSA 4. If we take a deeper look into land areas we find that 28% of the PSA 4 service area population is considered rural vs. urban (Iowa State University, Iowa Community Indicators Program, 2010 Census, U.S. Census Bureau) Note: urban vs. rural population data is only compiled within the decennial census. In FY2018 Heritage served 17% of consumers with a rural status (SFY2018: Final Report, Iowa Department on Aging).

Older persons and adults living with a disability are more likely to be homebound and experience social isolation. According to the U.S. Census in 2017 the most prevalent disability across PSA 4 are ambulatory difficulties. In 2017, an estimated 21,280 of individuals aged 18 to 64 years were living with one or more disabilities in the PSA 4 (U.S. Census Bureau, 2013 - 2017 American Community Survey 5-Year Estimate). In 2017, an estimated 16,134 individuals aged 65 years or over were living with one or more disabilities in the PSA 4 (U.S. Census Bureau, 2013 - 2017 American Community Survey 5-Year Estimate).

- In FY2018, 61% of consumers served by Heritage reported they are living alone.
- In FY2018, 708 or 27% of consumers served by Heritage reported having at least 2 or more activities of daily living impairments (SFY2018: Final Report, Iowa Department on Aging).
- Below are services provided by Heritage as sited within the SFY2018: Final Report compiled by the Iowa Department on Aging.
    - 5,014 persons received information and assistance. The most common topics the applicant provided information on included: Options Counseling, Medicaid, homemaker services, subsidized rental housing and assisted transportation.
    - 2,407 older adults received a meal at a congregate dining site or at their home.
    - 1,842 older adults received nutrition education or counseling.

- 619 or 80% of older adults considered socially isolated received at least eight home delivered meals per month.
- 532 older adults were provided with home and community based services such as: adult daycare, transportation, chore services, homemaker services, material aid, and personal care.
- 421 older adults received 792 units of legal assistance.
- 165 older adults and persons living with a disability were provided with options counseling, receiving 553 units of service.
- 41 older adults were provided with 562 units of case management services.

Iowa is not a largely diverse state but the numbers of older adults and adults who are of defined minority status and/or are Non-English is growing. In 2017, a range of 4.2% - 14.6% of persons aged 65 or over were of racial minority status across the seven counties within PSA 4 (U.S. Census Bureau, 2013 - 2017 American Community Survey 5-Year Estimate). In 2017, a range of 0.3% - 6.0% of the population across the seven counties within PSA 4 spoke a language other than English (U.S. Census Bureau, 2013 - 2017 American Community Survey 5-Year Estimate). In FY 2018, Heritage served 3% or 149 consumers of minority status in PSA 4.

Caregivers need support in finding ways to keep their loved one safe at home and managing their own stress. There are an estimated 14.3% of adults in the United States who have been a caregiver to an adult age 50 or older in the prior 12 months (2015, AARP, Caregiving in the U.S.). According to the 2015 AARP study, "8 out of 10 caregivers (84%) state that they could use more information or help on caregiving topics. Caregivers most commonly want information about keeping their loved one safe at home (42%) and about managing their own stress 42%)…Caregivers help on average, with 4.2 out of 7 Instrumental Activities of Daily Living (IADLs), including transportation (78%), grocery or other shopping (76%), or housework (72%)…The inability to access affordable services may be an issue for caregivers, especially those in complex care situations. In FY2018, Heritage provided services to 1,376 caregivers within PSA 4. Services offered to caregivers included: information services, access assistance, counseling, options counseling, respite care, supplemental services.

Dependent adult abuse and elder abuse is a growing problem. Current laws do not fully address the vast array of complicated problems related to the abuse, neglect, self-neglect, and exploitation of older adults and adults with disabilities. According to the National Council on Aging, approximately 1 in 10 Americans aged 60 years and over have experienced some form of elder abuse. One study estimated that only 1 in 14 cases of abuse are reported to authorities. Two factors that make an older adult more vulnerable to abuse are social isolation and mental impairment (such as dementia or Alzheimer's disease. In FY2018, Heritage provided 1,496 persons with information on elder abuse prevention and awareness; 105 persons received elder abuse consultation services, and 42 older adults were provided 330 units of EAPA Assessment & Intervention services.

Section 1: 2020-2021 Goals and Strategies

Goal 1: Iowa Aging Network will protect and enhance the rights; and prevent the abuse, neglect, and exploitation of older Iowans.

Agency programs and services that address goal 1.

Heritage utilizes a combination of service provision, advocacy, and partnerships to protect and enhance the rights of older Iowans and to prevent their abuse, neglect and exploitation. The information below summarizes current and planned activities to achieve this goal.

Federally-funded Older Americans Act Services and State-funded Elder Services

ELDER ABUSE PREVENTION AND AWARENESS PROGRAM

Heritage's Elder Abuse Prevention and Awareness Program (EAPA) provides a number of services (listed below) to persons aged 60 years and older who are experiencing Physical Abuse; Sexual Abuse and Exploitation; Emotional or Psychological Abuse; Financial Exploitation; Neglect, Denial of Care and Abandonment; and Self Neglect.

In FY2018, Heritage provided Assessment & Intervention services to a total of 113 consumers (42 with EAPA funding and 72 with VOCA funding). The typical individual in need of service has been 75-years-old, female (59%), Caucasian (90%), living in poverty (77%). The most common trends of elder abuse in the region have been self-neglect, followed by financial exploitation, and then neglect by caregiver. Some areas that we have been seeing more frequently amongst the self-neglect referrals are hoarding and personal hygiene problems. For financial exploitation cases we have been receiving more referrals for exploitation of seniors by signing documents they don't understand or approve of, such as POA, transferring of deed or assets, and bank account information. The trend amongst caregiver neglect cases is denial of critical care, such as not taking the elder to vital doctor's appointments, or taking care of elder's hygiene.

Additional services provided by EAPA include:

- Consultation and follow-up with referral source.
- Unscheduled welfare checks.
- Collaboration with law enforcement and other community partners as needed.
- Reporting of suspected dependent adult abuse to DHS as mandatory reporters.
- Creation of a care plan or action plan in partnership with the consumer to:
    - Connect consumers to in-home supports.
    - Access resources to assist with recovery.
- Information to re-engage with the agency once abuse issues are resolved in the event at-risk status resumes.

***Performance Measures*.** The following performance measures are utilized to determine effectiveness of service in meeting goal:

Measure	Purpose: Evaluate Agency's Ability…

Percentage of EAPA Consultation consumers whose needs are met through provider referrals.	To provide information & referrals for self-advocacy in resolving abuse, neglect, or exploitation situation.
Percentage of EAPA Assessment & Intervention consumer cases closed with EAPA services no longer needed.	To resolve consumer's abuse, neglect, or exploitation situation.

LEGAL ASSISTANCE

Heritage subcontracts its Legal Assistance service to Martha Quint who is a local attorney with a relationship over 40 years with Heritage. The contract is provided based on a successful application from Heritage's Request for Proposal (RFP) for Legal Assistance services. Through this contract, Martha Quint provides legal advice, individual counseling, and legal representation for individuals in all the counties in the PSA whether it be in her office or in the individual's home.

Generally, case priorities include issues related to: personal income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination. Common issues tend to fall in three main areas:

1. Assistance in maintaining economic independence, such as income maintenance issues (social security benefits or overpayments), Medicare and Medicaid (qualification for the client and asset preservation for the spouse), relief from creditor actions (garnishment) or assistance with insurance claims (particularly long- term care insurance).
2. Assistance in maintaining personal independence, such as protection from financial exploitation, from emotional abuse, from self-neglect, and from threats to personal autonomy with financial and health decisions.
3. Assistance in maintaining independence and dignity such as assisting individuals with remaining in their home or community of choice, identifying legal supports for substitute decisions makers, for care providers in the home and qualifying for in-home services through public programs, such as Elderly Waiver.

A past trend has been an increase in legal assistance for older adults caring for adult children with disabilities. Many times the adult child is the legal services client, but the older adult is reaching out to Heritage for help as the Caregiver. We work to link these individuals to the appropriate supports. Additionally, there has been an increased need for services related to Medicaid eligibility – obtaining and maintaining over the last year.

Services / Initiative Funded Through Other Sources

Heritage was awarded a federal Victims of Crime Act (VOCA) grant to enhance our Elder Abuse Prevention and Awareness program (EAPA). This grant is awarded through fiscal year 2020. This grant funds approximately 2 FTEs and funds parts of our outreach strategies. These additional dollars allow us to serve more individuals and reach those in need who are not yet 60 years of age and thus not eligible for services previously. We have applied for renewal and should be notified in June.

Services under the VOCA grant:

- Coordinate community partnership meetings with victim support service providers
- Enhance EAPA services by providing emotional support and assistance with recovery from abuse
- Assess for past trauma and connects with mental health providers
- Offer victim assistance funds to address housing, personal effects, and transportation needs.
- Connect with legal assistance.

Collaborations/Partnerships to support Goal 1

- Heritage conducts monthly Multi-Disciplinary Team (MDT) meetings in Linn and Johnson counties along with rural counties conference calls. Within the MDT meetings/conference calls, more challenging client cases are discussed and additional options for assistance are explored.
- Linn Co. Triad – is a speaker's bureau community collaborative that positions Heritage as the community expert and presenter on elder abuse issues.
- Family Violence Prevention Coalition – is a group of community providers that supports families who have experienced violence in the forms of child abuse, intimate partner violence and elder abuse. Its purpose is, "To communicate, link, integrate, and coordinate the activities of agencies and organizations who deal with violence and explore ways of reaching out to families."
- Johnson County Older Adult Death Review Team – is a multi-disciplinary team that seeks to identify and understand factors associated with the deaths of older adults, particularly those deaths that could be related to caregiver abuse or neglect, as well as self-neglect, and any death that could have been prevented.
- Department of Corrections Community Accountability Board (CAB) meetings in Cedar Rapids two times a month. Heritage participates on this board to serve as the contact for older adults who are transitioning out of correctional programs. The purpose of these meetings is to connect these clients with community resources that may benefit them and allow them to transition in the community to become a productive citizen.
- Continuum of Care Planning & Policy Council meetings one time a month. The purpose of this meeting is for professionals to gather and share resources to work on prevention and elimination of homelessness in Linn County.
- Heritage staff participated in "Illuminating the Elder Abuse Network Pathway in East Central Iowa Task Force" with Dr. Brian Kaskie, Department of Justice, Fellow and Jacob Schunk, US Attorney's Office. The project goal was to identify and strengthen the process by which a survivor of elder abuse gains access to supports and services through the prosecution process, when needed.
- Heritage hosted an event in partnership with the University of Iowa Law Clinic on the Iowa Statutory Power of Attorney Form – Empowering Elders and Being Aware of the Pitfalls of Abuse attended by more than 50 people. Follow-up session in development for June at Meth-Wick Community.
    - We are currently exploring the possibility of doing a follow up to this event due to our experience of individuals signing documents that they do not understand

the impact or how such powers are activated. Also, providers do not always understand when/how to honor such documents.

- Heritage has entered into an MOU with Deaf Iowans Against Abuse for a grant application to hold trainings to our mutually served population. This partnership will allow the Elder Rights Program an increased reach to an OAA targeted population.
- Statewide Elder Abuse (EAPA) Workgroup – An effort coordinated by the Iowa Department on Aging to strengthen the EAPA program across the state of Iowa AAAs.

Strategies to Address Service Gaps

In response to the Iowa Department on Aging's three common statewide goals, Heritage followed up by holding a public meeting, where general service gaps identified and potential strategies were developed. Focus groups were organized around each of these goals, and during a staff retreat, consumer demographic and census data were reviewed and these gaps and strategies were developed into more plans, discussed further below. Each of these focus groups continue to meet to review strategy implementation and that projected services goals and outcomes are being met. Results from Focus Group discussions are reported to the Advisory Council.

GOAL 1, SERVICE GAP #1: OLDER ADULTS IN THE HERITAGE SERVICE AREA EXPERIENCING ELDER ABUSE, NEGLECT OR FINANCIAL EXPLOITATION OFTEN DO NOT RECOGNIZE THE SIGNS OF ABUSE OR HOW TO ESCAPE AND RECOVER THE ABUSIVE SITUATION.

Strategies to address service gap.

- The Heritage Elder Rights Specialist will provide EAPA Consultation services to all EAPA Program referrals within the Heritage service area.
- Community engagement and service goals have been created using Area Plan consumer and unit projections, census demographic data and GIS thematic maps to identify and develop strategies on how to target those most in need of long-term services and supports within each county. The Elder Rights Focus Group is reviewing data that will be used to develop this strategy. Data will include:
    - Adults living with disabilities such cognitive impairments
    - Social isolation factors including: living alone, household without a vehicle
    - Adults living at or below poverty level
- A one-page handout has been created to assist with educating the public, providers and at-risk populations on the different types and signs of abuse.
- Case scenarios have been created to help educate the public and providers on signs, symptoms, and issues related to elder abuse.
- The Heritage Elder Rights Specialist will deliver information to target population.
- The Elder Rights Coordinator will develop a public awareness campaign on the signs of elder abuse as a part of a coordinated strategy and assist with reaching our community engagement goals throughout the Heritage planning and service region.
- Increased social media presence through Facebook.

- Radio ads targeted to caregivers and family members of older adults.
- Using local newspapers to further spread awareness to rural residents
- Elder Rights staff have given multiple presentations with key stakeholders and the general public.
- Increased efforts to offer training to law enforcement and first responders throughout the seven county region.

GOAL 1, SERVICE GAP #2: OLDER ADULTS IN THE HERITAGE SERVICE AREA EXPERIENCING SELF-NEGLECT ISSUES OF HOARDING, HOMELESSNESS, AND BED BUGS ARE DIFFICULT TO REACH AND SERVE.

Strategies to address service gap.

- Use existing multidisciplinary teams coordinated by Heritage Elder Rights Coordinator to discuss resource options for difficult cases and those involving self-neglect and explore strategies to help prevent further abuse.
- The Heritage Elder Rights Coordinator will re-evaluate and nurture the relationship that established a referral system and collaborative support plan with homeless service agencies in Linn and Johnson counties for older adults who are homeless or at risk for homeless.
- Use existing multidisciplinary teams meetings to create educational materials that communicate how to identify signs of self-neglect and how to connect with EAPA services.
- Utilize the Elder Rights Focus Group and the LifeLong Links Sr. Manager to develop a targeted outreach plan.
- Use of both internal client staffing and external MDT meetings to determine best course of action before discharge from program.
- Continue to increase efforts to offer training to law enforcement and first responders throughout the seven county region.
- Develop an educational piece with feedback from the multidisciplinary teams and the Elder Right Focus Group to distribute.

GOAL 1, SERVICE GAP #3: OLDER ADULTS IN THE HERITAGE SERVICE AREA WHO ARE CARING FOR ADULT CHILDREN WITH DISABILITIES ARE NOT AWARE OF AVAILABLE RESOURCES.

Strategies to address service gap.

- Elder Rights Specialists will increase best practices at initial visit to ensure they are properly identifying themselves, explaining the program and demonstrating person centered practice from the very beginning.
- Director will increase training on:
    - Care plan development
    - Intervention strategies that are at the level of the consumer at that time – Person Centered Practice
    - Creative intervention implementation strategies
    - Follow up procedures and “warm transfer” referrals

- Refer all appropriate discharges to the Case Management program
- Refer all appropriate services to build consumer trust and stability

Goal 2: Iowa Aging Network will work with older Iowans, Iowans with disabilities, and caregivers as they fully engage and participate in their communities, make informed decisions, and exercise self-determination and control about their independence, well-being, and health.

Agency programs and services that address goal 2.

Heritage utilizes a combination of service provision, advocacy, and partnerships to ensure older Iowans, Iowans with disabilities, and caregivers have appropriate and adequate information and referrals so that they are able to make informed decisions, and exercise self-determination and control about their independence, well-being, and health. The information below summarizes current and planned activities to achieve this goal.

Federally-funded Older Americans Act and State-funded Elder Services

LIFELONG LINKS

LifeLong Links is Iowa's "no wrong door" effort to connect older adults, adults living with a disability and family caregivers to long-term services and supports. The LifeLong Links program is implemented as a part of our Aging and Disability Resource Center (ADRC) designation via IAC231.64. Heritage provides direct services such as Information & Assistance along with Options Counseling services. Heritage also partners with FCFH-Iowa, Inc. (First Call for Help Iowa, Inc.) and United Way 2-1-1 to provide information and assistance to persons aged 60 years and over. The LifeLong Links – Aging and Disability Resources Center Advisory Council provides oversight to the LifeLong Links program. The council reviews and provides feedback to staff on Area Plan deliverables and performance measures. Heritage creates community engagement goals to increase awareness of LifeLong Links services.

Information & Referral/Assistance.

Heritage Information & Assistance Specialists and Family Caregiver Specialists are experienced and knowledgeable in the field of aging, disability and caregiving. All specialists assess a request or concern, ask questions and provide consumers with personalized information tailored to fit their specific circumstance. All consumers are provided with current information on opportunities and services available within their community, including information relating to assistive technology. Consumers are assessed based on the need and capabilities that are shared during the call or face-to-face visit. The individual will be linked to opportunities and services available to address their identified needs. To the maximum extent possible, individuals will be followed up with to ensure they have been able to receive needed services. The information and assistance provided serves the entire community of older individuals,

particularly older individuals with greatest social need, economic need, and are at risk for institutional placement. Assistance is also provided to adults living with a disability and family caregivers who care for persons aged 60 and over. Assistance in gaining access to supportive services offered by Heritage can be obtained by calling Heritage at 319-398-5559 or 1-800-332-5934, and calling LifeLong Links at 866-468-7887. In person office appointments are also available, M-F, 8 AM – 5 PM. They can email Heritage at heritage@kirkwood.edu and send messages through Heritage's Facebook page.

Heritage also partners with FCFH-Iowa, Inc. (First Call for Help Iowa, Inc.) and United Way 2-1-1 in a variety of ways, including referral, after business hours/holiday intake, and emergency response and preparations. Increased access to information is a goal of the state-wide implementation of LifeLong Links. Providing this as a direct service and also in partnership with other United Way 2-1-1 ensures a "no wrong door" access point to Heritage's continuum of care within all seven counties. This partnership is encouraged through the state-wide LifeLong Links system. It is important to note that only a small part of the Information and Assistance service is provided by a partner provider, United Way 2-1-1, to allow Heritage to have 24/7 access to the target population when they have the need, regardless of office hours. This is a very small percentage of the budget for the service, yet generates a very high rate of return.

In FY2018, LifeLong Links provided 5,014 consumers with 6,707 units of Information & Assistance. Of those accessing this service, 87% were over age 60 with 42% between the ages of 60 and74. Consumers tended to be White (92%), females (71%), living alone (55%), and living in poverty (43%). Common issues include the need for additional supports and planning, which is provided through an Options Counseling referral, Elderly Waiver application assistance, and assistance connecting with in-home care supports. Emerging trends include an increase in Medicaid related calls and affordable, independent living options and home repair/modifications.

In FY2018, Family Caregiver Specialists provided 221 caregivers with 464 units of Access Assistance. Of those accessing this service, 43% are under the age of 60, and 38% between the ages of 60 and 74. Caregivers are often white (96%), and female (74%). The majority of caregivers (95%) indicated they are not living in poverty. Common issues tend to be need for emotional support, respite care, and in home supports. Emerging trends include an increased need for connecting with in-home supports such as respite care and home health aides to give caregivers a break and help reduce their stress. Information on Medicaid and how to apply for the Elderly Waiver program continue to be a top issues for caregivers as well.

Options Counseling.

Options Counseling provides person-centered planning with individuals ages 60 and over, persons living with disabilities ages 18 and over, and caregivers of persons' ages 60 and over. In FY2018, 165 consumers received 553 units of Options Counseling services. Of those accessing this service, 84% were over the age of 60 with 59% between the ages of 60 and 74. Consumers tend to be White (88%), female (73%), and live alone (77%). In FY2018, 119 caregivers received 351 units of caregiver options counseling. Of those accessing this service, 44% were under the age of 60 with 38% between the ages of 60 and 74. Caregivers are most often White (93%), and female (73%).

This short-term, person centered service is provided via phone, email, and face-to-face in a person's home or in the community, based on the preferences of the individual in need of the service. An in-depth assessment of need is conducted with the individual and a care plan is developed to assist the person with identifying supports and services that will assist them in remaining independent in their community of choice for as long as possible. It is common for services to assist individuals with benefits applications, review long-term care supports and services options, and connect them with area services of interest to them. Utilization of ADRC unmet needs funds have primarily focused on material aid. Additionally, denial of an individual's application to Elderly Waiver has increased the demand for supports and services that individuals and caregivers cannot afford. Heritage has been able to provide limited assistance with our Person Centered Funding to assist with covering the cost of in home supports on a short term basis.

