Four-Year Plan

October 1, 2016 – September 30, 2020

Lebanon County Area Agency on Aging

710 Maple Street

Lebanon, PA 17046

(717) 273-9262

Carol A. Davies, Administrator
AREA PLAN

PART A
Executive Summary

The Lebanon County Area Agency on Aging (AAA) is an entity of Lebanon County government. Through an agreement with the Pennsylvania Department Aging (PDA), the AAA is charged with advancing the well-being of older adults in Lebanon County. The agency currently employs 45 full and part time employees, and is guided by a 15 member Advisory Council. The mission of the AAA is to develop, coordinate and promote a continuum of services that values and supports adults as they age; empowers them to maintain independence, dignity and respect; and enhances their overall well-being and quality of life.

Based on state and federal requirements, the AAA must engage in a periodic planning process to take stock of the agency and the community it serves in order to develop a blueprint for future action. The planning process includes a review of demographic data; political and economic factors; pertinent social factors; and technological factors; and then the development of measurable goals and objectives based on the above items. The plan covers the four year period beginning on October 1, 2016, and ending on September 30, 2020.

One of the most significant pressures on Lebanon County and the AAA in the coming years will be the increase in the population of people aged 60 and older, caused by the aging of the Baby Boom generation. The number of people 60 years of age and older in the County, both in raw numbers and as a percentage of the total population, has increased dramatically in the past nine years. From 2005 to 2014, the total population of the county increased by 10,781 people, or 8.59%. During the same time period, the number of people in the County 60 and older increased by 7,446 or 28.34%!

Also of significance is the 32.33% increase in the population of those 85 years of age and older. This group generally represents those who are the most fragile, and often the most likely to need in-home services.

As part of the planning process, the AAA conducted a needs assessment by surveying both current and potential recipients of services. The AAA also looked at the political, economic, social and technological factors that might impact its operations. Of particular concern was the waiting list for in-home services established in October of 2015. A public hearing was held on June 1 to share the results of the needs assessment and solicit input from the public.

Based on the analysis outlined above and described more fully in the body of the plan, the AAA then established its goals for the Four-Year Plan period, using the four specific focus areas
provided by the PDA. For each goal, more specific objectives and strategies were defined. Performance factors were also defined so that progress against the plan could be measured.

The goals are summarized below. Again, more detail can be found in the body of the plan.

1. **Promote existing services**
   a. Increase general awareness of the agency and the support it can provide throughout the community.
   b. Promote attendance at senior centers.

2. **Improve access to services**
   a. Evaluate Waiting List process to ensure that individuals are served as promptly as possible and to provide appropriate support while individuals are waiting for services.
   b. Improve and maintain compliance with the requirement to complete assessments within 15 days so that individuals can receive necessary services as promptly as possible.
   c. Advocate for changes throughout the community so that it may prepare for the increase in the number of people aged 60 and over, many of whom will have unique needs as they age.
   d. Implement necessary changes related to the Department of Aging and the Office of Long Term Living’s efforts to establish the Community HealthChoices program and the related change to enrollment.

3. **Enhance quality of service**
   a. Evaluate the roll-out of the new quality assurance process developed after the January 2016 PDA monitoring.
   b. Evaluate annual contract monitoring process and related client satisfaction surveys to improve focus on quality of services, suggested areas of improvement, and performance outcomes.

4. **Empower the workforce**
   a. Empower APPRISE volunteers by providing more structured training, so that they can be confident that they are providing credible information to those that they counsel.
   b. Empower other AAA volunteers by providing more structured training.
   c. Empower AAA staff by providing them with the tools that they need to do their jobs.

The next four years will be challenging for the AAA and the community as a whole, as all work to address the changing need of an ever-larger aging population.
Lebanon County Area Agency on Aging
Four-Year Plan
October 1, 2016 – September 30, 2020

Agency Overview

1. Organizational Structure
   The Pennsylvania Department of Aging (PDA), through enabling legislation including both
the federal Older Americans Act of 1965 as amended in 2006 and Pennsylvania’s ACT 70, has
designated the Lebanon County Area Agency on Aging (AAA) as the local entity responsible
to advance the well-being of older adults in the Lebanon County Planning and Service Area.
The AAA is an agency of Lebanon County Government, and is responsible to the Lebanon
County Commissioners. The AAA Administrator reports directly to the County’s Chief Clerk/
Administrator. The agency currently employs 45 full and part time employees, and is guided
by a 15 member Advisory Council.