***Performance Measures*.** The following performance measures are utilized to determine effectiveness of service in meeting goal:

Measure	Purpose: Evaluate Agency's Ability…
Percentage of LifeLong Links callers indicating they received the information they were seeking.	To assess and provide information appropriate to caller's need (from consumer's perspective).
Percentage of Options Counseling consumers who indicate they were provided information to make an informed decision on goal and service need.	To conduct an interactive process where individuals receive guidance in their deliberations to make informed choices about long-term supports.

NUTRITION EDUCATION

In FY2018, 1,806 consumers were provided with 11,380 units of nutrition education. The typical nutrition education consumer is White (96%), female (64%), lives alone (60%), over the age of 75 (70%), and have a high nutritional risk (49%).

Monthly nutrition education is delivered through the nutrition subcontractors in congregate settings, where education is provided by site managers, or in home deliveries, where printed education materials promote healthy choices. An annual survey of nutrition service consumers assists Heritage with researching and planning monthly education topics. The survey has helped Heritage understand trends associated with nutrition needs including: issues associated with sodium reduction, cooking/shopping on a budget, importance of calcium and Vitamin D, following the My Plate method, eating healthy for one, exercise, and healthy snacking. Heritage has expanded nutrition education to include chef demonstrations.

NUTRITION COUNSELING

In FY2018, 36 consumers were provided with nutrition counseling. The typical nutrition counseling consumer is White (94%) and female (61%). 58 percent are between the ages of 75 and 84, 42% live alone, and 39% have a high nutritional risk.

Nutrition Counseling will be provided by HY-VEE Corporation under a new strategy and partnership with Heritage. The service is offered through thirteen area HY-VEE Food Stores and Drug Town Pharmacies in the greater Cedar Rapids/Marion area. Potential nutrition counseling participants are identified through new Consumer Intake Forms that will be reviewed by the Regional Nutrition Services Coordinator. Those with high risk nutritional scores are referred to the Nutrition Counseling Program for counseling. Heritage will also screen consumers receiving elder abuse prevention services for nutrition risk to minimize barriers to nutritional support for this high-risk population. Referrals to this program may come from Elder Rights Specialists, registered dieticians and pharmacists based in the thirteen area HY-VEE locations, or by site managers of the various dining sites throughout the Heritage PSA. Based on determination of need from the Region Nutrition Services Coordinator and the HY-VEE dietician, a plan is developed with the consumer with education on how to properly shop for nutritious products, and purchase products based on the participant's individual needs. The plan is developed preferably on-site at the HY-VEE located nearest the consumer's place of residence to allow for a complementary tour of the store, alternatively a home-visit by the dietician is also available.

***Performance Measures*.** The following performance measures are utilized to determine effectiveness of service in meeting goal:

Measure	Purpose: Evaluate Agency's Ability…
Of all congregate meal consumers identified as high nutrition risk, percentage receiving nutrition education.	To ensure those at risk for poor nutrition and health status receive information so that they have better health enhancing options.
Change in consumers receiving nutrition counseling from previous FY (percentage and number).	To ensure those at risk for poor nutrition and health status receive counseling so that they have the opportunity to improve their health literacy and information for optimal nutrient intake.

Outreach / Training & Education / Caregiver Information Services

In FY2018, Heritage staff along with our contract partners delivered 3,108 units of outreach, 167 units training & education and 38 units of caregiver information services for a total of 10,530 consumers served (does not account for duplication).

Our typical method of increasing awareness of Heritage services along with our typical audience includes: delivering presentations and distributing brochures to health and human service providers, hospital social workers, consumer support groups, faith-based communities, and classes on aging through Kirkwood: trainings with Task Force volunteers; trainings with emergency responders and businesses; booths at community resource events, farmer's markets and county fairs; radio interviews; billboards; articles in local news media; distribution of event flyers; and promotion of events through social media.

Topics covered include: general overview of Heritage, how we operate and what services we provide and specific information related to our caregiver support program, elder rights program, and regional nutrition program.

In FY2020, Heritage plans to streamline our community engagement efforts by reducing the number of program specific brochures and create one common brochure that we plan to use for promoting all of Heritage services. This will help reduce the amount of duplication when reporting on our efforts to IDA. Community engagement and service goals have also been created (see below chart) using Area Plan Training & Education consumer and unit projections, census demographic data and GIS thematic maps to target those most in need of long-term services and supports within each county. This will help to ensure we are delivering services equitably across our entire service region and also help identify areas we need to focus additional efforts. Below are examples of some of the data we are looking at to target areas and populations in need.

Rate per 100 of Persons with a Cognitive Impairment Disability by County and Age

	U.S.	Iowa State	Benton County	Cedar County	Iowa County	Johnson County	Jones County	Linn County	Washington County
65 - 74 years	5.3	3.8	2.2	4.0	3.1	1.9	2.6	11.3	1.3
75 + Year	13.9	9.5	10.2	4.3	7.0	9.5	13.7	23.6	6.9

Rate per 100 of Persons Living Alone aged 65 years or over by County

	U.S.	Iowa State	Benton County	Cedar County	Iowa County	Johnson County	Jones County	Linn County	Washington County
65 years and over	27.1	30.6	27.1	31.0	27.0	29.7	28.1	29.5	28.4

Rate per 100 of Persons with Poverty status in past 12 months aged 65 years or over by County

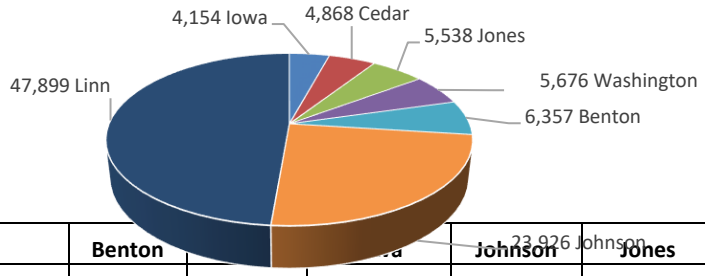
	U.S.	Iowa State	Benton County	Cedar County	Iowa County	Johnson County	Jones County	Linn County	Washington County
65 years and over	9.3	7.3	8.0	8.1	6.3	4.5	7.3	5.6	8.7

All data compiled from U.S. Census Bureau, American Community Survey, 2017 5-year Estimates.

Rate per 100 was calculated by taking the number of incidence divided by the total population within each county multiplied by 100.

Below are examples of the data and maps used to create targeted community engagement goals for serving persons 60+ across our service area as well as reaching minority populations.

Older Persons Across The Heritage Agency Service Region



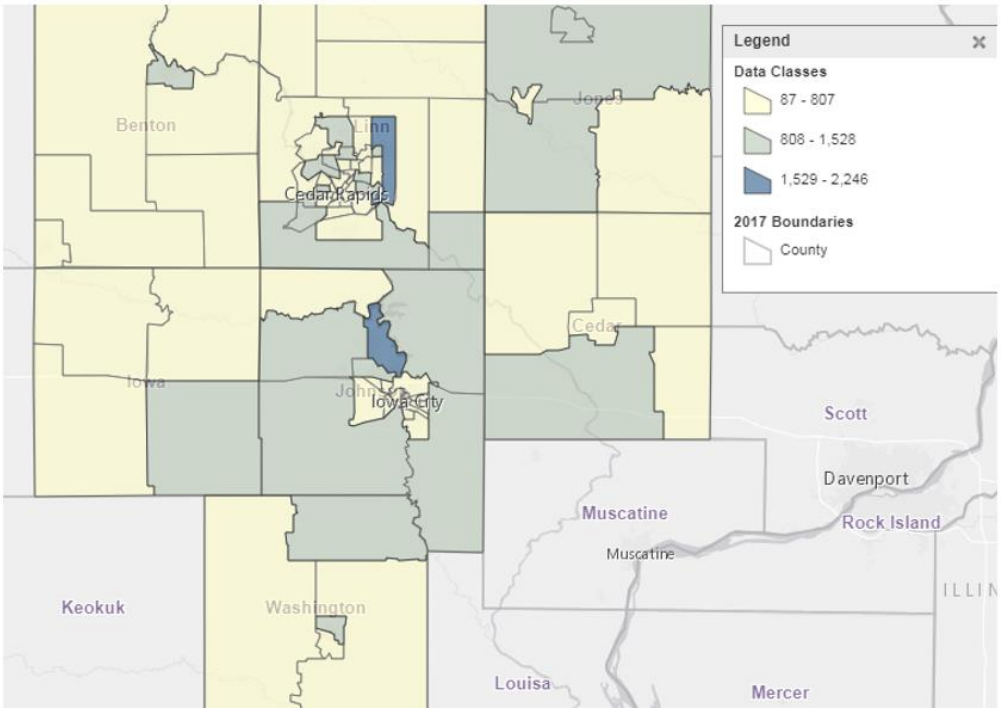
	Total	Benton			Johnson	Jones	Linn	Washington
Total 60 +	98,418*	6,357*	4,868*	4,154*	23,926*	5,538*	47,899*	5,676*
% of Total 60+		6.5%	4.9%	4.2%	24.3%	5.6%	48.7%	5.8%
% Minority		2.2%	3.0%	2.4%	4.5%	17%	11.2%	3.3%

*Annual Estimates of the Resident Population for Selected Age Groups by Sex for the United States, States, Counties and Puerto Rico Commonwealth and Municipals: April 1, 2010 to July 1, 2017, Source: U.S. Census Bureau, Population Division, Release Date: June 2018

FY20 Community Engagement Proposed Units/Consumers

	Total	Benton	Cedar	Iowa	Johnson	Jones	Linn	Washington
Training & Ed	(150) 4,500	(10) 293	(7) 220	(6) 189	(37) 1,094	(8) 252	(73) 2,191	(9) 261

Thematic Map of Total; Estimate; DISABILITY TYPE BY DETAILED AGE - With a cognitive difficulty - Population 65 years and over (Same results for ambulatory difficulty, self-care difficulty and independent living difficulty)
Geography: by Census Tract



Over the past year, Heritage has realigned the county Task Forces on Aging's role to ask for volunteers to help staff identify presentation opportunities, key partnerships to strengthen, and also assist with covering outreach events and distributing brochures to main referral sites.

Having local ambassadors promoting Heritage services will greatly further our reach within each county.

Services / Initiative Funded Through Other Sources

Heritage Agreement with The Arbor at Lindale Trail – In December 2018, Heritage signed another one year renewal contract to provide onsite Options Counseling services on a part-time basis to all 70 residents (when at full-capacity) of The Arbor at Lindale Trail facility. This contract funds half of a full-time Options Counseling position. Listed below are the services that have been delivered to residents since the partnership was implemented in December 2016.

- 61 residents have received Information & Assistance services.
- 55 residents have received 226 hours of Options Counseling services.
- 34 residents have received nutrition education.
- 16 residents have received 226 meals at a local congregate dining site.
- 8 residents have received $6,981.79 in Heritage person centered funding to provide a variety of in-home supports.
- 4 residents have received 871 meals through a home delivered meals program.
- 2 residents have received 6.5 hours of Elder Rights services.
- 1 resident has received 16 transportation rides.

Fresh Conversations – On a state level, connections with Iowa Department of Health have provided opportunities to offer programs such as Fresh Conversations. Heritage directly provides administration of this program, while benefitting from a relationship with regional leaders at senior dining sites and other aging organizations. This allows greater reach of the program and access to education tools for local leaders and site managers. This is an evidenced-based nutrition model that participants learn ways to have a better eating plan with leader motivation.

Collaborations/Partnerships to support Goal 2

LifeLong Links (LLL) – Aging and Disability Resource Center (ADRC) Advisory Council – The LifeLong Links- ADRC Advisory Council has been under that coordination of the Area Agency on Aging (AAA) division of Kirkwood, the predecessor in interest of Heritage since 2010 and continues to meet on a quarterly basis. The LifeLong Links-ADRC Advisory Council's purpose is to strengthen partnerships among the aging, disability and healthcare networks to improve access to long-term services and support for persons aged 18 years and over, persons aged 65 years and over, veterans, and caregivers. The LifeLong Links – ADRC Advisory Council also serves as one of the five focus groups to review the LifeLong Links portion of the Area Plan. Other partners who actively participate include: Kindred at Home, United Way 2-1-1, Access2Independence (Center for Independence Living), Linn County Home Health, Linn Co. LIFTS, Aging Services, Inc., Iowa COMPASS, Unity Point Health – St Luke's Hospital, Abbe Center – Integrated Health Homes, Heritage Specialty Care, Mercy Home Care, Alzheimer's Association, Mental Health & Disability Services of the East Central Iowa Region, Linn County Mobility Manager, Brain Injury Alliance of Iowa, Marengo Memorial Hospital, Linn County Veterans Affairs, The ARC of East Central Iowa, and Goodwill of the Heartland.

The following partnerships were established by the AAA division of Kirkwood and will be continued by Heritage to enhance and strengthen their ability to deliver information and assistance services through the ADRC within the planning and service area.

United Way 2-1-1 – In addition to providing Information & Assistance as a direct service provided in-house, Heritage will subcontract with United Way 2-1-1 to deliver Information & Assistance services to persons ages 60 and over within the planning and service area. This will allow Heritage to have 24/7 access to the target population when they have the need, regardless of office hours. This is a very small percentage of the budget for the service, yet generates a very high rate of return.

TAV Health/SIMS C3 - Heritage continues to participate with the SIMS C3 efforts that were instrumental in developing a community referral system through TAV Health. Heritage currently has a license to actively receive and make community referrals with other community partners who include: Abbe Center for Community Mental Health, Area Ambulance Service, Area Substance Abuse Council, CarePro Health Services, Community Health Free Clinic, Mental Health & Disability Services of the East Central Iowa Region, Eastern Iowa Health Center, Foundation 2 Crisis Center, Hawkeye Area Community Action Program, His Hand Free Medical Clinic, Horizons/A Family Service Alliance, Linn County Public Health, Mercy Medical Center, Metro Care Connection – Cedar Rapids Community School District, Tanager Place, Unity Point Health – St Luke's Hospital, United Way of East Central Iowa, Waypoint Services for Women, Children and Families, YMCA-YDPP (Diabetes Prevention Program).

Iowa/Nebraska AIRS – Heritage will participate in the Iowa/Nebraska Alliance of Information and Referral Systems membership meetings. The purpose of the Alliance is to establish a network of organizations and individuals serving, or concerns with the delivery of quality information, assistance, and referral services to the people of Iowa and Nebraska. Other members include: Elder Services, Inc., Lutheran Services in Iowa, Project Concern, Inc., Access2Independence, Aging Partners, Aging Resources of Central Iowa, Connections Area Agency on Aging, Disability Rights Iowa, Elderbridge Area Agency on Aging, First Call for Health Iowa, Inc. Foundation 2 Crisis Center, Hawkeye Area Community Action Program, Inc., Iowa Association of Area Agencies on Aging, Iowa COMAPSS, Center for Disability and Development, Iowa State University, Milestones Area Agency on Aging, United Way of Central Iowa 1-1-1, United Way of Midlands, United Way of the Quad Cities Area and Visiting Nurse Services of Iowa.

Independent Living Facilities – Heritage will assume contracts with three independent living facilities and the Iowa State Finance Authority to act as lead agency for each facility. As lead agency, Heritage ensures persons with a physical or mental, and/or developmental disability, which may include persons with brain injury, mental illness, or co-occurring disorders are given access to accessible, affordable units within each of the housing facilities through the services of an Options Counselor. This partnership allows Heritage to spread resources further as one particular facility helps offset the cost of the Options Counselor.

- *The Arbor at Lindale Trail Apartments (Persons 55 or older)* – contract with the 70-unit facility to provide onsite Options Counseling two and a half days a week. Partnership

funds half of a fulltime staff position. Also screens tenants for eligibility and makes referrals to rent seven accessible units.

- *Diamond Senior Apartments of Iowa City (Persons 55 or older*) – contract with the 40-unit facility to provide Options Counseling as requested. Also screens tenants for eligibility and makes referrals to rent four accessible units.
- *Kingston Family Apartments (Family)* – contract with the 52-unit facility to provide options counseling as requested. Also screens tenants for eligibility and makes referrals to rent six accessible units.

Centers for Disabilities and Development – AAA division of Kirkwood was granted $5,000 to increase its ability to address unmet needs for older persons and adults living with a disability in order to maintain their community setting. Heritage will assume this grant and its mission.

Linn County Public Health - Heritage is committed to supporting the physical and mental health, safety, and well-being of older adults and their caregivers. This commitment has given Heritage the reputation in the community as a valuable partner for local agencies and organizations offering wellness screenings, influenza and pneumococcal vaccinations clinics, physical and mental health assessments, fall prevention seminars and programs, and home safety services. These screenings often catch early signs of chronic conditions that may not be caught due to participants not having a medical home or unable to afford the care prescribed, and can educate consumers on lifestyle choices to help ease burden of cost or need. Several partnerships with widespread impact have multiplied from these local collaborations and contacts. One example is the new partnership with His Hands Free Medical Clinic and the YMCA to offer evidenced-based programming. Both organizations have volunteer leaders trained to offer Chronic Disease Self-Management classes. These unique partnerships allow those with limited resources to receive classes in a comfortable environment. The benefit of these classes is to really encourage participants to become involved in their health care, learn how to communicate with their providers and learn self-management technics to help minimize trips to the health care facility or medical home. The partnership with the YMCA offers a 1 month free access to their facilities for those that successfully complete the program within the class guidelines established. Other unique partners include the YMCA and Marion Public Pools for evidenced-based aqua exercise, relationships with the University of Iowa Geriatric Workforce Education Center to offer Stepping On and co-leading of classes for Matter of Balance. Again, all of these offer person-centered learning to increase participation in one's health care regime.

Strategies to Address Service Gaps

In response to the Iowa Department on Aging's three common statewide goals, Heritage followed up by holding a public meeting, where general service gaps identified and potential strategies were discussed. Focus groups were also organized around each of these goals.

During a staff retreat, consumer demographic and census data were reviewed to develop gaps and strategies into operational plans, discussed further below. Each of these focus groups continues to meet to review strategy implementation and to ensure that projected services goals and outcomes are being met. Results from Focus Group discussions are reported to the Advisory Council.

GOAL 2, SERVICE GAP #1: RURAL RESIDENTS IN THE HERITAGE SERVICE AREA FACE ADDITIONAL BARRIERS TO ACCESSING NEEDED SERVICES.

Strategies to address service gap.

- Heritage staff will work with Kirkwood's Information Technologies Department to create a user-friendly website for older adults, adults living with disabilities and caregivers to access information on available services.
- Heritage is in the process of strengthening our network and presence within rural counties by engaging Task Force on Aging members as local resources in sharing information on Heritage services with their communities at resource fairs, club meetings and other informal gatherings.
- County specific demographic sheets highlighting persons served and services delivered within each county have been created and can be inserted within Heritage's brochures when distributed or be given as a separate handout.
- Community engagement and service goals have been created using Area Plan consumer and unit projections, census demographic data and GIS thematic maps to target those most in need of long-term services and supports within each county. The LifeLong Links Focus Group is reviewing data that will be used to identify target populations. Data includes:
    - Adults living with disabilities such as mobility, independent living skills.
    - Social isolation factors including: living alone, household without a vehicle.
    - Adults living at or below poverty level.
- Heritage continues its commitment to a seven county strategy. Heritage will reach out to the County Board of Supervisors and collaborate with the most appropriate governmental and local service agencies in each service county to: 1) share information on the needs of their seniors and those with disabilities, and the resources available; 2) involve them in planning to better address the needs of their residents.
- Heritage is working to develop relationships with two or three main referral sites within each county and will educate staff on the services Heritage offers. Brochures will be provided for each main referral site to assist with distribution and increasing awareness of Heritage services within each area. Task Force on Aging members will also be asked to assist with furthering Heritage's reach by identifying presentation opportunities and to assist with distributing materials at community events.

GOAL 2, SERVICE GAP #2: CAREGIVERS ARE OFTEN SO CONSUMED WITH THE CAREGIVER RESPONSIBILITIES THAT THEY DO NOT HAVE TIME TO RESEARCH AND CONNECT WITH SUPPORT SERVICES.

Strategies to address service gap.

- The Heritage Caregiver Focus Group is working to develop a common brochure that connects caregivers to all caregiver supports within our community. Programs that would be highlighted within the brochure include Heritage's Caregiver Support program and services, Family Caregiver Center of Mercy program and services, and ISU Extension & Outreach "Powerful Tools for Caregivers" classes and other caregiver support classes.
- Community engagement and service goals have been created using Area Plan consumer and unit projections, census demographic data, and GIS thematic maps to target those most in need of long-term services and supports within each county. This information will be reviewed by the Caregiver Focus Group for input on how best to reach this population.
- Heritage staff will distribute materials to the Family Caregiver Center of Mercy, area hospitals, doctors' offices, and other local health and human service agencies.

GOAL 2, SERVICE GAP #3: CAREGIVERS WITHIN THE HERITAGE SERVICES AREA LACK CAREGIVER TRAINING OPPORTUNITIES AND RESOURCES.

Strategies to address service gap.

- Expand "Powerful Tools for Caregivers" training into rural counties including: Benton, Cedar, Iowa, Jones, Washington counties.
- Heritage has developed educational materials for persons newly diagnosed with dementia in partnership with the University of Iowa College of Public Health. Heritage staff will assist the clinical departments at the University of Iowa Hospitals and Clinics by educating newly diagnosed persons with dementia and assist getting them connected to supportive services.
- Heritage researched caregiver programs across the United States and found a caregiver education program developed by the Rosalynn Carter Institute for Caregiving. Materials will be presented to the Caregiver Focus Group to receive feedback from community partners to further customize this training tool for our area.
- Heritage will work collaboratively to address the shortage of direct care workers that in need to meet the demands of a growing number of elderly citizens. Heritage will work with Kirkwood Community College, the University of Iowa and other educational institutions in the area to provide necessary training to enable their students to provide the services needed and to conduct research needed to better understand how best to serve individuals at the various stages in the aging process.

GOAL 2, SERVICE GAP #4: HIGH NUTRITION RISK INDIVIDUALS WITHIN THE HERITAGE SERVICE AREA LACK SUFFICIENT NUTRITION EDUCATION AND NUTRITION COUNSELING.

Strategies to address service gap.

- Develop fact sheets on Nutrition Counseling to distribute to consumers.
- Arrange for Hy-Vee Dietician to speak quarterly at all Encore Café locations about the benefits of Nutrition counseling.
- Expand Nutrition Education offerings to caregiver groups through the Heritage Caregiver Planning Committee and Family Caregiver Center of Mercy, area hospitals, doctors' offices, and other local health and human service agencies that see persons that are at nutritional risk.
- Work with Elder Rights Specialists to utilize nutrition risk screening tool with those consumers in the EAPA program.
- Present at the SIMS/TAV Health Advisory Committee on Nutrition Counseling
- Provide education on high nutrition risk consumers and nutrition counseling during regional Site Manager meetings.
- Conduct a training on nutrition risk scores and available resources to internal EAPA program staff and Options Counselors.

Goal 3: Iowa Aging Network will enable Older Iowans to remain in their own residence and community of choice.

Agency programs and services that address goal 3.

Heritage utilizes a combination of home and community-based service provision, advocacy, and partnerships to enable older Iowans to remain in their own residence and community of choice with high quality of life for as long as possible. The information below summarizes current and planned activities to achieve this goal.

Heritage provides and contracts for the provision of home and community-based services and advocates for services that enable older adults to remain in the residence and community of choice for as long as possible. The information below summarizes current and planned activities to achieve this goal. Although funding is not directed toward housing, it is important to note that Heritage will continue to advocate for and educate the community about the importance of universal design, affordable housing, home modifications, and affordable services that ensure older adults can remain independent in their homes and avoid or delay institutionalization. Such housing options are key to living in age-friendly communities.

Federally-funded Older Americans Act and State-funded Elder Services

CASE MANAGEMENT

In FY2018, 41 consumers were provided with 562 units of case management services. Heritage consumers that use case management services average 78 years-of age, are typically White (85%), female (66%), living alone (73%) and low-income (46%). Consumers for this service are primarily identified through service referral by Options Counselors and Elder Rights Specialists. Typical services are provided face-to-face or via phone and consist of an in-depth assessment, development of a care plan to connect to in-home services and supports, and ongoing contact with consumers as a long-term service.

At this time, one FTE case manager is responsible for 100% of the case management service consumers. The most significant challenge is related to ensuring supports and services are available to assist case management consumers remain in the home and community of their choice for as long as possible. Ongoing evaluation of the performance measures for case management include:

- Increasing presence in rural areas.
- Increasing diversity of consumers served.
- Increasing referrals from Options Counselors and Elder Rights Specialists.
- Establishing a waiting list for when the OAA Case Management case load reaches 65 consumers.
- Continuous evaluation of meeting needs and discharging from the program when/if appropriate.

- Evaluating staff productivity rates – comparing hours worked with the services logged into WellSky.
- Making program adjustments as needed with proposed Iowa Code for the Service of Case Management.

***Performance Measures*.** The following performance measures are utilized to determine effectiveness of service in meeting goal:

Measure	Purpose: Evaluate Agency's Ability…
Percentage of Case Management cases closed because case management service was no longer needed.	To ensure Case Management clients receive the supports and services they need to remain at residence of choice for as long as they need or desire them.
Average number of months a Case Management consumer experiencing independent living impairments is able to remain safely at home prior to transitioning to facility.	To ensure Case Management clients receive the supports and services they need to remain at residence of choice for as long as they need or desire them.

NUTRITION AND WELLNESS SERVICES

Congregate Meal.

In FY2018, 861 consumers were provided with 248,552 congregate meals. Congregate meal consumers are typically aged 75 yrs. or over (71%), White (98%) female (67%), live alone (52%), and (23%) with high nutritional risk. Congregate meals are currently provided at sixteen dining sites, by seven subcontractors, who range from non-profit organizations, to county governments and local city governments. The vast majority of the dining sites provide a hot lunch meal at least four-five days per week, with a small number of sites serving either weekly or every other week.

Congregate sites, particularly in rural settings, are facing decline in participation, competition from restaurants with more convenient hours of operation, and the ability to order food they want to eat. Heritage continues to provide technical assistance regarding the master menu cycle, responding to annual surveys, identifying methods for retaining and re-investing program income/donations into the congregate site, and identifying modernized concepts for congregate meal programs. Heritage attempts to reduce the food costs for providers through a purchasing program from a common manufacturer. In addition, Heritage is working on developing connections in Washington County where at this time; there is not a meal provider. This is an opportunity for Heritage to replicate the success of Encore Café Washington County.

In 2018/2019, Heritage implemented the Encore Café concept, with the assistance of an Innovation in Nutrition Grant, in collaboration with the Iowa Department on Aging. This innovative concept offers a choice menu, a salad bar, and a fresh service delivery model where

beverages are served and the reusable service items are cleared by volunteers. Through the implementation of the Encore Café concept, it has become apparent, that a participant is willing to contribute to a meal/program where the perceived value and experience is higher than other similar locations.

Emerging issues for this program is a trending decline of consumers, as stated above. With the Nutrition Innovation Grant that Heritage received, Heritage found that customer perceived value and experience needs to be paid close attention to for sites to remain viable and attract the "younger old adult". The Encore Café concept involves not having a set serving time, offering of a choice menu and salad bar where volunteers serve coffee and water and clean up dishes just as you would see in a restaurant. With the food vendor of Hy-Vee, costs are minimized through their purchase power, onsite Dietician analyzes the menus and their kitchens have capability of producing unique menus such as soup/salads, cultural meals, taco/potato bars and brunch menus that this new clientele are now wanting and seeking elsewhere.

New initiatives include the opening of Encore Café on the west side of Cedar Rapids. This location was determined by percentage of older adults and African refugees living in this area and no site available. Heritage has worked with Iowa Department on Aging, Iowa Department on Aging to translate the Consumer Intake Form into the language of Kirundi. The translator on site reviewed this translation and has suggestions to include those that speak Swahili. Heritage will put together a focus group at this location to find what cultural sensitivities Heritage should be aware of with customs and food preferences. Heritage is also taking a more active role in helping congregate sites market themselves. This will include how they advertise, production of brochures and utilization of social media. This effort will continue throughout the 2-year plan.

Home Delivered Meals.

In FY2018, 1,546 consumers were provided with 257,069 home delivered meals. Home delivered meals consumers are typically aged 75 yrs. or over (67%), White (95%) female (63%), with high nutritional risk (67%), and live alone (64%). Home delivered meals are provided by six nutrition subcontractors who are organized as non-profit agencies, county governments, and city governments. Meals are either hot or cold depending on the provider and the need of the consumer. Shelf-stable meals are provided for emergency preparedness, as funding allows. Meals are delivered throughout the PSA.

Recent small decrease in the number of meals served has raised concern for Heritage, although the demand remains higher than for congregate meal settings. To address this concern, one of the contracted nutrition subcontractors, is currently offering a choice menu for home delivered consumers, while a framework for other nutrition providers to offer a choice menu is currently under research and development.

While meals are delivered five days per week, providers offer frozen or extra hot meals for those needing meals through the weekend or for holidays. Each participant is also given at least one meal for emergencies such as weather or other issues that would prevent a meal being

delivered to the consumer. Additionally, several providers offer breakfast bags to participants who have little access to nutritious food or are consider at high nutritional risk.

Evidence-Based Health Activities. (Taxonomy of Health Promotion: Evidenced Based – Mandatory)

In FY2018, 15 consumers were provided with evidence-based health activities. The typical evidenced-based health client is between the ages of 60 – 74 yrs., female (53%), Caucasian (100%), living in an urban setting (93%), lives alone (47%), with a high nutritional risk (33%).

- *Powerful Tools for Caregivers* – Provides family caregivers training on the skills needed to care for oneself. This six-week course is typically held once a week in community centers, hospitals, and churches, although anywhere in the community is acceptable. Those that attend are current caregivers and caregivers whose loved one has passed. Caregivers are typically in their mid-50 and older and are commonly caring for a loved one with memory impairment or cancer-related health problems.
- *Chronic Disease Self-Management Program (*CDSMP) – This evidence-based program is licensed through Stanford University and helps program participants acquire skills of decision making, goal setting, problem solving, and action planning through topics such as exercise, meditation, better sleep, communication with health care providers and nutrition. Heritage employs a Master T-Trainer for this program, which has historically been provided in partnership with Mercy Medical Center and conducted at health care provider offices, churches, senior centers, and retirement communities. Classes run 2 ½ hours 1x weekly for 6 weeks The program at Mercy is ending during the current fiscal year and Heritage will identify ways to conduct this program with current staff for the immediate future with hopes of expansion during the next several years. It is necessary to note that Heritage staff limitations will result in fewer classes conducted but it remains dedicated to strengthening this program as soon as possible.
- *Aqua Exercise* – This warm-water exercise program is suitable for every fitness level, and is shown to reduce pain and improve overall health. Exercises include range of motion, muscle-strengthening, socialization activities and an optional, moderate intensity aerobic component. Target Audience: Adults with arthritis, related rheumatic diseases or musculoskeletal conditions, ranging from people who are older, sedentary and very limited by impaired joint mobility to those who are relatively active with only mild joint involvement.
- *Matter of Balance* – is an 8 weekly or twice weekly sessions, 2-hour sessions addressing reducing fall risk and fear of falling. Target Audience: Adults 60+ who are ambulatory, able to problem solve, concerned about falling, interested in improving flexibility, balance and strength and have restricted their activities because of concerns about falling. It emphasizes practical coping strategies to reduce fear of falling and teach fall prevention strategies, structured group intervention activities include group discussion, problem-solving, skill building, assertiveness training, videos, sharing practical solutions and exercise training.
- Heritage is also exploring adding the programs of Tai Chi and Stepping on this fiscal year.

Health Promotion and Disease Prevention. (Taxonomy Health Promotion: Non-Evidenced Based. – Optional)

Heritage will not be opening this optional taxonomy this year. The Heritage region is rich with agencies that provide free testing for health screenings, prevention of depression and other preventative services.

***Performance Measures*.** The following performance measures are utilized to determine effectiveness of service in meeting goal:

Measure	Purpose: Evaluate Agency's Ability…
Of congregate meal consumers served who may be socially isolated, percentage eating 4 meals at meal site in a month.	To ensure those congregate meal consumers who are potentially socially isolated have the opportunity to socialize in their community.
Of home delivered meal consumers served who may be socially isolated, percentage receiving at least 8 meals in a month.	To ensure those home delivered meal consumers who are potentially socially isolated receive regular contact with a meal delivery person.

HOME AND COMMUNITY BASED SERVICES

In Home Services.

In Home Services are provided via subcontracts following a determination of need and eligibility for specific services by Heritage staff. Contracted services are provided based on the needs of the consumers utilizing the services. Heritage has a subcontractor identified through an RFP process for Chore. Emergency Response Systems, Material Aid and Supplemental Services are not provided directly by Heritage, but purchased through community agencies and organizations on behalf of the consumer. Consumer should have no other reasonable funding source and purchases are made on the basis of available funding.

<u>Chore</u>

In FY2018, 95 consumers were provided with chore services. The typical Chore consumer is a White (94%), Female (74%), between the ages of 60-74 yrs. (52%), and lives alone (75%). Chore services are delivered primarily through a subcontractor identified through the Heritage RFP process. Previously, Chore Services were only available in Linn County. However, Chore Services have been expanded into Johnson County for this Area Plan despite difficulties expanding this service due to limited funding and low reimbursement rates from comparable funders (e.g. Medicaid). Heritage may direct service dollars for chore services based on consumer referrals from Case Managers, Elder Rights Specialists, Options Counselors and I&A Specialists when unmet chore needs are identified. This is determined through an established assessment through referral process.

The use of funds are varied, but common needs are for ramps to access their home, home repairs, lawn care, and snow removal. The provision of funds outside of the subcontractor scope is based on a person centered assessment with a Heritage professional staff member.

Emergency Response Systems

This is a new service taxonomy, previously reported under Material Aid. Heritage will purchase this service. Service is provided based on consumer referrals from Case Managers, Elder Rights Specialists, Options Counselors and I&A Specialists when needs are identified and funding is available. This is determined through an established assessment through referral process.

Material Aid

In FY2018, 48 consumers were provided with 1,207 units of material aid. The typical Material Aid consumer is 74-year-old female (70%), White (87%), lives alone (60%), and has a high nutritional risk (62%). Heritage will purchase this service. Service is provided based on consumer referrals from Case Managers, Elder Rights Specialists, Options Counselors and I&A Specialists when needs are identified and funding is available. This is determined through an established assessment through referral process. The use of funds are varied, but common needs may include monthly costs heating to prevent a shut off and purchasing of essential consumable supplies such as incontinence products. The provision these funds are especially diverse and are based on a person centered assessment with a Heritage professional staff member.

Community Based Services.

Community Based Services are primarily provided by subcontractors with many of the referrals initiated by Heritage staff. Heritage may also provide services based on need and available direct service funds. Services provided include: adult day health services, assisted transportation, and transportation.

Adult Day Health Services

FY2018, 55 consumers were provided with 8,320 units of adult day health services. The typical Adult Day Health consumer is between the ages of 60-74 (49%), female (53%), White (98%), and lives alone (40%). Day Health services are delivered primarily through subcontractors identified through the Heritage RFP process. Services are available throughout the PSA via four licensed Adult Day Health Centers. Three of the four centers are nationally accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF). Direct service funds may be used based on documented determination of need(s), completion of a person-centered assessment process, and availability of funds.

Assisted Transportation

In FY2018, 101 consumers were provided with 1,279 assisted transportation services. The typical Assisted Transportation consumer is over age 75 (78%), White (100%), and lives alone (75%). Assisted Transportation services are delivered primarily through subcontractors identified through the Heritage RFP process. Services are available in Benton and Jones County. All Assisted Transportation is provided by volunteer drivers. Direct service funds may be used based on documented determination of need(s), completion of a person-centered assessment process, and availability of funds. Assisted Transportation provides transport with an escort primarily to medical appointments throughout the region.

Transportation

In FY2018, 217 consumers were provided with 6,098 transportation services. The typical Transportation consumer is over the age of 75 (64%), female (75%), White (96%), lives alone (71%), with low income (28%). Transportation services are delivered primarily through subcontractors identified through the Heritage RFP process. Transportation services are provided by organizations in Linn and Cedar counties. Based on the organizations strategy and RFP proposal, some providers are willing to travel outside of the county, some provide rides for essential errands (e.g. going to the store, trips to the pharmacy). Transportation services include: medical appointments and essential errands transports as well as trips to the hairdresser, social events and religious services provided as well, which are essential to reducing isolation and maintaining independence in the community. Direct service funds may be used based on documented determination of need(s), completion of a person-centered assessment process, and availability of funds.

CAREGIVER SERVICES

Heritage provides caregiver services to an adult family member or another individual, who is an "informal" provider of in-home and community care to an older individual or to an individual with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction. Caregiver services are also available for a grandparent, a step-grandparent or other relative caregiver of a child by blood or marriage who is 55 years of age or older and lives with the child; is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child; and has a legal relationship to the child, as such legal custody or guardianship, or is raising the child informally.

Counseling.

Caregiver options counseling typically lasts for two or three visits, however, caregivers can schedule for a weekly or monthly check-in by our Family Caregiver Specialist as needed to help reduce their caregiver stress and problem solve.

In FY2018, 31 caregivers received 35 units of caregiver counseling. The typical consumer of Caregiver Counseling are White (100%), female (83%), between the ages of 60-74 yrs. (78%), and is a daughter/daughter-in-law (39%) or wife (32%). Heritage provides emotional support over the phone and face-to-face to caregivers through a Family Caregiver Specialist and also, for general

information support, from Information and Referral Specialists. Support commonly addresses emotional support, caregiver stress, and identification of community supports and services. Emerging trends for Caregiver Counseling services include increased need for education on dementia issues and care topics, outreach to working caregivers, and training family caregivers with skills associated with caring for themselves while meeting the needs of their loved one.

Respite Care.

In 2018, 154 caregivers received 13,868 units of CG respite care. The typical consumer of CG Respite is a White (98%), Female (73%), and between the ages of 60-74 yrs. (53%). Respite is primarily provided by subcontractors but may also be accessible through Supplemental Services based on documented determination of need(s), completion of a person-centered assessment process, and availability of funds.

Respite care services are delivered primarily through a subcontractors identified through the Heritage RFP process. Services are available throughout the majority of the PSA yet demand for these services are greater than funding that is typically available, limitations in affordable provider, especially in extremely rural areas of the PSA. Heritage plans to utilize direct service dollars for respite care services based on consumer referrals from Case Managers, Elder Abuse Specialists, Options Counselors and I&A Specialists when unmet respite care needs are identified. This is determined through an established assessment through referral process. The provision of funds is based on a person centered assessment with a Heritage professional staff member.

***Performance Measures*.** The following performance measures are utilized to determine effectiveness of service in meeting goal:

Measure	Purpose: Evaluate Agency's Ability…
Percentage of caregiver consumers indicating caregiver counseling and/or respite care service allowed them to maintain their caregiver role.	To ensure caregivers receive the supports and services they need to continue to provide informal care to the care recipient.

FINANCIAL ASSISTANCE: MATERIAL AID & CAREGIVER SUPPLEMENTAL SERVICES

In order to assess for needed financial assistance and access to Heritage Material Aid and Caregiver Supplemental Services, Heritage program staff completes a needs assessment with family caregivers and/or consumers over the phone or within a home visit. Once the need for assistance is identified, the Heritage program staff submits a request for funding that includes caregiver and care recipient demographics or general consumer, a description of need, and funding requested. The Program Manager and Fiscal Director review and approve all funding requests prior to services being established and delivered. All funding requests are tracked within an Excel spreadsheet and also entered within the Wellsky database to capture service delivery units. Typical use of these funds include: respite care, liquid supplements, incontinence supplies, durable medical equipment essential to the caregiver role and more.

Services / Initiative Funded Through Other Sources

Powerful Tools for Caregivers – Provides family caregivers training on the skills needed to care for oneself. This six-week course is typically held once-a-week in community centers, hospitals, and churches, although anywhere in the community is acceptable. Those that attend are current caregivers and caregivers whose loved one has passed. Caregivers are typically in their mid-50 and older and are commonly caring for a loved one with memory impairment or cancer-related health problems – provides emotional support, face-to-face visits, in-depth assessment of need, eligibility of benefit programs review, connection to in-home supports, and ongoing support to caregivers.

Caregiver Wellness Day Event – Heritage annually hosts an event with sponsorships in observance of National Family Caregivers Month in November. This year's event is scheduled for November 4, 2019. This was a free event designed to support the wellbeing of caregivers and promote self-care through various therapeutic activities and informational speakers. In FY2019 this event served 148 caregivers and brought in 62 vendors.

Health Education & CG Options Counseling for persons with Dementia – Heritage has entered into contract with the University of Iowa College of Public Health to have a full-time staff position to develop education toolkit and implementation protocol for providing options counseling to persons newly diagnosed with dementia. Agency caregiver staff hold office hours at this location two and a half days a week to assist families and individuals connect with home and community based services. The outcome of this partnership is to minimize negative consequences of Alzheimer's disease and related dementia diagnosis by enhancing the support systems of affected families as they start their new and challenging phase of life as patients and caregivers.

Older Worker Employment Program – The Older Worker Employment Program assists individuals 55 years of age and above with a disability with employment.

The Older Worker Employment Program is an innovative program begun in 2014 in partnership with the Iowa Vocational Rehabilitation Services (IVRS), Iowa Department on Aging and Heritage to assist people, aged 55 and above in our seven county region, with a documented disability to obtain and maintain gainful employment. This program requires a referral from Iowa Vocational Rehabilitation Services. Upon receiving the referral, Heritage's Employment Specialist can begin the process to assist based on the individual's needs and goals.

The Employment Specialist helps people through coordination and assistance of an employment placement plan, assessment of skill sets, goals, resume building, refining of the job search, obtaining job leads, setting up informational interviews, job shadowing opportunities, assessments, internships and placement in a permanent unsubsidized job.. The Employment Specialist is also of assistance to the employer and employee by monitoring the employee's progress and by providing needed support services and follow up for a full year.

Nutrition Innovation Grant – on a national level, Heritage, along with Iowa Department on Aging are working with the Administration for Community Living on a Nutrition Innovation

grant. This grant is awarded to only 4 in the country. Linn County was specified for this project as it was showing a high decline in congregate meal participants. The concept of Encore Café was built based on vast research of population of consumers related to nearest access to food pantries, congregate sites to name a few. The city of Marion was chosen because of the data stated above, but also due to City locations that trended in older adults congregating specifically the Public Library and the at Lowe Park. Through Heritage's leadership a meeting was scheduled of all these City Departments including the Mayor to begin discussions of opening sites at location place called the "Encore Café, Your Second Call to Enhance Your Health." This concept was awarded to Hy-Vee of Marion through a RFQ. Hy-Vee has a dominating presence in this city and has seen increases in calls of caregivers wanting Hy-Vee to deliver meals to homebound parents and they are a restaurant of choice for many. This partnership has been hugely successful: serving 790 consumers and 6,662 meals from May, 2018 – February, 2019. This concept offers a range of serving times where participants can come eat as they so choose, socialize with others, menu of choice along with salad bar with entertainment, chef demonstrations, educational opportunities and environments where they check out books, walk trails, enjoy an amphitheater and other programming. This concept is being translated into a guide that can be replicated nationwide with West Virginia being the first state to establish a Zoom meeting with their State Unit on Aging, AAA and local boards of supervisors with this Agency. This may lead to a site visit from the West Virginia delegation in the future. The success has been paramount largely due to the in-kind partners in the City of Marion, the contract with Hy-Vee and their food service, Dietician and other in-kind products that they provide. This is a true partnership built on need, and bringing together community resources to address need via public and private agencies.

To enhance this model, Heritage staff through a partnership from St. Marks Church, expanded Encore Café to this location on the NW side of Cedar Rapids. This location is close to an African refugee community and worked with Iowa Department on Aging to have the Consumer Intake Form translated into the language of preference. Heritage will host a focus group to determine cultural menus to enhance increased participation.

Knowing that Washington County is a without a congregate meal provider at this, Heritage will explore, implement and expand Encore Café into this County during this Area Plan Cycle.

Collaborations/Partnerships to support Goal 3

Family Caregiver of Mercy – At the local level, Heritage has established relationships with providers such as the Family Caregiver Center of Mercy Medical Center. Heritage caregiver staff hold office hours at this location once a week to offer support to caregivers with challenging needs. The Options Counselor is able to identify person centered plans of addressing these increased challenges, allows Heritage staff in-kind office support and places the staff where people go to access services. This partnership also offers both organizations a chance to provide services that would be mutually beneficial to consumers of both agencies and helps defray costs that could be associated with co-locating a staff member at an organization. This unique partnership increases caregiver referrals for services and also creates efficiencies that makes OAA caregiver funding go even further.

Iowa Department on Aging – At the State level, Heritage will be actively involved in the drafting process of any new proposed rule changes with the Iowa Department on Aging. Examples of this are providing written comments on proposed rules, making department personnel aware of policies that impede access to services, etc.

Heritage will also stay abreast of national trends through conferences, publications, trainings and other information sources to ensure the Heritage Family Caregiver Program continues to meet the current and future needs of the target population.

The Farmer's Market Senior Nutrition Program – is a hugely popular federal program that could not be administered at the local level without a great deal of community collaboration. Heritage collaborates with over 30 different distribution locations to distribute vouchers supplied by the Iowa Department of Agriculture and Land Stewardship for seniors to use at local Farmer's Markets to purchase fresh fruits and vegetables and certain other products. This program allows participants the opportunity to purchase fresh locally grown fruits and vegetables. This program also sustains some participants with limited resources.

Meals on Wheels of Association of America (MOWAA) – There is an ongoing successful relationship with MOWAA in a variety of ways and will continue to develop this relationship as new opportunities emerge. The AAA division of Kirkwood collaborated with MOWAA to host forums, present at conferences and has benefited from past funding opportunities through MOWAA grants. This will continue.

The Tails-a-Waggin' Pet Assistance Program – is a unique program designed to meet a hidden service gap related to the Nutrition Program. Tails-a-Waggin' aims to serve frail older adults living with limited incomes who struggle financially and physically to care for both themselves and their companion pets by providing free and home-delivered pet food and supplies. Heritage collaborates with several local organizations to make this program possible. One of those partnerships is with Cedar Rapids Animals, a similar program that serves the Cedar Rapids metro area and close-by suburbs. With Tails-a-Waggin' serving the outlying and rural areas, the entire Planning and Services Area has access to this assistance. Additionally, The Heritage Tails-a-Waggin' program partners with other programs like Case Management, Options Counseling and home delivered meal providers to get products to many of the participants. These partnerships will continue into the future. In the past, local organizations and businesses such as The Hotel at Kirkwood Community College, Banfield Charitable Trust/Meals on Wheels Association, and Petco have made donations towards the program. Heritage is looking at additional partnerships with mutual goals to sustain the growing program.

Strategies to Address Service Gaps

In response to the Iowa Department on Aging's three common statewide goals, Heritage followed up by holding a public meeting, where general service gaps identified and potential strategies were developed. Focus groups were organized around each of these goals, and during a staff retreat, consumer demographic and census data were reviewed and these gaps and strategies were developed into more plans, discussed further below. Each of these focus groups continue to meet

to review strategy implementation and that projected services goals and outcomes are being met. Results from Focus Group discussions are reported to the Advisory Council.

The HCBS Focus Group spent the past year reviewing data from the comprehensive regional development strategy for 2040's Transportation Assessment. This report shard data on percentage of persons aged 65+, disabled, in poverty and with no vehicle. The group also reviewed data from the National Aging and Disability Transportation Center. This report shared common transportation needs across population groups such as adults 60+, younger adults with a disability 18-59 and caregivers who provide transportation. Below are the three keys findings driving our work with transportation efforts.

1. "Those who give up driving face big barriers getting around. The can no longer do the things they need and want to do. They face physical isolation, frustration, and feel dependent and trapped.
2. Older adults and younger adults with disabilities who do not drive face many barriers, including access to affordable transportation alternatives.
3. There is no single "go-to" information resources for alternative transportation options. Many turn to family and friends for information about options."
   (Source: NADTC, Transportation Needs and Assessment December 2018.)

GOAL 3, SERVICE GAP #1: OLDER ADULTS WITHIN THE HERITAGE SERVICE AREA LACK AFFORDABLE NON-MEDICAL TRANSPORTATION OPTIONS ON EVENING AND WEEKENDS.

Strategies to address service gap.

- Strengthen partnerships within each community to increase volunteerism that helps meet the transportation needs of older persons for non-medical supports and services.
- Hold transportation specific trainings with Task Forces on Aging in each county to increase knowledge on how to use existing modes of transportation as well as recruit additional volunteers.
- Work with local mobility managers and other partners on the HCBS Focus Group to ensure the regional transportation brochure also includes volunteer transportation options.

GOAL 3, SERVICE GAP #2: WORKING CAREGIVERS WITHIN THE HERITAGE SERVICE AREA LACK KNOWLEDGE ON HOW TO ACCESS AVAILABLE RESOURCES TO ASSIST WITH CAREGIVING.

Strategies to address service gap.

- Increase access to information and services for working caregivers. Heritage staff will distribute materials to human resource departments' of all major businesses in each county.
- Request lunch and learn presentation opportunities of all major businesses in each county to increase awareness of caregiver services to working caregivers.

- Develop partnerships with employers and their Employee Assistance Programs (EAP) to Family Caregiver Specialists to provide on-site fee-for-service caregiver support program. Developing a fee-for-service caregiver support program will assist in diversifying Heritage's funding stream, build program sustainability, and will increase services to caregivers in need.

GOAL 3, SERVICE GAP #3: CAREGIVER WHO CARE FOR ADULT CHILDREN WITH DISABILITIES WITHIN THE HERITAGE SERVICE AREA LACK KNOWLEDGE ON HOW TO ACCESS AVAILABLE RESOURCES.

Strategies to address service gap.

- Heritage continues to utilize ADRC Unmet Needs funds to serve older adults who are caring for adult children with disabilities.
- Heritage continues to keep track of the number of cases where the Family Caregiver Specialist delivers service to older adults who are caring for an adult children with disabilities.
- The Caregiver Focus Group will review U.S. Census data on the number of parents/grandparents who are caregiver for young adults ages 18-59.
- Heritage will explore receiving Powerful Tools for Caregivers that focuses on children with special health and behavioral needs. We anticipate this being a growing issue as adult children with special needs are living longer and outgrowing their caregiver parents.

GOAL 3, SERVICE GAP #4: OLDER ADULTS WITHIN THE HERITAGE SERVICE AREA NEED ACCESS TO NUTRITIOUS MEALS.

Strategies to address service gap.

- Replicate Encore Café at a location in Washington County.
- Survey older adults regarding a wide range of issues related to nutrition services that include aspects of attitudes toward accessing congregate meal sites, types of places they tend to "congregate" with other older adults for meals, and what would motivate them to congregate for meals as they age.
- Compare findings to national data to develop a strategy for recommended changes in the model of nutrition meal programs.
- Create training and education modules that addresses stigma in receiving meal services and for providers and the community to promote changes within the congregate model based on findings.
- Establish communication plan with urban/rural media about the report findings and proposed changes in communities.
- Work with subcontracted nutrition providers to evaluate food costs and opportunities to minimize them.
- Work towards a needs assessment in determining food deserts for seniors and work to alleviate them by opening dining sites or existing congregations point such as HY-VEE, local restaurants to offer OAA meals to seniors in the food insecure areas.

GOAL 3, SERVICE GAP #5: THE HERITAGE AGENCY NEEDS TO INCREASE ACCESS TO INFORMATION, EDUCATION AND ADVOCACY EFFORTS WITHIN THE SERVICE AREA.

Strategies to address service gap.

- Heritage staff will work with Kirkwood's Information Technologies Department to create and launch a new website to strengthen its education and outreach efforts throughout the PSA with timely information about services, advocacy efforts, and educational opportunities for older adults, individuals with disabilities, and family caregivers.
- The Heritage Advocacy Committee will continue to advocate for a comprehensive elder abuse law and multidisciplinary strategy to prevent elder abuse, provide the services needed to the abused and penalties for the abusers.
- Expand individual advocacy efforts to prevent pre-mature institutional placement and a successful closure from Case Management.
    - Heritage will increase communication and referrals between internal care programs to ensure that consumers in need of Case Management services are admitted in a timely fashion to ensure that they are receiving support for as long as possible until it is no longer needed.
    - Prompt and appropriate admission to the Case Management program will increase the number of months active in the program to prevent pre-mature institutionalization.

Section 2: Performance and Service Projections

Performance Outcome & Fiscal Year Target

Goal: Iowa Aging Network will protect and enhance the rights; and prevent the abuse, neglect, and exploitation of older Iowans.

Program: Elder Abuse Prevention and Awareness (EAPA)

Performance Outcome Measure	Evaluate Agency's Ability…	FY2020 Target
Percentage of EAPA Consultation consumers whose needs are met through provider referrals.	To provide information & referrals for self-advocacy in resolving abuse, neglect, or exploitation situation.	75%
Percentage of EAPA Assessment & Intervention consumer cases closed with EAPA services no longer needed.	To resolve consumer's abuse, neglect, or exploitation situation.	50%

Goal: Iowa Aging Network will work with older Iowans, Iowans with disabilities, and caregivers as they fully engage and participate in their communities, make informed decisions, and exercise self-determination and control about their independence, well-being, and health.

Program: LifeLong Links

Performance Outcome Measure	Evaluate Agency's Ability…	FY2020 Target
Percentage of LifeLong Links callers indicating they received the information they were seeking.	To assess and provide information appropriate to caller's need (from consumer's perspective).	90%
Percentage of Options Counseling consumers who indicate they were provided information to make an informed decision on goal and service need.	To conduct an interactive process where individuals receive guidance in their deliberations to make informed choices about long-term supports.	90%

Service(s): Nutrition Education and Nutrition Counseling

Performance Outcome Measure	Evaluate Agency's Ability…	FY2020 Target
Of all congregate meal consumers identified as high nutrition risk, percentage receiving nutrition education.	To ensure those at risk for poor nutrition and health status receive information so that they have better health enhancing options.	60%
Percent change in consumers receiving nutrition counseling from previous FY (percentage and number).	To ensure those at risk for poor nutrition and health status receive counseling so that they have the opportunity to improve their health literacy and information for optimal nutrient intake.	2.9% increase serving 36 consumers

Goal: Iowa Aging Network will enable Older Iowans to remain in their own residence and community of choice.

Service: Case Management

Performance Outcome Measure	Evaluate Agency's Ability…	FY2020 Target
Percentage of Case Management cases closed because case management service was no longer needed.	To ensure Case Management clients receive the supports and services they need to remain at residence of choice for as long as they need or desire them.	50%
Average number of months a Case Management consumer experiencing independent living impairments is able to remain safely at home prior to transitioning to facility.	To ensure Case Management clients receive the supports and services they need to remain at residence of choice for as long as they need or desire them.	54

Service(s): Congregate Meal and Home Delivered Meal

Performance Outcome Measure	Evaluate Agency's Ability…	FY2020 Target
Of congregate meal consumers served who may be socially isolated, percentage eating 4 meals at meal site in a month.	To ensure those congregate meal consumers who are potentially socially isolated have the opportunity to socialize in their community.	90%
Of home delivered meal consumers served who may be socially isolated, percentage receiving at least 8 meals in a month.	To ensure those home delivered meal consumers who are potentially socially isolated receive regular contact with a meal delivery person.	80%

Service(s): Caregiver Counseling and Caregiver Respite Care

Performance Outcome Measure	Evaluate Agency's Ability…	FY2020 Target
Percentage of caregiver consumers indicating caregiver counseling and/or respite care service allowed them to maintain their caregiver role.	To ensure caregivers receive the supports and services they need to continue to provide informal care to the care recipient.	85%

FY 2020 Projected Older Americans Act Consumers and Service Units

Iowa Department on Aging | Agency Admin | Consumers | Rosters | Aggregate Services | FSRs | Reports

Help | PAULA.LANGE@IOWAID

IAFRS Menu

Form 3A-1

Heritage Area Agency on Aging — FY 2020

This report has NOT been finalized — Budget Report, Version 1

Form 3A-1

SERVICE		Service Units Provided	Consumers Served	60+ Rural	60+ Minority	60+ Minority Below Poverty	60+ Below Poverty	SLP Low Income	SLP Moderate Income
01A: Administration	General Aging								
	Caregiver								
1: Personal Care	General Aging								
2: Homemaker	General Aging								
3: Chore	General Aging	1,649	95		6	2	28		
4: Home Delivered Nutrition	General Aging	262,993	1,783	65	89	39	635		
5: Adult Day Care / Health	General Aging	10,800	81	5	2		15		
6: Case Management	General Aging	530	55	1	8	4	25		
7: Congregate Nutrition	General Aging	58,183	1,765	80	28	18	355		
8: Nutrition Counseling	General Aging	40	35	1	2		3		
9: Assisted Transportation	General Aging	1,707	230				72		
10: Transportation	General Aging	6,400	250	14	15	5	69		
11: Legal Assistance	General Aging	792	420	84	84		84		
12: Nutrition Education	General Aging	13,000	2,100	57	80	35	640		
13: Information & Assistance	General Aging	7,400	3,650	189	292	86	1,115		
14: Outreach	General Aging	1,800	1,800						
A01: Material Aid: Home Mod/Repair	General Aging								
B02: HealthPromo: Non Evidence-Based	General Aging								
B04: Emergency Response System	General Aging	16	8						
B05: Behavioral Health Supports	General Aging								
B07: Health Promotion: Evidence-Based	General Aging	75	50	5			9		
C07: EAPA Consultation	General Aging	100	100	7	8	1	22		
C08: EAPA Assessment & Intervention	General Aging	525	65	4	7	1	16		
D01: Training & Education	General Aging	150	4,500	1,215	279	84	1,350		
E05: Options Counseling	General Aging	500	270	20	33	6	71		
F06: MaterialAid: AsstTech Durable MedEquip	General Aging								
F07: Material Aid: Consumable Supplies	General Aging	25	5	2	1	1	2		
F08: Material Aid: Other	General Aging	650	22	6	2	2	6		
CG3: CG Counseling	Caregiver	40	40				4		
CG4: CG Information Services	Caregiver								
CG5: CG Respite	Caregiver								
CG6: CG Supplemental Services	Caregiver	80	8	2	1	1	2		
CG7: CG Home Delivered Nutrition	Caregiver								
CG8: CG Options Counseling	Caregiver	350	250	4	15		15		
CG9: CG Case Management	Caregiver	15	15						
CG10: CG Information & Assistance	Caregiver	500	250	19	9		6		
CG11: CG Support Groups	Caregiver								
CG12: CG Training	Caregiver	250	100	27	6	2	30		
CG13: CG Congregate Nutrition	Caregiver								
CG14: CG Emergency Response System	Caregiver								
CG23: CG RespiteCare: In-Home	Caregiver	5,774	105	3	3		2		
CG24: CG RespiteCare: Out-of-Home (Day)	Caregiver	8,770	82	2			5		
CG25: CG Respite Care: Out-of-Home (Overnight)	Caregiver								
CG26: CG Respite Care: Other	Caregiver								
GO1: GO Access Assistance	Caregiver								
GO2: GO Self-Directed Care	Caregiver								
GO3: GO Counseling	Caregiver								

FY 2020 Projected Older Americans Act Consumers and Service Units (continued)

GO4: GO Information Services	Caregiver								
GO5: GO Respite	Caregiver								
GO6: GO Supplemental Services	Caregiver								
GO7: GO Home Delivered Nutrition	Caregiver								
GO8: GO Options Counseling	Caregiver								
GO9: GO Case Management	Caregiver								
GO10: GO Information & Assistance	Caregiver								
GO11: GO Support Groups	Caregiver								
GO12: GO Training	Caregiver								
GO13: GO Congregate Nutrition	Caregiver								
GO14: GO Emergency Response System	Caregiver								
GO23: GO RespiteCare: In-Home	Caregiver								
GO24: GO RespiteCare: Out-of-Home (Day)	Caregiver								
GO25: GO Respite Care: Out-of-Home (Overnight)	Caregiver								
GO26: GO Respite Care: Other	Caregiver								

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Caregiver Respite Voucher

☒ Agency does **not** use a voucher method for caregivers to obtain respite services.

OR

☐ Agency utilizes a voucher method for caregivers to obtain respite services.

The following table shows the number of persons expected to be served using a voucher method for caregiver respite and which funding sources are expected to be utilized for the vouchers.

Item	Projection
Persons Served - Caregivers of Older Adults	**#**
Does AAA intend to use the funding sources listed below to provide respite services for Caregivers of Older Adults through vouchers?	
OAA Title III E federal funds	**Y or N**
Other - State Expenditure	**Y or N**
Other - Non-State Expenditure	**Y or N**
Program Income Expended	**Y or N**
Persons Served - Older Relative Caregivers	**#**
Does AAA intend to use the funding sources listed below to provide respite services for Older Relative Caregivers through vouchers?	
OAA Title III E federal funds	**Y or N**
Other - State Expenditure	**Y or N**
Other - Non-State Expenditure	**Y or N**
Program Income Expended	**Y or N**

Service Coverage

Information & Service Assistance Services

An "X" indicates the service is offered in the county listed.

Mandatory Services	Benton	Cedar	Iowa	Johnson	Jones	Linn	Washington
Case Management	x	x	x	x	x	x	x
Family Caregiver: Case Management	x	x	x	x	x	x	x
EAPA Assessment & Intervention	x	x	x	x	x	x	x
EAPA Consultation	x	x	x	x	x	x	x
Information & Assistance	x	x	x	x	x	x	x
Family Caregiver: Information & Assistance	x	x	x	x	x	x	x
Legal Assistance	x	x	x	x	x	x	x
Options Counseling	x	x	x	x	x	x	x
Family Caregiver: Options Counseling	x	x	x	x	x	x	x
Family Caregiver: Counseling	x	x	x	x	x	x	x

Optional Services	Benton	Cedar	Iowa	Johnson	Jones	Linn	Washington
Older Relative Caregiver: Information & Assistance							
Older Relative Caregiver: Case Management							
Older Relative Caregiver: Counseling							
Older Relative Caregiver: Options Counseling							

Nutrition & Health Promotion Services

An "X" indicates the service is offered in the county listed.

Mandatory Services	Benton	Cedar	Iowa	Johnson	Jones	Linn	Washington
Congregate Nutrition	x	x	x	x	x	x	x
Health Promotion: Evidence-Based	x	x	x	x	x	x	x
Health Promotion: Non- Evidence-Based	*This is a non-mandatory category						
Home Delivered Nutrition	x	x	x	x	x	x	x
Nutrition Counseling	x	x	x	x	x	x	x
Nutrition Education	x	x	x	x	x	x	x

Optional Services	Benton	Cedar	Iowa	Johnson	Jones	Linn	Washington
Home Delivered Nutrition (Family Caregiver)							
Home Delivered Nutrition (Older Relative Caregiver)							
Congregate Nutrition (Family Caregiver)							
Congregate Nutrition (Older Relative Caregiver)							

Services to Promote Independence

An "X" indicates the service is offered in the county listed.

Optional Services	Benton	Cedar	Iowa	Johnson	Jones	Linn	Washington
Adult Day Care / Health	x	x	x	x	x	x	x
Assisted Transportation	x				x		
Behavioral Health Supports							
Chore				x		x	
Emergency Response System	x	x	x	x	x	x	x
Homemaker							
Material Aid	x	x	x	x	x	x	x
Outreach	x	x	x	x	x	x	x
Personal Care							
Training & Education	x	x	x	x	x	x	x
Transportation		x		x		x	
Information Services (Family Caregiver)							
Respite Care: • In-home(day) • Out-of-home (day) • Out-of-home (overnight) • Other	x	x	x	x	x	x	x

Optional Services	Benton	Cedar	Iowa	Johnson	Jones	Linn	Washington
(Family Caregiver)							
Supplemental Services: • Assistive Technology/Durable Equip/Emergency Response • Consumable Supplies • Home Modifications/Repairs • Legal/Financial Consultation • Homemaker/Chore/Personal Care • Transportation • Nutrition Services (Congregate Meal & HDM) • Other (Family Caregiver)	x	x	x	x	x	x	x
Support Group (Family Caregiver)							
Training (Family Caregiver)	x	x	x	x	x	x	x
Information Services (Older Relative Caregiver)							
Options Counseling (Older Relative Caregiver)							
Respite Care (Older Relative Caregiver)							
Supplemental Services: • Assistive Technology/Durable Equip/Emergency Response • Consumable Supplies • Home Modifications/Repairs • Legal/Financial Consultation • Homemaker/Chore/Personal Care • Transportation • Nutrition Services (Congregate Meal & HDM) • Other (Older Relative Caregiver)							
Support Group (Older Relative Caregiver)							
Training (Older Relative Caregiver)							

Area Plan Service Waiting List

☒ Agency does **not** have a waiting list for any services.

OR

☐ Agency has a waiting list for services as indicated in the following table.

Service with Waiting List	Typical Number of Individuals on Waiting List	Ave Waiting List Time	Waiting List Prioritization Criteria

The following policy will be implemented if and when it is determined a waiting list for services is necessary.

Policy: HAAA will determine priority and maintain a Wait List for services as required in accordance with the reporting manual issues by the Iowa Department on Aging.

Procedures:

1. Before a Wait List is started, a service utilization review must be conducted to justify creation of such a list
2. Iowa Department on Aging must be notified a minimum of 15 business days prior to start of the Wait List
3. HAAA determines the priority of the Wait List as following:
    a. Priority 1: The consumer is in immediate danger
    b. Priority 2: The consumers risk is real and/or foreseeable in the immediate future
    c. Priority 3: The consumer has potential for risk
    d. After priority level is set, service order is based upon a first come, first serve basis. Exceptions to this order may be made when considering the overall at-risk status of an individual with Director approval
4. Individuals eligible for the Elder Abuse Prevention and Awareness program cannot be placed on a wait list for EAPA services. They may be placed on a Wait List for Person Centered Funding assistance.
5. Members of the HAAA management team or designee will manage the Wait List via submitted requests for assistance. Please see the Person Centered Funding policy and procedures.

Section 3: Quality Management

With the changes to our organizational structure effective 7/1/19, HAAA will be reevaluating our efforts in the area of Quality Management. We will be revamping the program with our increased focus on data and with staff's evaluation skills, we are looking forward to enhancing our measurable outcomes and quality in accordance with our set goals, identified gaps and objectives. Continued data collection, remediation, and continuous improvement with continue to be part of our Quality Management programs.

There are currently four main strategies to our overall quality management efforts:

1. Quality Assurance and Improvement Program. The purpose of the Quality Assurance and Improvement Program (QAIP) is to provide a formal process by which Heritage evaluates and identifies any need for improvement or adjustment in agency operations, service delivery, and/or community impact.

2. Statewide Collaborations. Heritage has been working with state partners to improve consistency in quality measures through i4a and Iowa Department on Aging workgroups.

3. Internal Controls. Heritage has assigned Contract Monitors and Grant Managers. The contract monitor is responsible for the monitoring and assessing of the program and subcontractor compliance and performance. This includes written monitoring reports at least quarterly, obtaining participant views and an on-site assessment report at least annually. The role of a Grant Manager is to ensure that Heritage fulfills all obligations of the grant through program activity coordination and achieving grant deliverables.

4. Focus Groups. Heritage established Area Plan focus groups to help program leadership, management, Advisory Council and the Board to further address aspects of the area plan as well as activities, goals, and measures to address service gaps.

Section 4: Public Input

Heritage announced the development of the FY 2020 – 2021 Area Plan on our website, Facebook page and through Public Notice (Iowa City Press Citizen and Cedar Rapids Gazette). Notice was also emailed to all Heritage Board Members, Task Force Members, Advisory Council Members, Key Partner Agencies and State House and Senate Members in our region.

A Public Hearing was held on Tuesday, April 23, 2019 at 9a.m.

Additionally, we offered the option of receiving written comments from the community. The form to provide written comments was emailed to all those receiving notice via email as described above. The form was not required to be used in written comments. One written comment was received.

Area Plan focus groups have been established and provide input as previously described. The Area Plan was also discussed in detail with the Board of Directors and the Advisory Council.

Public Hearing Information

Text Copy of Public Hearing Notice:

NOTICE OF PUBLIC HEARING ON MULTI-YEAR AREA PLAN FOR BENTON, CEDAR, IOWA, JOHNSON, JONES, LINN AND WASHINGTON COUNTIES

To older persons, public officials and other interested parties, pursuant to Iowa Administrative Code Chapter 17 – 6.2(7)a.(2):
The public is notified and invited to attend a public hearing being conducted by Heritage Area Agency on Aging regarding the Fiscal Years 2020 - 2021 Area Plan for the seven county region (Benton, Cedar, Iowa, Johnson, Jones, Linn and Washington counties).
The purpose of the public hearing is to gather input and comments from interested parties, including priority services. A public hearing will be conducted on:
Tuesday, April 23, 2019 from 9:00 – 10:00 a.m. at Heritage Area Agency on Aging, Main Building Conference Room, Kirkwood Community College campus, 6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404.

Agenda:

1. Call to order
2. Purpose of hearing
3. Public Comments on Priority Services
   Title IIIB Priority services are located within the service categories of Access, In-Home and Legal. The minimum percentage (%) of Title IIIB funding required to be expended

within each category are: 1. Access (10%), which includes Information and Assistance, Assisted Transportation, Transportation, Case Management and Outreach. 2. In-Home (5%), which includes Adult Day Care/Health, Chore, Homemaker, and Personal Care. 3. Legal (3%,) which includes Legal Assistance.

   a. Written comments
   b. Other comments

4. Services under consideration to be provided as Direct Services by Heritage
5. Adjournment

The Area Plan will guide Heritage for the period of State Fiscal Years 2020 – 2021. Comments are also welcomed in the written form of choice or by utilizing a form provided on the Heritage website at www.heritageaaa.org. Written comments should be sent to Heritage Area Agency on Aging, Attention Kellie Elliott-Kapparos, Kirkwood Community College, 6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404. The public is invited and encouraged to provide feedback at this hearing opportunity and/or provide written comment.

List of groups to whom the notice was sent and dates:

- The following pages include lists of groups and dates the notice was sent to.

RECEIVED
APR 12 2019

RECEIVED
APR 14 2019

PCmedia
PRESS-CITIZEN MEDIA
PART OF THE USA TODAY NETWORK

HERITAGE AGENCY ON AGING
6301 KIRKWOOD BLVD SW

CEDAR RAPIDS IA 524045260

AFFIDAVIT OF PUBLICATION

State of Wisconsin

County of Brown, ss.:

The undersigned, being first duly sworn on oath, states that the Iowa City Press Citizen, a corporation duly organized and existing under the laws of the State of Iowa, with its principal place of business in Iowa City, Iowa, the publisher of

Iowa City Press Citizen

newspaper of general circulation printed and published in the City of Iowa City, Johnson County, Iowa, and that an advertisement, a printed copy of which is attached as Exhibit "A" and made part of this affidavit, was printed and published in Iowa City Press Citizen on the following dates:

Ad No.	Start Date:	Run Dates:	Cost:
0003478520	4/6/19	04/06/19	$37.17

Copy of Advertisement
Exhibit "A"

Subscribed and sworn to before me by said affiant this

8th day of April, 2019

Notary Public

9-19-21

Commission expires

VICKY FELTY NOTARY PUBLIC STATE OF WISCONSIN

# of Affidavits: 1

OTICE OF PUBLIC HEARING
N MULTI-YEAR AREA PLAN
OR BENTON, CEDAR, IOWA,
OHNSON, JONES, LINN AND
WASHINGTON COUNTIES

older persons, public officials l other interested parties, suant to Iowa Administrative le Chapter 17 – 6.2(7)a.(2): public is notified and invited attend a public hearing being ducted by Heritage Area ency on Aging regarding the cal Years 2020 - 2021 Area Plan the seven county region nton, Cedar, Iowa, Johnson, es, Linn and Washington nties).

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The Gazette

thegazette.com

INVOICE DATE	ACCOUNT #	ACCOUNT NAME	LINES	TIMES
4/10/19	1957	KIRKWOOD-HERITAGE AREA AGENCY ON AGING	1.00 x 68 Li	1
DESCRIPTION legals- Hrg Fiscal Years 2020-2021 Area Plan				

PROOF OF PUBLICATION

I, Zack Kucharski, do state that I am the publisher of THE GAZETTE, a daily newspaper of general circulation in Linn and Johnson, in Iowa. The notice, a printed copy of which is attached, was inserted and published in THE GAZETTE in the issue(s) of 4/10/2019

The reasonable fee for publishing said notice is **$34.79**

By Zack Kucharski

STATE OF IOWA,
Counties of Linn and Johnson } **SS:**

This instrument was acknowledged by Zack Kucharski before me this 10th day of April, 2019

Sandra K Smith
Notary Public in and for the State of Iowa

NOTARIAL SEAL IOWA
SANDRA K SMITH
Commission Number 753223
My Commission Expires
June 11, 2020

NOTICE OF PUBLIC HEARING ON MULTI-YEAR AREA PLAN FOR BENTON, CEDAR, IOWA, JOHNSON, JONES, LINN AND WASHINGTON COUNTIES

To older persons, public officials and other interested parties, pursuant to Iowa Administrative Code Chapter 17 – 6.2(7)a.(2):

The public is notified and invited to attend a public hearing being conducted by Heritage Area Agency on Aging regarding the **Fiscal Years 2020 - 2021 Area Plan** for the seven county region (Benton, Cedar, Iowa, Johnson, Jones, Linn and Washington counties). The purpose of the public hearing is to gather input and comments from interested parties, including priority services. A public hearing will be conducted on:

Tuesday, April 23, 2019 from 9:00 – 10:00 a.m. at Heritage Area Agency on Aging, Main Building Conference Room, Kirkwood Community College campus, 6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404.

Agenda:
1. Call to order
2. Purpose of hearing
3. Public Comments on Priority Services

Title IIIB Priority services are located within the service categories of Access, In-Home and Legal. The minimum percentage (%) of Title IIIB funding required to be expended within each category are: 1. Access (10%), which includes Information and Assistance, Assisted Transportation, Transportation, Case Management and Outreach. 2. In-Home (5%), which includes Adult Day Care/Health, Chore, Homemaker, and Personal Care. 3. Legal (3%,) which includes Legal Assistance.

a. Written comments
b. Other comments

4. Services under consideration to be provided as Direct Services by Heritage
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Heritage Area Agency on Aging
Area Plan 2020-2021 Public Input Form

The public is invited to make comment in written form or by a attending public hearing. A public hearing is scheduled on Tuesday, April 23, 2019 from 9:00-10:00a.m. at Heritage Area Agency on Aging's office, Kirkwood Community College main campus, 6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404 (see public notice for additional detail).

Name: _____ Phone: _____

Address: _____

City: _____ State: ____ Zip: _____

Please share what you believe are the critical needs of older adults in your community.

Please do not hesitate to enclose additional pages if the form does not allow you enough space! Thank you!

Mail completed form to:
Heritage Area Agency on Aging
Attn. Kellie Elliott-Kapparos
Kirkwood Community College
6301 Kirkwood Blvd. S.W.
Cedar Rapids, IA 52406

Screen Shot of ~~Facebo~~ Heritageaaa.org website posting on 4/1/19. – General Public

Kellie Elliott-Kapparos

From:	Sjonna Brunt
Sent:	Monday, April 01, 2019 4:48 PM
To:	Kellie Elliott-Kapparos; Eugenia Kendall
Cc:	Jill Sindt
Subject:	RE: Public Hearing info to be posted ASAP-Website Screenshot

News Article *Public Hearing* has been created.

LifeLong Links

LEAVE A LEGACY®
Make a Difference to the Lives that Follow
www.leavealegacy.org
Click here to learn more

Public Hearing

View Edit

Submitted by Sjonna on Mon, 04/01/2019 - 4:49pm

To older persons, public officials and other interested parties
6.2(7)a.(2):

The public is notified and invited to attend a public hearing b
regarding the Fiscal Years 2020 - 2021 Area Plan for the sever
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The purpose of the public hearing is to gather input and comr
services. A public hearing will be conducted on: Tuesday, Apr
Agency on Aging, Main Building Conference Room, Kirkwood C
Cedar Rapids, Iowa 52404.

Agenda:

Sjonna Brunt
Administrative Coordinator/Executive Administrative Assistant

The Heritage Agency LIFELONG LINKS

Kirkwood Community College | 6301 Kirkwood Boulevard SW | Cedar Rapids, IA 52406
319.398-7633 | 800.332.5934 x 7633| Fax: 319.398.7619| www.heritageaaa.org | www.LifeLongLinks.org
Find us on Facebook!

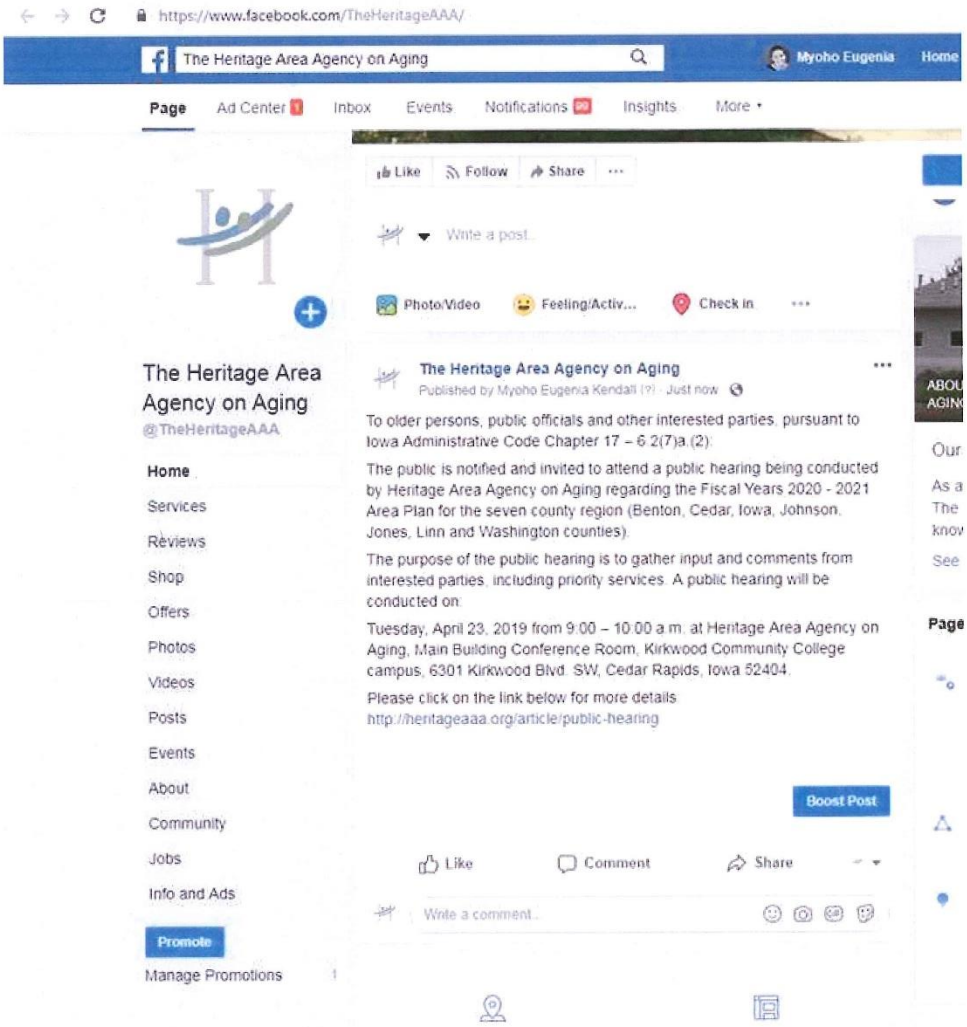
Kellie Elliott-Kapparos

From: Eugenia Kendall
Sent: Monday, April 01, 2019 5:08 PM
To: Kellie Elliott-Kapparos
Subject: RE: Public Hearing info to be posted ASAP - Facebook Screenshot

Cropped version...

From: Eugenia Kendall
Sent: Monday, April 01, 2019 5:07 PM
To: Kellie Elliott-Kapparos <Kellie.Elliott-Kapparos@kirkwood.edu>
Subject: RE: Public Hearing info to be posted ASAP - Facebook Screenshot

Screen Shot of Facebook Posting – General Public



Elected Officials

Kellie Elliott-Kapparos

From: Sjonna Brunt
Sent: Wednesday, April 03, 2019 8:46 AM
To: 'Andy.McKean@legis.iowa.gov'; 'Liz.Bennett@legis.iowa.gov'; Staed, Art [LEGIS]; 'Ashley.Hinson@legis.iowa.gov'; 'Molly.donahue@legis.iowa.gov'; 'kirsten.running-marquardt@legis.iowa.gov'; 'Tracy.ehlert@legis.iowa.gov'; 'bobby.kaufmann@legis.iowa.gov'; 'david.jacoby@legis.iowa.gov'; 'Thomas.gerhold@legis.iowa.gov'; 'dave.maxwell@legis.iowa.gov'; 'Amy.Nielsen@legis.iowa.gov'; 'jarad.klein@legis.iowa.gov'; 'Joe.mitchell@legis.iowa.gov'; 'vicki.lensing@legis.iowa.gov'; 'mary.mascher@legis.iowa.gov'; 'Louie.zumbach@legis.iowa.gov'; 'lee.hein@legis.iowa.gov'; 'carrie.koelker@legis.iowa.gov'; 'rob.hogg@legis.iowa.gov'; 'liz.mathis@legis.iowa.gov'; 'todd.taylor@legis.iowa.gov'; 'zach.wahls@legis.iowa.gov'; 'tim.kapucian@legis.iowa.gov'; 'kevin.kinney@legis.iowa.gov'; 'rich.taylor@legis.iowa.gov'; 'joe.bolkcom@legis.iowa.gov'; 'dan.zumbach@legis.iowa.gov'; 'mckeanfamily@msn.com'; 'liz@lizforiowa.com'; 'arstaed@gmail.com'; 'ashley@hinsonforhouse.com'; 'donahueforrep@gmail.com'; 'kirstenrunning@hotmail.com'; 'ehlert4iahouse@gmail.com'; 'bob_kaufmann@hotmail.com'; 'davejjacoby@hotmail.com'; 'tdgerhold@netins.net'; 'kdmax@zumatel.net'; 'amy@amyforiowa.com'; 'jaredjklein@hotmail.com'; 'josephmitchell.ia@gmail.com'; 'vickilensing@gmail.com'; 'marymascher1@mchsi.com'; 'heinlee@gmail.com'; 'carriekoelker@gmail.com'; 'robhogg@earthlink.net'; 'reptoddtaylor@aol.com'; 'zach@zachwahlsforiowa.com'; 'senatefarmer@gmail.com'; 'kinneyforsenate@gmail.com'; Joe Bolkcom
Cc: Jill Sindt; Kellie Elliott-Kapparos
Subject: Public Hearing announced for upcoming Area Plan
Attachments: Public Notice for 2020 21 Area Plan Public Hearings and Comments.docx; 2020-2021 Area Plan Written Comment Form.doc

Importance: High

For your information:

NOTICE OF PUBLIC HEARING ON MULTI-YEAR AREA PLAN FOR BENTON, CEDAR, IOWA, JOHNSON, JONES, LINN AND WASHINGTON COUNTIES

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Partner Agencies

Kellie Elliott-Kapparos

From:	Kellie Elliott-Kapparos
Sent:	Monday, April 01, 2019 4:53 PM
To:	Amy Keltner (amy.keltner@uweci.org); Brenda Hollinger ; Cliff Ehlinger; Diane Wehde (dwehde@cedarcounty.org); Erica Christian; hkcentralcity@windstream.net; Hollie Kane 2; Jane Drapeaux; Janine Sulzner; Jason Fisher (jason.fisher@uweci.org); Jeanette Wells; Jim McGoldrick (JMcGoldrick@hacap.org); Karen Lafrenz (ccscinc@windstream.net); Karen Royer; Kathy Horan ; Lauri Mitchell (lmitchell@abbe.org); Lisa Tallman ; Lynda Hansen; Martha Quint; Mike Barnhart (mbarnhart@horizonsfamily.org); Mitch Finn (mfinn@HACAP.ORG); Nicole McAlexander (nicole.selcc@gmail.com); Sheila Hlas (bcvp_shlas@yahoo.com); Shelly Annis; Sherry McClellen (smcclellen@elderservicesinc.com); Sofia Mehaffey; Sophia at ESI (smehaffey@elderservicesinc.org); Sue Driscoll (Sue.Driscoll@uweci.org); Sue Sutton; Tracy Laws (tlaws@wesleylife.org)
Cc:	Jill Sindt; Kellie Elliott-Kapparos
Subject:	Update on Heritage Area Agency on Aging
Attachments:	Public Notice for 2020 21 Area Plan Public Hearings and Comments.docx; 2020-2021 Area Plan Written Comment Form.doc
Importance:	High

Good afternoon,

As has been shared before, Heritage Area Agency on Aging (HAAA) has been working for more than a year to adjust our legal structure to better serve the region and prepare for the future. **Heritage is thrilled to report that this afternoon the Iowa Commission on Aging unanimously approved Heritage to continue our work as the Area Agency on Aging as a 501(c)(3) effective July 1, 2019. HAAA will seamlessly continue to serve the seven county region.**

HAAA is currently a department of Kirkwood Community College and has been for more than forty years. This structure is allowed under the Older Americans Act and Iowa Code, as HAAA is part of a multi-purpose entity serving as an organizational unit for the area agency on aging. KCC has always seen HAAA as part of their community mission. However, the time came to <u>change</u> – *not end* – this relationship for the following critical reasons:

- **Funding Diversification:**
  - HAAA needs to diversify funding. 80% of HAAA funds are dependent on state and federal allocations. Sustainability is a concern.
- **Missed Opportunities:**
  - HAAA has been denied grants in the past and is ineligible for some opportunities due to the issue of not being a stand a-lone entity. HAAA becoming a stand a-lone 501(c)(3) will not prevent it from doing anything it currently is doing and it will allow the new entity to develop a truly unique vision of services.
- **Agency and Program Sustainability:**
  - Many area agencies on aging in the country are implementing new amenities that are not part of traditionally funded services using a private pay model in which proceeds can be used to cover funding shortfalls or supplement under-funded services. HAAA cannot do this within the current KCC structure.

- **Transparency:**
  - While all area agencies on aging in the state of Iowa began under Governor Ray as part of the Community Colleges, all but HAAA transitioned to 501(c)(3) tax status early on. HAAA did not find the need until recent years due to KCC's support and dedication to our mission. However, various members of the community have shared misinformation with the HAAA/KCC relationship. This new structure will establish more commonly used oversight tools, such as an independent audit and a separate board of trustees. With that said, please know that there has never been any activity by KCC/HAAA that has been a cause for concern.

One of the next steps is to draft an Area Plan. We would like to invite you to attend a public hearing on Tuesday, April 23rd (see attached for details) to provide your feedback on community needs. You may also provide written comment on the attached form for consideration.

Thank you again for your support of our agency and we look forward to the future.

Please feel free to contact me or Jill Sindt at 319-398-5559 with any additional questions or information.

Sincerely,
Kellie

Kellie Elliott-Kapparos
Co-Director

My number has changed! You can reach me **directly by calling 319-398-7675 or at the main number listed below**. Thank you.

Kirkwood Community College | 6301 Kirkwood Boulevard SW | Cedar Rapids, IA 52406
319.398.5559 | 800.332.5934| Fax: 319.398.5533 | www.heritageaaa.org | www.LifeLongLinks.org
Find us on Facebook!

The Heritage Area Agency on Aging does not discriminate based on age, color, creed, familial status, gender identity, marital status, mental disability, national origin, physical disability, race, religion, sex, sexual orientation, or political affiliation in its employment practices or the provision of services except where it is a requirement of law.

This email message and its attachments may contain confidential information that is exempt from disclosure under Iowa Code chapters 22, 139A, and other applicable law. Confidential information is for the sole use of the intended recipient. If you believe that you have received this transmission in error, please reply to the sender, and then delete all copies of this message and any attachments. If you are not the intended recipient, you are hereby notified that any review, use, retention, dissemination, distribution or copying of this message is strictly prohibited by law.

Concerned citizens, including AARP + OIL members
- Heritage Advisory Council
- Task Force
- Advocacy Committee

Kellie Elliott-Kapparos

From: Sjonna Brunt
Sent: Monday, April 01, 2019 5:01 PM
To: Barbara Young (bafy431@yahoo.com); Betty Jordan; Betty Kelly (blkiowa@gmail.com); Bev Johnson; Evans Waller; Harold Frakes (hfrakes1944@gmail.com); Janice Frey (janice-frey@uiowa.edu); John Greener; kfisk@horizonsfamily.org; Larry Kudej; Lisa Tallman; Lynne Cannon; Nancylee Siebenmann; 'Renee.riffey@rahcr.com'; Robert Welsh; Sandra Bell; Sofia Mchaffey (smehaffey@horizonsfamily.org); Steve Ovel; Donna Schroeder; Ed Dunbar (eddunbar@msn.com); Elizabeth Koehn (ehkoehn13@yahoo.com); Jake Hughes (jakehughes@synergyhomecare.com); John North (jnorth7304@aol.com); Judy Fries; Leah Donald (leahzdonald@gmail.com); Marcia Taylor; Staed, Art [LEGIS]; Balius, Ashley; Chanel Prince (chanel.prince@access2Independence.org); Jim Wasta; Joan West; Judy Orton (jorton14@mchsi.com); Kayla McPherson (kaylamcpherson@skogman.com); Lauri Mitchell; Ruth Cox (ruthcox@imonmail.com); Sallie Streib; Sandra Bruns (sdbruns@msn.com); Shari Mahin; Sheila Semler; Stephanie Humphries; Toni Claussen (tonic@methwick.org); Anna Manternach (abmanter@msn.com); Ned Rohwedder (ncrohwedder@gmail.com); Tamra Albright-Johnson (talbright@enlivant.com); Zalenski, Phyllis A [HS EO]; Edie Yerington (everington3@gmail.com); Eve Casserly (casserly@mchsi.com); Harry Olmstead (harryo3@aol.com); Irvin Pfab (irvinpfab@gmail.com); Jeff Kellbach; Joe Bolkcom; Josie Gittler; Kice Brown; latasha-deloach@iowa-city.org; Leonard Sandler; Lois Bartelme (loisbart@aol.com); Mohr, Holly J.; Pat Heiden (pheiden@co.johnson.ia.us); Sally Stutsman; Tom Brase; Bruce Teague (bruce.teague@caringhandsandmore.com); gerald.rath@access2independence.org; Lavon Yeggy (lavon-yeggy@uiowa.edu); Lorraine Dorfman (lorraine-dorfman@uiowa.edu); Robert George (rs2george@yahoo.com); 'Roemerman, Angela J'; daedlow@iastate.edu; Deb Helmold (snobound@fbcom.net); Donna Luepker; Karen Lafrenz (ccscinc@windstream.net); Lynda Hansen; managertipton@prairiehillsliving.com; Shari Slaton (welcometipton@prairiehillsliving.com); elharring1@southslope.net; Joyce Brunssen (joycebrunssen@gmail.com); Judi Hertle (tlhjkh@southslope.net); Maureen Haisman; Pat Franzenburg (dpcorp@netins.net); Sheila Hlas
Cc: Kellie Elliott-Kapparos
Subject: RE: Update on Heritage Area Agency on Aging
Attachments: Public Notice for 2020 21 Area Plan Public Hearings and Comments.docx; 2020-2021 Area Plan Written Comment Form.doc

Good afternoon,

As has been shared before, Heritage Area Agency on Aging (HAAA) has been working for more than a year to adjust our legal structure to better serve the region and prepare for the future. **Heritage is thrilled to report that this afternoon the Iowa Commission on Aging unanimously approved Heritage to continue our work as the Area Agency on Aging as a 501(c)(3) effective July 1, 2019. HAAA will seamlessly continue to serve the seven county region.**

HAAA is currently a department of Kirkwood Community College and has been for more than forty years. This structure is allowed under the Older Americans Act and Iowa Code, as HAAA is part of a multi-purpose entity serving as an organizational unit for the area agency on aging. KCC has always seen HAAA as part of their community mission. However, the time came to <u>change</u> – *not end* – this relationship for the following critical reasons:

- **Funding Diversification:**
  - HAAA needs to diversify funding. 80% of HAAA funds are dependent on state and federal allocations. Sustainability is a concern.
- **Missed Opportunities:**
  - HAAA has been denied grants in the past and is ineligible for some opportunities due to the issue of not being a stand a-lone entity. HAAA becoming a stand a-lone 501(c)(3) will not prevent it from doing anything it currently is doing and it will allow the new entity to develop a truly unique vision of services.
- **Agency and Program Sustainability:**
  - Many area agencies on aging in the country are implementing new amenities that are not part of traditionally funded services using a private pay model in which proceeds can be used to cover funding shortfalls or supplement under-funded services. HAAA cannot do this within the current KCC structure.
- **Transparency:**
  - While all area agencies on aging in the state of Iowa began under Governor Ray as part of the Community Colleges, all but HAAA transitioned to 501(c)(3) tax status early on. HAAA did not find the need until recent years due to KCC's support and dedication to our mission. However, various members of the community have shared misinformation with the HAAA/KCC relationship. This new structure will establish more commonly used oversight tools, such as an independent audit and a separate board of trustees. With that said, please know that there has never been any activity by KCC/HAAA that has been a cause for concern.

One of the next steps is to draft an Area Plan. We would like to invite you to attend a public hearing on Tuesday, April 23rd (see attached for details) to provide your feedback on community needs. You may also provide written comment on the attached form for consideration.

Thank you again for your support of our agency and we look forward to the future.

Please feel free to contact me or Jill Sindt at 319-398-5559 with any additional questions or information.

Sincerely,
Kellie

Kellie Elliott-Kapparos
Co-Director

My number has changed! You can reach me **directly by calling 319-398-7675 or at the main number listed below**. Thank you.

Kirkwood Community College | 6301 Kirkwood Boulevard SW | Cedar Rapids, IA 52406
319.398.5559 | 800.332.5934| Fax: 319.398.5533 | www.heritageaaa.org | www.LifeLongLinks.org
Find us on Facebook!

The Heritage Area Agency on Aging does not discriminate based on age, color, creed, familial status, gender identity, marital status, mental disability, national origin, physical disability, race, religion, sex, sexual orientation, or political affiliation in its employment practices or the provision of services except where it is a requirement of law.

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Public Hearing Agenda

Public Hearing
Area Plan Fiscal Year 2020-2021
Tuesday, April 23, 2019 from 9:00 – 10:00 a.m.

at Heritage Area Agency on Aging, Main Building – Conference Room
Kirkwood Community College main campus
6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404

Agenda:

1. Call to order

2. Purpose of hearing

3. Public Comments on Priority Services

   Title IIIB Priority services are located within the service categories of Access, In-Home and Legal. The minimum percentage (%) of Title IIIB funding required to be expended within each category are:

   1. Access (10%), which includes Information and Assistance, Assisted Transportation, Transportation, Case Management and Outreach.
   2. In-Home (5%), which includes Adult Day Care/Health, Chore, Homemaker and Personal Care.
   3. Legal (3%,) which includes Legal Assistance.

   a. Written comments

   b. Other comments

4. Services under consideration to be provided as Direct Services by Heritage

5. Adjournment

Public Hearing Minutes

Public Hearing for Area Plan
Hearing Minutes/ Summary
Tuesday, April 23, 2019
9:00-10:00am
Heritage Area Agency on Aging, Main Conference Room
Cedar Rapids, Iowa

Staff comment in italics.

Present: Steve Ovel, Larry Kudej, Bob Welsh

Staff Present: Kellie Elliott-Kapparos, Jill Sindt, Sjonna Brunt

Call to order:
Kellie Elliott-Kapparos, Co-Director of Heritage Area Agency on Aging called the Area Plan Public Hearing for FY2020-2021 meeting to order at 9:02. Kellie introduced Jill Sindt, Heritage Area Agency on Aging Co-Director. Kellie reminded everyone to please sign in if they have not already done so.

Purpose of the Hearing: Kellie explained the purpose of the hearing as, "The public is notified and invited to attend the hearing being conducted by Heritage Area Agency on Aging regarding the Fiscal years 2020-2021 Area Plan for the seven county region. Those counties would be Benton, Cedar, Iowa, Johnson, Jones, Linn and Washington Counties. The purpose of this public hearing today is to gather input and comments from interested parties including the priority services outlined by the Iowa Department on Aging." Attached agenda reviewed.

Public Comments on Priority Services:
Attached agenda reviewed. Proposed area plan more than meets the minimum percentages required in each category.

Written Comments: Heritage has not received any written comments at this time.

Other comments:

Larry Kudej-Johnson County "Lately there has been a lot of discussion about Iowa's mental health system. The services that are being provided by Heritage, does mental health figure in there some place? What category does that fit into for seniors?"

Kellie - "In this new Area Plan there is a new service category called behavioral health. Heritage chose not to open it simply because we do not have the staff capacity for that specific function. I would say our biggest areas that we deal with would not fall under the category of behavior health but certainly in the Elder Abuse area particularly related to self-neglect cases. There are a lot of mental health issues with self-neglect cases as well as the ADRC and Case Management. There are a number of individuals in case management that their primary barrier is due to mental health issues."

Larry - "Do we have any providers that are qualified to provide services like that?"

Kellie – "Not at this time. That doesn't mean that we cannot look into it in the future. Years before, there used to be a taxonomy called mental health outreach and IDA removed that as an option. Really what this was modified case management with a licensed Master social workers so they could do case management with individuals who had mental health issues. When that taxonomy definition went away our formal service on that went away as well. I think that knowing that they have the new taxonomy as a potential now may be something for us to consider on our next Area Plan."

Jill – "To piggy back off from that, Kellie has established a really good working relationship with Kathy Horan at Abbe Health. With Kathy sitting as President of the Abbe Health, I think we have some opportunities where we can look at that and see what opportunities lie with Abbe. I think it is a perfect partnership."

Larry – "yes it is something."

Steve Ovel – "If a Case Manager identifies a consumer with mental health issues how do they address that?"

Kellie – "Whether it is Case Management or Options Counseling, it will be a part of their care plan/action plan. Some of it may be individual strategies to do. For example, we may have a consumer has very high anxiety and with limited and formal supports. We may schedule more frequent home visits or calls to help with navigating that. Our primary role is linkage. We will work with doctors and therapists and get referrals. We work a lot with Horizons, they do a lot of mental health services. This service is outside of their contract. Heritage also works with Abbe and other providers in the area."

Bob Welsh provided a handout that was discussed-See the attached comments presented by Bob.

Bob reviewed the written comments and added the additional information as follows: *"The Pathways document makes quite a point of the public awareness needed. People are not that conscious of it. I have been a longtime advocate of home and community based services. It has been in recent years that I have come to realize that most people live at homes where they can't*

age in place. The direct care workers was a major priority of OIL and I think that offers a real opportunity to work with Kirkwood and address the need. I think when people call up agency "a" and someone to comes in and provides care, that they assume that that person coming is trained and has some sort of credentials but that isn't the case. I am trying to convince people of Johnson County that a part of being a livable community is to ensure people that they will receive quality service of the providers coming to take care of him."

Kellie – "Thank you Bob for your comments and your feedback."

Larry – "The one thing I would add is when he is discussing working with Kirkwood Community College, University Iowa and other surrounding colleges. I think you are starting too late. I think if you are going to do this you should start at the high school level and involve them in doing this as well. With all of the programs out there as far as college credits it is important to start at that level."

Steve - "We do have High School level students that are sitting in college classes to take their CNA classes. With regarding getting formal certification. Steve was sitting in a formal hearing several years ago and one legislature stopped it from happening. This may be something to revisit."

Larry – "I know we have had great success with the Encore. Does our Encore grant continue or will there be something in the Area Plan notating to carry on the work after the grant expires?"

Jill – "The grant ends the end of September. Right now we have expended all of our funds which was done on purpose so we can start tapping into our Title C1. We addressed Encore and we have also added that we would like to expand Encore into Washington County so that is part of the plan."

No additional comments offered.

Services under consideration to be provided as Direct Services by Heritage:

Kellie reviewed the Area Plan taxonomy and direct services Waivers-See the attached sheet titled Area Plan Open Taxonomies and Direct Service Waivers Needed.

General Aging

- Adult Day Care- Intent to award contract
- Assisted Transportation- Intent to award contract
- Case Management- Mandatory service performed internally
- Chore- Intent to award contract
- Congregate Nutrition- Combined effort, mandatory service we will be doing it direct through Encore Café and also through various subcontracts.
- EAPA Consult- Elder Abuse Prevention Awareness Consultation-mandatory service done internally through our Elder Rights program

EAPA Assessment and Intervention- Mandatory service done internally through our Elder Rights program
Emergency Response System- This is a category we plan to use our personal centered dollars to offer limited financial aid to individuals in need.
Health Promotion Evidence-Base- This is a mandatory service we plan to do internally through staff efforts and partnerships.
Home Delivered Nutrition- Mandatory service intent to award contracts on this.
Information and Assistance- Mandatory service intent to award one contract on this, in addition to doing it direct service.
Legal Assistance- Mandatory service intend to award contract
Material Aid: Consumable Supplies – Due to limited person centered dollars we are limiting to 2 areas. Examples are incontinence supplies, liquid supplements and etc.
Material Aid: Other-examples are paying for pharmacy bills
Nutrition Counseling- Mandatory service intent to award contract through sole source contract due to lack of response in RFP cycle
Nutrition Education- Mandatory service will do internally
Options Counseling- Mandatory service will do internally
Outreach- Internal service, subcontractors also report as part of contracts
Training and Education- Internal service
Transportation- Intent to award contract

Caregiver services

Counseling- Mandatory service will do internally
Supplemental Services- Items done through person centered dollars and helps provide such things like respite, to help provide assistance for transfer bench for a caregiver to use and etc.
Options Counseling- Mandatory service will do internally
Case Management- Mandatory service will do internally. Change in this is when Options Counseling is over 90 days in length, but need is still there so service is then called Case Management.
Information and Assistance- Previously called access assistance-. Mandatory service done internally.
Training- - Need in our area done and will be done internally.

Direct Service Waivers Needed

Counseling-
Congregate Nutrition-
Health Promotion Evidence-Based-

Other services we are planning on doing direct do not require a direct service waiver form. The state of Iowa requires if the Area Agency on Aging is proposing to do something direct that they request permission because ideally they want the funds, expertise and resources to be shared in the region for economic impact.

Steve – Are the waiver requests historical for the previous years?"
Kellie – "Yes. The only one we have not done in the previous area plan is congregate nutrition and that is directly related because we now have Encore. We are having to do this public hearing because Heritage is transferring from a department of Kirkwood Community College to Heritage a 501c3. Our mission and scope has not changed. We are not straying from our path at this point. We are proposing to do the same service package. IDA has changed a few taxonomies definitions along the way but the services we currently do is what we are purposing to continue to do. Over these next 2 years we will evaluate with our new 501c3 our new potential opportunities and new potential grants. This will allow us the time to build up what the possibilities are and get it into the next Area Plan which will be a 4 year plan that we will be begin working on in about a year."

Bob – Legal assistance in regards to the Elder Abuse Pathways study and involvement of the clinic, Len Sandler in terms of legal assistance. I know historically we have done contract with Martha Quint. I gathered with what Len said at the POA forum that they would be willing to assist individuals with legal services that they may have. I think this is a tremendous opportunity."

Kellie – "That is a partnership that I am continuing to develop and grow. I should have an announcement in the next couple of days of an upcoming event. It is important to note that we award based on the RFP process and certainly that the next opportunity they are welcome to submit. I think Len's group is looking to reach out to try to expand the awareness outside the Iowa City area that they are "free" lawyers willing to help. I don't think it is an all or nothing approach. I think it is important to improve our relationships with Legal Aid, the College of Law and Martha Quint because there is more than enough issues to go around."

Kellie closed the discussion 9:35. Public Hearing is not adjourned until 10:00 am

Meeting ended at 10:00 am.
Respectfully submitted,
Sjonna Brunt
Operations Coordinator

This meeting was tape recorded.

Public Hearing Handouts Referenced in Minutes

- The follow pages provides copies of public hearing handouts as referenced in the minutes.

The Heritage Agency™

Public Hearing
Area Plan Fiscal Year 2020-2021
Tuesday, April 23, 2019 from 9:00 – 10:00 a.m.

at Heritage Area Agency on Aging, Main Building – Conference Room
Kirkwood Community College main campus
6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404

Agenda:

1. Call to order

2. Purpose of hearing

3. Public Comments on Priority Services

   Title IIIB Priority services are located within the service categories of Access, In-Home and Legal. The minimum percentage (%) of Title IIIB funding required to be expended within each category are:

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   2. In-Home (5%), which includes Adult Day Care/Health, Chore, Homemaker and Personal Care.
   3. Legal (3%,) which includes Legal Assistance.

   a. Written comments

   b. Other comments

4. Services under consideration to be provided as Direct Services by Heritage

5. Adjournment

For Life After Sixty
The Heritage Agency • Aging and Disability Resource Center • Kirkwood Community College
6301 Kirkwood Boulevard SW • PO Box 2068 • Cedar Rapids, Iowa 52406
319-398-5559 • 1-800-332-5934 • Fax: 319-398-5533
www.heritageaaa.org
The Heritage Area Agency on Aging does not discriminate based on age, color, creed, familial status, gender identity, marital status, mental disability, national origin, physical disability, race, religion, sex, sexual orientation, or political affiliation in its employment practices or the provision of services except where it is a requirement of law.

COMMENTS FOR PUBLIC HEARING ON AREA PLAN – April 23, 2019

Based on the latest area plan I had. Plan effective Dates: July 1m 2018 – June 30, 2021
Plan Update: July 1, 2019

In the opening update section:

The Heritage Area Agency on Aging will reach out to the County Board of Supervisors in the seven counties in the service area to: a) share information on the needs of their seniors and those with disabilities and the resources available; b) involve them in planning ways of better addressing the needs of their citizens. The Heritage Area Agency is committed to a seven county strategy.

The Heritage Area Agency on Aging views advocacy as a vital part of its mission. As such it will work with federal, state, county and local government officials to establish policies, programs and provide funding that will enable its targeted population to age successfully.

The Heritage Area Agency on Aging will explore ways of assisting the employers in the area of assisting their employees in caring for the needs of their aging family members and in preparing for their own future.

Goal 1 - Public awareness campaign on the signs of elder abuse, advocate for a comprehensive elder abuse law and a multidisciplinary strategy to prevent elder abuse, provide the services needed to the abused and penalties for the abusers.

Goal 2 –

Goal 3 - To assist homeowners and encourage landlords to make modifications to their homes that will enable seniors and persons with disabilities to remain in their homes. To provide the home and community services needed to avoid or delay institutionalization.

To insert somewhere: Heritage will work collaboratively to address the shortage of direct care workers that are needed to meet the needs of a growing numbers of elderly citizens. To work with Kirkwood, the University of Iowa and the colleges in the area to provide the training needed to enable their students to provide the services needed and to conduct the research needed to better understand how best to serve individuals at the various stages in the aging process.

....

In relation to Public Input Form:

Affordable Accessible Housing where a person a can age in place and receive home and community based services. Trained direct care workers.

Bob Welsh 319-354-4618 84 Penfro Drive Iowa City, Iowa 52246

Area Plan Open Taxonomies and Direct Service Waivers Needed

Yellow = served with Person Centered Dollars

Green = mandatory service

General Aging

Adult Day Care

Assisted Transportation

Case management

Chore

Congregate Nutrition

EAPA consult

EAPA Assessment and Intervention

Emergency Response System

Health Promotion Evidence-Based

Home Delivered Nutrition

Information and Assistance

Legal Assistance

Material Aid: Consumable Supplies

Material Aid: Other

Nutrition Counseling

Nutrition Education

Options Counseling

Outreach

Training and Education

Transportation

Caregiver

Counseling

Supplemental Services

Options Counseling

Case Management

Information and Assistance

Training

Direct Service Waivers Needed

~~Counseling~~

Congregate Nutrition

Health Promotion Evidence-Based

Service Listing

AAAs must provide the Mandatory Services. AAAs may choose to offer some or all of the Optional Services.

In an effort to better organize offerings by AAAs, the available services have been organized in the following three broad categories: *Information & Service Assistance, Nutrition & Health Promotion*; and *Services to Promote Independence*. The organization of these three broad categories supports efforts for reporting and budgeting.

Information & Service Assistance (Mandatory)	Nutrition & Health Promotion (Mandatory)	Services to Promote Independence (Optional)	
• Case Management FC Case Management ORC Case Management - Optional EAPA Assessment & Intervention • FC Counseling • Information & Assistance FC Information & Assistance ORC Information & Assistance-Optional EAPA Consultation • Legal Assistance • Options Counseling FC Options Counseling ORC Options Counseling - Optional	• Congregate Nutrition FC Congregate Nutrition – Optional ORC Congregate Nutrition – Optional • Health Promotion: Evidence-Based • Health Promotion: Non Evidence-Based (Optional) • Home Delivered Nutrition FC Home Delivered Nutrition - Optional ORC Home Delivered Nutrition- Optional • Nutrition Counseling • Nutrition Education	• Adult Day Care / Health • Assisted Transportation • Behavioral Health Supports • Chore • Emergency Response System FC Emergency Response System ORC Emergency Response System • Homemaker • FC Information Services ORC Information Services	• Material Aid FC Supplemental Services ORC Supplemental Services • Outreach • Personal Care • FC Respite Care ORC Respite Care • FC Support Groups ORC Support Groups • Training & Education FC Training ORC Training • Transportation

Note: Older Relative Caregiver services align with Family Caregiver services, but they are all optional.

Service Budgeting & Expenditures

- Refer to the "Service Expenditure Requirements" section in this chapter for details on expenditure requirements.
- Refer to Chapter Six: Area Plan Financial Reporting for the SFY 2020 allowable funding expenditure tables, service budget codes, and additional fiscal reporting information.

CHAPTER TWO: SERVICE LISTING AND REQUIREMENTS

This chapter identifies services that AAAs may provide with Older Americans Act (OAA) and designated State funds, provides standard service descriptions and unit measures (taxonomy), and defines other service delivery requirements, including service expenditure requirements.

Evaluating OAA Service Selection and Projections

Each AAA shall annually provide projected consumers, units, and expenditures for the Older Americans Act services through the agency's Area Plan on Aging. The AAA shall conduct a comprehensive assessment to determine consumer need when planning for services and submitting service projections. The AAA shall promote its services to ensure that consumers are aware of their availability.

The AAA shall consider the number of individuals in the PSA who meet the conditions defined below when establishing annual consumers, units, and expenditures, subcontracting for services, and identifying service delivery strategies.

Greatest Economic Need. The need resulting from an income level at or below the poverty line.

Greatest Social Need. The need caused by noneconomic factors, which include:

(A) Physical and mental disabilities;
(B) Language barriers; and
(C) Cultural social, or geographical isolation, including isolation caused by racial or ethnic status, that-
  (i) Restricts the ability of an individual to perform normal daily tasks; or
  (ii) Threatens the capacity of the individual to live independently.

At Risk for Institutional Placement. An individual that is unable to perform at least two activities of daily living without substantial assistance (including verbal reminding, physical cuing or supervision) and is determined by the State involved to be need of placement in a long-term care facility.

Frail. The older individual is determined to be functionally impaired because the individual:

(A)(i) Is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing, or supervision; or
(ii) At the option of the State, is unable to perform at least three such activities without such assistance; or
(B) Due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual.

NOTICE OF PUBLIC HEARING ON MULTI-YEAR AREA PLAN FOR BENTON, CEDAR, IOWA, JOHNSON, JONES, LINN AND WASHINGTON COUNTIES

To older persons, public officials and other interested parties, pursuant to Iowa Administrative Code Chapter 17 – 6.2(7)a.(2):

The public is notified and invited to attend a public hearing being conducted by Heritage Area Agency on Aging regarding the Fiscal Years 2020 - 2021 Area Plan for the seven county region (Benton, Cedar, Iowa, Johnson, Jones, Linn and Washington counties).

The purpose of the public hearing is to gather input and comments from interested parties, including priority services. A public hearing will be conducted on:

Tuesday, April 23, 2019 from 9:00 – 10:00 a.m. at Heritage Area Agency on Aging, Main Building Conference Room, Kirkwood Community College campus, 6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404.

Agenda:

1. Call to order
2. Purpose of hearing
3. Public Comments on Priority Services
   Title IIIB Priority services are located within the service categories of Access, In-Home and Legal. The minimum percentage (%) of Title IIIB funding required to be expended within each category are: 1. Access (10%), which includes Information and Assistance, Assisted Transportation, Transportation, Case Management and Outreach. 2. In-Home (5%), which includes Adult Day Care/Health, Chore, Homemaker, and Personal Care. 3. Legal (3%,) which includes Legal Assistance.
   a. Written comments
   b. Other comments
4. Services under consideration to be provided as Direct Services by Heritage
5. Adjournment

The Area Plan will guide Heritage for the period of State Fiscal Years 2020 – 2021. Comments are also welcomed in the written form of choice or by utilizing a form provided on the Heritage website at www.heritageaaa.org. Written comments should be sent to Heritage Area Agency on Aging, Attention Kellie Elliott-Kapparos, Kirkwood Community College, 6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404. The public is invited and encouraged to provide feedback at this hearing opportunity and/or provide written comment.

Heritage Area Agency on Aging
Area Plan 2020-2021 Public Input Form

The public is invited to make comment in written form or by a attending public hearing. A public hearing is scheduled on Tuesday, April 23, 2019 from 9:00-10:00a.m. at Heritage Area Agency on Aging's office, Kirkwood Community College main campus, 6301 Kirkwood Blvd. SW, Cedar Rapids, Iowa 52404 (see public notice for additional detail).

Name: _____ Phone: _____

Address: _____

City: _____ State: ____ Zip: _____

Please share what you believe are the critical needs of older adults in your community.

Please do not hesitate to enclose additional pages if the form does not allow you enough space! Thank you!

Mail completed form to:
Heritage Area Agency on Aging
Attn. Kellie Elliott-Kapparos
Kirkwood Community College
6301 Kirkwood Blvd. S.W.
Cedar Rapids, IA 52406

Governing Body

Governing Body for: Heritage Area Agency on Aging.
Updated On: 4/5/2019

Chair

Name	Address	City & Zip	County	Phone & Email	Term Expires
Renee Riffey	803 Dorchester Pine	Cedar Rapids, 52402	Linn	319-389-2181 crriffey@mchsi.com	June 2021

Vice Chair

Name	Address	City & Zip	County	Phone & Email	Term Expires
Steve Ovel	138 Guildford SE	Cedar Rapids, 52403	Linn	319-533-4539 Steve.Ovel@kirkwood.edu	June 2021

Secretary/Secretary-Treasurer

Name	Address	City & Zip	County	Phone & Email	Term Expires
Rose Rennekamp	2312 Deer Run NE	North Liberty, 52317	Johnson	319-626-6479 Rose.rennekamp@gmail.com	June 2021

Treasurer, (if separate officer)

Name	Address	City & Zip	County	Phone & Email	Term Expires
Jim Choate	11000 FeatherRidge Road	Toddville, 52341	Linn	319-521-2207 Jim.Choate@kirkwood.edu	June 2021

Other Members

Name	Address	City & Zip	County	Phone & Email	Term Expires
Danielle Pickering	202 C Avenue	Atkins, 52206	Benton	319-491-4274 Danielle.Pickering@kirkwood.edu	June 2021

PSA #4 Heritage

Governing Body

Governing Body for: Heritage Area Agency on Aging. Updated On: 02/26/20

Chair

Name	Address	City & Zip	County	Phone & Email	Term Expires
Larry Kudej	2770 Jeremy Court NW	Swisher, 52338	Linn	319-857-5191 ldkudej@aol.com	June 2020

Vice Chair

Name	Address	City & Zip	County	Phone & Email	Term Expires
Sister Susan O'Connor	292 Northpointe Dr. NE, # 302	Cedar Rapids, 52402	Linn	319-533-7366 soconnor@mercywmw.org	June 2022

Secretary/Secretary-Treasurer

Name	Address	City & Zip	County	Phone & Email	Term Expires
Scott Olson	6467 Quail Ridge Dr. SW	Cedar Rapids 52404	Linn	319-360-5295 scott@scottolson.com	June 2021

Treasurer, (if separate officer)

Name	Address	City & Zip	County	Phone & Email	Term Expires
Steve Ovel	138 Guildford SE	Cedar Rapids 52403	Linn	319-533-4539 steve.ovel@kirkwood.edu sovel@aol.com	June 2022

Kirkwood Board of Trustees

Name	Address	City & Zip	County	Phone & Email	Term Expires
Rose Rennekamp	2312 Deer Run NE	North Liberty, 52317	Johnson	319-626-6479 rose.rennekamp@gmail.com	June 2020

County Board of Supervisors

Name	Address	City & Zip	County	Phone & Email	Term Expires
Gary Bierschenk	404 Trout St. SE	Blairstown, 52209	Benton	319-558-8153 gbierschenk@co.benton.ia.us	June 2020
Steve Agne	597 200th St.	Tipton, 52772	Cedar	319-538-7538 steveagne@yahoo.com	June 2020
Vicki Pope	2885 F Avenue	North English, 52316	Iowa	319-655-7633 popeii@netins.net	June 2020

Pat Heiden	913 Dubuque St.	Iowa City, 52240	Johnson	319-530-2023 pheiden@co.johnson.ia.us	June 2020
Ned Rohwedder	13204 Co Road 53	Olin, 52320	Jones	319-509-2693 ned.rohwedder@co.jones.ia.us	June 2020
Stacey Walker	935 2nd St. SW	Cedar Rapids, 52404	Linn	N/A Stacey.walker@linncounty.org	June 2020
Richard Young	PO Box 889	Washington, 52353	Washington	319-461-1067 ryoung@co.washington.ia.us	June 2020

At-Large Members

Name	Address	City & Zip	County	Phone & Email	Term Expires
Toni Claussen	3132 Adirondack Dr. NE	Cedar Rapids, 52402	Linn	319-899-4204 tonic@methwick.org	June 2020
Ro Foege	900 2nd St. SE, #401	Cedar Rapids, 52401	Linn	319-560-1357 rofoege@mac.com	June 2020
Sarah Martinez	1924 California Ave.	Iowa City, 52240	Johnson	319-338-3870 ed@access2independence.org or smartinez46320@gmail.com	June 2020
Dusti Winkie	1614 8th Ave.	Belle Plaine, 52208	Benton	319-444-7036 winkiedk@gmail.com	June 2020
Michael Barnhart	PO Box 127, 107 Hubbell St.	Martelle, 52305	Jones	319-521-4000 mbarnhart@horizonsfamily.org	June 2021
Michelle Buhman	429 4th Ave.	Iowa City, 52245	Johnson	319-356-5222 Michelle-buhman@iowa-city.org	June 2021
Matt Piersall	2132 Cottage Grove Meadows SE	Cedar Rapids, 52403	Linn	319-297-7222 mpiersall@piersalllaw.com	June 2022

Advisory Council

Older Americans Act Section 306(a)(6)(D). Each area agency on aging shall establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of the business community, local elected officials, providers of veterans' health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan.

Older Americans Act Code of Regulations, Subpart C, Sec. 1321.57(b) Composition of Council. The council shall include individuals and representatives of community organizations who will help to enhance the leadership role of the area agency in developing community-based systems of services. The advisory council shall be made up of:

1. More than 50 percent older persons, including minority individuals who are participants or who are eligible to participate in programs under this part;
2. Representatives of older persons;
3. Representatives of health care provider organizations, including providers of veterans' health care (if appropriate);
4. Representatives of supportive services provider organizations;
5. Persons with leadership experience in the private and voluntary sectors;
6. Local elected officials; and
7. The general public.

If the agency's Advisory Council does not currently meet all 7 composition criteria listed above, provide the following information:

1) Composition criteria yet to be satisfied by the Council (# 1, 2, 3, 4, 5, 6, 7)

All criteria are satisfied.

Advisory Council for: Heritage Area Agency on Aging.
Updated on: 4/5/2019

Chair

Name	Address	City & Zip	County	Phone & Email	Term Expires	OAA Composition Criteria (1 to 7)
Larry Kudej	2770 Jeremy Court NW	Swisher 52338	Johnson	319-857-5191 ldkudej@aol.com	2021	1,2,5,7

Vice Chair

Name	Address	City & Zip	County	Phone & Email	Term Expires	OAA Composition Criteria (1 to 7)
Sandra Bell	5665 Cornell St SW	Cedar Rapids 52404	Linn	319-560-1580 sdemowiz@aol.com	2021	1,2,5,7

Secretary/Secretary Treasurer

Name	Address	City & Zip	County	Phone & Email	Term Expires	OAA Composition Criteria (1 to 7)
Sjonna Brunt	6301 Kirkwood Blvd SW	Cedar Rapids 52404	Linn	319-398-7633 sjonna.brunt@kirkwood.edu	staff	

Treasurer (if separate officer)

Name	Address	City & Zip	County	Phone & Email	Term Expires	OAA Composition Criteria (1 to 7)

Other Members:

Name	Address	City & Zip	County	Phone & Email	Term Expires	OAA Composition Criteria (1 to 7)
Marcia Taylor	6470 12th Avenue	Dysart 52224	Benton	319-476-4623 kmtaylor@fctc.coop	2022	2,5,7
Donna Schroeder	515 9th Avenue	Clarence 52216	Cedar	563-452-3600 bdschroe@netins.net	2022	1,2,4,5,7

Evans Waller	1726 Taylor Ave	Bennett 52721	Cedar	563-249-3410 elwaller39@aol.com	2021	1,2,3,5,7
Lynne Cannon	920 Highwood St	Iowa City 52246	Johnson	319-338-4437 lcannon920@gmail.com	2022	1,2,3,4,5,7
Leah Donald	1556 South 1st Avenue Suite B	Iowa City 52240	Johnson	319-338-3870 ed@access2independence.org	2022	2,4,5,7
Robert Welsh	84 Penfro Dr.	Iowa City 52246	Johnson	319-354-4618 welshbob@aol.com	2021	1,2,7
Lisa Tallman	112 N Ford St	Anamosa 52205	Jones	319-462-4484 jcsd@co.jones.ia.us	2021	2,4,7
Judy Fries	1421 28th St SW	Cedar Rapids 52403	Linn	319-365-3719 judyfries1@msn.com	2021	2,7
Jake Hughes	1239 1st Ave SE Suite D	Cedar Rapids 52402	Linn	319-899-1226 Jakehughes@synergyhomecare.com	2021	2,3,4,5,7
John North	6002 Flagstone Dr NE	Cedar Rapids 52402	Linn	319-377-3104 jnorth7304@aol.com	2021	2,5,7
Renee Riffey	803 Dorchester Place NE	Cedar Rapids 52402	Linn	319-389-2181 renee@ageucate.com	2021	2,5,7
Art Staed	2141 Coldstream Ave NE	Cedar Rapids 52402	Linn	319-899-4365 art.staed@legis.iowa.gov	2022	1,6
Barb Young	5320 Kessler Rd NW	Cedar Rapids 52402	Linn	319-360-6062 bafy431@yahoo.com	2022	2,5,7
NancyLee Siebenmann	336 Trailridge Rd SE	Cedar Rapids 52403	Linn	319-365-4117 siebenmannN@usa.redcross.org	2022	1,2,4,5,7
Elizabeth Koehn	PO Box 515	Wellman 52356	Washington	319-646-5816 ehkoehn13@yahoo.com	2022	2,7

LifeLong Links Advisory Council

LifeLong Links Advisory Council for: Heritage Area Agency on Aging
Updated On: [11/02/18]

Name	Organization	Address	City & Zip	County	Phone & Email
John Brandt	Community Volunteer	4027 Lakeview Dr. SW	Cedar Rapids, IA 52404	Linn	319-632-1741 brandtjekm@outlook.com
Eugenia Kendall	Heritage AAA	6301 Kirkwood Blvd. SW	Cedar Rapids, IA 52404	HAAA Region	319-398-7676 eugenia.kendall@kirkwood.edu
Terry Bergen	Linn County – Mobility	625 31st Ave SW	Cedar Rapids, IA 52404	Linn	319-892-5172 terry.bergen@linncounty.org
Jorden Cullen	HomeChoice Senior Care	1415 Blairs Ferry Rd. Ste B	Marion, IA 52302	Linn	319-363-2721 jordan@homechoiceseniorcare.com
Chanel Prince	Access 2 Independence	601 2nd Ave. SE	Cedar Rapids, IA 52242	HAA Region	319-343-1120 Chanel.prince@access2independence.org
Cliff Ehlinger	United Way 2-1-1	317 7th Ave SE Ste 401	Cedar Rapids, IA 52401	HAAA Region	319-398-5372 cehlinger@uweci.org
Tom Hardecopf	Linn Co. LIFTS	625 31st AVE SW	Cedar Rapids, IA 52404	Linn	319-892-5171 tom.hatdecopf@linncounty.org
Kathy Horan	Aging Services, Inc.	317 7th Ave SE Ste 302	Cedar Rapids, IA 52401	Linn	319-398-3644 khoran@AbbeHealth.org
Mike Lightbody	Iowa COMPASS	Home Office	Nebraska	HAAA Region	319-353-8778 michael-lightbody@uiowa.edu
Jena Maloney	UnityPoint Health – St. Luke's Hospital	1026 A Ave NE	Cedar Rapids, IA 52406	HAAA Region	319-369-7305 jena.maloney@unitypoint.org
Courtney Sand	Brain Injury Alliance of Iowa	1527 S Gilbert St	Iowa City, IA 52240	HAAA Region	319-466-7455 melissa@biaia.org
Dani Nelson	Abbe Center – Integrated Health Homes	317 7th Ave SE Ste. 302A	Cedar Rapids, IA 52401	Linn	319-261-0576 dnelson@abbehealth.org
Lisa Nelson	Heritage Specialty Care	200 Clive Dr SW	Cedar Rapids, IA52404	Linn	319-396-7171 lnelson@careinitiatives.org
Kari Kreel	Mercy Home Care	2740 1st Ave. NE	Cedar Rapids, IA 52402	HAAA Region	319-398-6579 kkreel@mercycare.org

Name	Organization	Address	City & Zip	County	Phone & Email
Melissa Pence	Alzheimer's Association	317 7th Ave	Cedar Rapids, IA 52401	HAAA Region	319-297-9699 mpence@alz.org
Lucia Herman	MHDS East Central Iowa Region	PO Box 427	Anamosa, IA 52205	HAAA Region	319-462-4457 lherman@co.jones.ia.us
Joanna Shade	Marengo Memorial Hospital	300 W May St	Marengo, IA 52301	Iowa	319-642-8063 jshade@marengohospital.org
Don Tyne	Linn County Veteran Affairs	1240 26th Ave St. SW	Cedar Rapids, IA 52404	Linn	319-892-5162 donald.tyne@linncounty.org
Shannon Jamison	Goodwill of the Heartland	1441 Blairs Ferry Rd NE	Cedar Rapids, IA 52402	Linn	319-739-5011 sjamison@goodwillheartland.org
Chris Wolf	Pioneer Park	501 E Pioneer Rd	Lone Tree, IA 52755	Johnson	319-629-4255 lthccadmin@lthcc.com
Evan Willhite	The ARC of East Central Iowa	680 2nd St. SE Suite 200	Cedar Rapids, IA 52401	Linn	319-385-0487 ewillhite@arceci.org

Attachments

Authorized Signatures

Area Agency on Aging Name	Primary Street Address	City & Zip	Type of Agency	Date of AAA Designation
Heritage Area Agency on Aging	6301 Kirkwood Blvd SW	Cedar Rapids, 52404	Non-Profit	07/01/2019

AUTHORIZED SIGNATURES FOR FUNDING APPLICATIONS AND CONTRACTS

Print Name: Kellie Elliott-Kapparos

Signature of Executive Director — Date Signed: 5/9/19

Print Name: Renee Riffey

Signature of Chair, Governing Body — Date Signed: 5-9-19

AUTHORIZED SIGNATURES FOR FISCAL REPORTS

Print Name: Kellie Elliott-Kapparos

Signature of Executive Director — Date Signed: 5/9/19

Print Name: Renee Riffey

Signature of Chair, Governing Body — Date Signed: 5-9-19

Print Name: Paula Lange

Signature of Fiscal Director (by KEK) — Date Signed: 5/9/19

AUTHORIZED SIGNATURES FOR PROGRAM REPORTS

Print Name: Kellie Elliott-Kapparos

Signature of Executive Director — Date Signed: 5/9/19

Print Name: Jill Sindt

Signature of Associate Director — Date Signed: 5-9-19

Updated 2/12/2020

Authorized Signatures

Area Agency on Aging Name	Primary Street Address	City & Zip	Type of Agency	Date of AAA Designation
HAAA	6301 Kirkwood Blvd SW	Cedar Rapids 52404	Non-profit	7/1/2019

AUTHORIZED SIGNATURES FOR FUNDING APPLICATIONS AND CONTRACTS

Print Name: [Director's First & Last Name]

No Change

Signature of Executive Director — Date Signed

Print Name: Lawrence Kudej

Signature of Chair, Governing Body — 2/12/2020

AUTHORIZED SIGNATURES FOR FISCAL REPORTS

Print Name: [Director's First & Last Name]

No Change

Signature of Executive Director — Date Signed

Print Name: Lawrence Kudej

Signature of Chair, Governing — 2/12/2020

Body Print Name: Brad Franzwa

Signature of Fiscal Director — 2/12/2020

AUTHORIZED SIGNATURES FOR PROGRAM REPORTS

Print Name: [Director's First & Last Name]

No Change

Signature of Executive Director — Date Signed

Print Name: [First & Last Name]

No Change

Signature of [Title] — Date Signed

Authorized Signatures

Area Agency on Aging Name	Primary Street Address	City & Zip	Type of Agency	Date of AAA Designation
Heritage Area Agency on Aging	6301 Kirkwood Blvd SW	Cedar Rapids, 52404	Non-Profit	07/01/2019

AUTHORIZED SIGNATURES FOR FUNDING APPLICATIONS AND CONTRACTS

Print Name: Kellie Elliott-Kapparos

Signature of Executive Director — Date Signed: 5/9/19

Print Name: Renee Riffey

Signature of Chair, Governing Body — Date Signed: 5-9-19

AUTHORIZED SIGNATURES FOR FISCAL REPORTS

Print Name: Kellie Elliott-Kapparos

Signature of Executive Director — Date Signed: 5/9/19

Print Name: Renee Riffey

Signature of Chair, Governing Body — Date Signed: 5-9-19

Print Name: Paula Lange

Signature of Fiscal Director (by KEK) — Date Signed: 5/9/19

AUTHORIZED SIGNATURES FOR PROGRAM REPORTS

Print Name: Kellie Elliott-Kapparos

Signature of Executive Director — Date Signed: 5/9/19

Print Name: Jill Sindt

Signature of Associate Director — Date Signed: 5-9-19

Grievance Procedures

Heritage will resolve complaints of employees, program participants served under the multiyear area plan, applicants to provide services, service providers, subcontractors or any other agency, organization or individual directly aggrieved by action of Heritage. Heritage procedures shall comply with relevant statutes, regulations, or rules and shall contain at least the procedures included in IAC[17]-6.10(231)5.

Heritage has a formal policy available upon request to anyone is the community. This policy is posted in the entry of each of our buildings and will be posted to the Heritage website. (Note: the Heritage website is currently going through a redesign and information will be added upon completion.)

Staff are trained the following:

- Heritage will treat all consumers with dignity, respect and concern regardless of the means in which they come in contact with Heritage staff (ex. Phone, Office Visit or Home Visit). As an Area Agency on Aging/Aging and Disability Resource Center, all reasonable and allowable efforts will be made to provide consumers with assistance, respond to needs in a timely manner, and provide service in a streamlined "no wrong door" mode of operation. Heritage is dedicated to the safety and well-being of staff and consumers.
- It is regrettable, but there are circumstances when communication with a consumer can deteriorate to the point where staff perceive they cannot get through to the individual or a consumer can begin shouting or become verbally abusive. In these situations, intervention as soon as reasonably possible by a member of the management team or their designee is warranted.

Additionally, Heritage provides a number of services that fall under HIPPA rules. HIPAA covered program consumers receive the Heritage Right to Privacy Practices which outlines their rights and how to request their rights, copies of the medical information and how to file a complaint among other things. These consumers have to sign a receipt of receiving this document.

Staffing and Volunteer Information

The following table lists the anticipated number of full and part-time positions at the agency, the number of SCSEP beneficiaries employed at the agency, and the number of volunteers supporting the agency at the start of the SFY 2020 (7/1/2019).

Position	Total Number
Staff (paid) full-time:	22
Staff (paid) part-time:	0
SCSEP Beneficiaries:	0
AAA Volunteers:	61

Nutrition Services, Service Providers, and Senior Center/ Focal Points

NUTRITION SERVICES

Heritage staff reviewed the following Nutrition Services information entered into the case management system (Wellsky) and verified that the information is current as of ***4/18/2019.***

Nutrition Services information to be verified for accuracy includes:

- Location (Name, Street Address, City, Zip)
- Frequency

SERVICE PROVIDERS OF OAA SERVICES

Heritage staff reviewed the Service Provider information entered into the case management system (Wellsky) and verified that the information is current as of ***4/18/2019.***

SENIOR CENTERS AND FOCAL POINTS

Agency staff reviewed the Senior Center and Focal Point information entered into the case management system (Wellsky) and verified that the information is current as of ***4/18/2019.***

Senior Centers and Focal Points

A focal point means a facility established to encourage the maximum collocation and coordination of services for older individuals.

Policy: Heritage shall develop and designate, where feasible, a focal point for comprehensive service delivery in each community, giving special consideration to designating multipurpose senior centers and congregate nutrition sites as community focal points on aging as required in Iowa Code Chapter 231.33(10).

Procedures:

1. Heritage will specify in the area profile the communities and facilities which are designated as focal points on aging. The AAA shall give special consideration to multipurpose senior centers and ensure that the facility currently or potentially can accommodate the collocation of services. In the designation of focal points on aging, the AAA shall consider:

a. Communities with the greatest incidence of older adults with the greatest economic and/or social need with particular attention to low-income older individuals including low-income minority older individuals, older individuals with limited English proficiency, and older adults residing in rural areas;
b. Efforts of voluntary organizations in the community;
c. Needs of participants and the delivery pattern of services funded under this part and funded from other sources;
d. Location of multipurpose senior centers and congregate nutrition sites;
e. Geographic boundaries of communities and natural neighborhoods; and
f. Location of facilities suitable for designation.

2. Heritage will further assure that funded partners are meeting the intent of serving as a focal point under the Older Americans Act by offering the following contractual language.

13.1 Preference

1. Types. The Subcontractor shall give preference, if allowed by law, to:

a. Employing persons aged 60 and older.

b. Delivering services under this Agreement to older adults with the greatest economic and/or social need with particular attention to low-income older individuals including low-income minority older individuals, older individuals with limited English proficiency, and older adults residing in rural areas.

c. Serving elders with the following characteristics in proportion equal to or greater than the proportion residing in the service area who have the same characteristics:

- Are disabled.
- Are minorities.
- Have incomes at or below the poverty level.
- Are aged 75 and older residing in rural portions of the state.
- Are frail.
- Are American Indians.
- Have limited English proficiency.

2. Written Plan. The Subcontractor shall have, as part of its policies and procedures, a written plan of outreach and service delivery that specifies how the Subcontractor will accomplish ensuring

preference with respect to elders with the characteristics set out above.

In addition, Heritage will consider the evolution of services and funding in a county, especially the development and growth of Case Management for the Frail Elderly (CMPFE), the Aging and Disability Resource Center (ADRC)/LifeLong Links and in coordinating home and community based services to seniors in that county.

Agency staff reviewed the Senior Center and Focal Point information entered into SAMS and verifies that the information is current as of ***4/16/2019.***

Emergency Plan Summary

Heritage has a formal policy available upon request to anyone is the community. This policy is distributed to staff and available in the Emergency Disaster Plan binder. (Note: the Heritage website is currently going through a redesign and information will be added upon completion.)

Heritage plays a very active role in disaster planning in the region. Heritage is the lead agency for the Older Adults/Special Needs Team of Linn Area Partners Active in Disaster (LAP-AID). One of the things Heritage coordinates through this group is the registration recruitment for the Linn County Special Needs Registry.

The Special Needs Registry is a program that allows people with physical, mental, other disability or special need to receive assistance during an emergency or evacuation from the Linn County Emergency Management Agency.

In addition, we recruit and train volunteers to assist in updating the listing each year to ensure emergency officials have current information by calling all registered households before an emergency occurs.

We are also a member of the Johnson County Community Organizations Active in Disaster (JCCOAD) and work with and participate as needed with the Benton County Community Organizations Active in Disaster (BCCOAD).

A summary of our formal plan is below:

Policy: Heritage's primary mission and goal is to plan, advocate, and fund programs and services available to seniors in Benton, Cedar, Iowa, Jones, Johnson, Linn and Washington counties.

Heritage's Role: During a disaster/emergency, Heritage will reorganize and regroup as quickly as possible to evaluate the most appropriate use of available resources to address the mission of the agency. Heritage role is not that of a first responder, but to offer assistance to emergency professionals to help educate them on the needs of seniors and to help in the creation of plans as invited. And if a disaster/emergency occurs, to bring life for seniors and other populations we serve in our area back to normal or as close to normal as soon as possible after the initial danger is under control.

Plan Development: Heritage staff will coordinate planning with other agencies for ensuring the safety of elders in a natural disaster or other safety-threatening situation as stated in (321)6.7(231). This is done by:

- Encouraging individual and organizational planning.
- Participating in emergency drills
- Community planning groups and organizations.

- Maintaining relationships with emergency officials, public health and other members of the aging network.

Heritage requires also subcontractors to have procedures to respond to disasters. Basic planning assistance is offered to subcontractors by Heritage staff.

Key Partners: Local/county/state emergency management offices (EMA), Public Health, FEMA, Homeland Security, Linn Area Partners Active in Disaster (LAP-AID) and Johnson County Community Organizations Active in Disaster (JCCOAD) and a variety of other community groups, both volunteer and professional.

Types of Emergencies/Disasters: The Heritage Disaster/Emergency Plan is purposefully flexible to allow for this plan to be appropriate and meaningful for all situations such as: public health emergencies, natural disasters, nuclear emergencies, economic situations and/or emergencies related to a terrorist attack.

Disaster/Emergency Plan Contents:

I. Chronology of Response
II. Disaster Response & Recovery
III. Agency Personnel Considerations
IV. Emergency/Disaster Drills
V. Emergency Management Contacts by County
VI. Other Important Contact Information for Heritage Director

Agency Name: Heritage Area Agency on Aging

Request to Provide Direct Service

Per IAC 17-6.12, AAAs must submit a request to provide direct services. The following services are exempt from the requirements in subrule 6.12(2):

a. Information and assistance;
b. Outreach;
c. Case management;
d. Advocacy representation;
e. Public education;
f. Employment services;
g. Mental health outreach;
h. Coordination of efforts concerning the prevention of elder abuse;
i. Options counseling.

For other services the AAA plans to provide directly, the agency must submit a request that includes the name of the service(s), provision (reason) and justification.

Provisions. Sections 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

a. Provision of the service(s) by the area agency on aging is necessary to assure an adequate supply of such services;
b. Such service(s) are directly related to area agency on aging administrative functions; or
c. The service(s) can be provided more economically, and with comparable quality, by the area agency on aging.

Justification. For each service, provide a justification for the waiver request.

- The justification should include such factors as a cost analysis or needs assessment, the area agency's efforts to secure services through a competitive solicitation process such as a request for proposal (RFP).
- If the service is considered part of administration activity, describe the rationale for considering it part of the administrative activity and the authority for that rationale.

The following table includes the service(s) for which the agency is seeking approval to provide directly, provision, and justification. In addition, the agency may specify the time period during which the service is provided directly and/or in which counties.

Service	Provision Enter one or more of the provisions listed above.	Justification	Time period	Counties
Caregiver Counseling	a, b, c	Caregiver Counseling is a natural fit under the LifeLong Links service umbrella. Counseling will be provided by telephone or in person through LifeLong Links to better address the needs of our target population. Emotional support is a critical need and can be addressed by our trained I/R&A/Caregiver Specialists. Through Counseling, Caregivers can receive emotional support they need in addition to accessing a seamless service delivery system with no wrong door. Heritage has one staff person trained in Powerful Tools for Caregivers, with another going through training presently. Heritage offers classes in the region in addition to other individual/family caregiver training opportunities. Heritage did not open this taxonomy for RFP consideration due to the current method of service delivery under this taxonomy definition. The was discussed and on the agenda for the Area Plan Public hearing.	FY 2020-2021	All - Region wide
Congregate Nutrition	a,b	Heritage has entered into a grant project with IDA and the ACL for Nutrition Innovation. Heritage has this grant through the end of the federal fiscal year, but plans to keep the newly created congregate sites open. These sites, name "Encore Cafe" are located in Marion and Cedar Rapids in under served areas identified by GMS mapping and other available data. Heritage did open this taxonomy for RFPs and intends to fund those sites, however, Encore Cafe is a special project begun under a grant, with Heritage now working towards sustainability and possible implementation through best practices throughout the region. There is currently no Congregate Nutrition services available in Washington county. Heritage hopes to spread the Encore Cafe concept to fulfill this need.	FY 2020-2021	Linn and Washington counties
Health Promotion - Evidence Based	a,b,c	Heritage has strong, well known, Evidenced Based Health Promotion programing in Chronic Disease Self-Management Program (CDSMP) and Powerful Tools for Caregivers among others. Heritage employs a Health and Wellness Coordinator to teach classes and recruit volunteer leaders to help offset costs. HAAA also partners with other agencies to help teach classes. Heritage did not open this taxonomy up for RFP consideration due to the current partnerships and activities. This was discussed and on the agenda for the Area Plan Public Hearings.	FY 2020-2021	All - Region wide

Service	Provision Enter one or more of the provisions listed above.	Justification	Time period	Counties

Public hearing documentation indicates the manner in which public input on the proposal to directly provide service(s) listed above was obtained.

Executive Director Kellie Elliott-Kapparos Digitally signed by Kellie Elliott-Kapparos Date: 2019.05.09 12:52:44 -05'00'

To be completed by IDA Staff

Per IAC 17-6.12, the Commission on Aging may approve an AAA request to provide direct service. Approval will be based upon documentation provided. If the criteria for approval of a request to provide direct services are not met, a condition may be placed on the area plan approval.

Service	Approved?	If not approved, why not	Additional information required	Date approved by Commission
Caregiver Counseling	Yes			6/6/2019
Congregate Nutrition	Yes			6/6/2019
Health Promotion - Evidenced Based	Yes			6/6/2019