   The mission of the AAA is to develop, coordinate and promote a continuum of services that
values and supports adults as they age; empowers them to maintain independence, dignity and
respect; and enhances their overall well-being and quality of life.

   Per legal mandate, both the PDA and AAA must engage in a periodic planning process to take
stock of the agency and the community it serves in order to develop a blueprint for future
action. The planning process includes a review of demographic data; political and economic
factors; pertinent social factors; and technological factors. The AAA then develops measurable
goals and objectives based on the above items. This document outlines the AAA’s plan for
the four year period beginning on October 1, 2016 and ending on September 30, 2020.

2. Demographics
   Recent census data reflects a significant change in the population of the County that mirrors
national trends. As summarized in the chart below, the number of people 60 years of age and
older in the County, both in raw numbers and as a percent of the total population, has increased
dramatically in the past nine years. Looking at the breakdown by age cohort, it is easy to see
the advent of the Baby Boom Generation (those born between 1946 and 1964) into our service
population, and those born in 1946 will turn 70 years old in 2016. This generation has impacted
the nation as they moved through every age category, and as they enter their 60s and now their
70s, their impact will be just as significant. Also of significance is the large increase in those
85 years of age and older. This group generally represents those who are the most fragile, and
often the most likely to need in home services.
Lebanon County Population

<table>
<thead>
<tr>
<th></th>
<th>2005</th>
<th>2014</th>
<th>#Increase/Decrease</th>
<th>% Increase/Decrease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population</td>
<td>125,578</td>
<td>136,359</td>
<td>10,781</td>
<td>8.59%</td>
</tr>
<tr>
<td>60 to 64 Years</td>
<td>6,190</td>
<td>8,695</td>
<td>2,505</td>
<td>40.47%</td>
</tr>
<tr>
<td>65 to 69 Years</td>
<td>4,746</td>
<td>7,453</td>
<td>2,707</td>
<td>57.04%</td>
</tr>
<tr>
<td>70 to 74 Years</td>
<td>4,619</td>
<td>5,848</td>
<td>1,229</td>
<td>26.61%</td>
</tr>
<tr>
<td>75 to 79 Years</td>
<td>4,534</td>
<td>4,303</td>
<td>(231)</td>
<td>(5.09%)</td>
</tr>
<tr>
<td>80 to 84 Years</td>
<td>3,185</td>
<td>3,451</td>
<td>266</td>
<td>8.35%</td>
</tr>
<tr>
<td>&gt; 85 Years</td>
<td>3,000</td>
<td>3,970</td>
<td>970</td>
<td>32.33%</td>
</tr>
<tr>
<td>Total 60 and Older</td>
<td>26,274</td>
<td>33,720</td>
<td>7,446</td>
<td>28.34%</td>
</tr>
<tr>
<td>% of Population 60+</td>
<td>20.92%</td>
<td>24.73%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Looking at service data for 2013-2014 and 2014-2015, the AAA was able to increase its reach to the 60+ population in the County, increasing from serving 4.9% of the 60+ population in 2013-2014 to 5.2% served in 2014-2015. While still below the statewide average of 6.4%, the AAA was able to achieve an increase using the funds allocated as part of the state’s historic investment in services for older adults from 2013-2016. It will be a challenge for the AAA to maintain or improve on the parameter in the coming years given the dramatic increase in the 60+ population and the recent waiting list that was established for AAA services.

Census data also reveals that there is a lower incidence of minority individuals in Lebanon County as compared to the rest of state, with 96.7% of the 60+ population identifying as white compared to 89.90% statewide. Despite a lower level of educational attainment than the 60+ population throughout the state, 84.70% of the 60+ population in Lebanon County is at or above 150% of the poverty level, as compared to 81.80% statewide.

3. Political and Economic, Social and Technological Conditions
In addition to census data, the AAA looked at political, economic, social and technological factors that could influence the agency’s future operation.

a. Political Factors
   i. On the political front, the AAA must be in tune with changes that are occurring at the PDA, as many of the decisions made there will directly impact operation at the AAA. As the Department of Aging issues new policy directives to the AAA, the AAA must update its own internal polices and processes in response.
ii. The health of the Pennsylvania Lottery fund also plays a major role in the future success of the AAA. Pennsylvania is the only state in the nation that devotes the proceeds of its lottery to program and services for older residents, and it accounts for nearly 67% of the AAA’s annual budget.

iii. Another political change that will have a significant impact on the AAA in the years to come is the advent of Community HealthChoices (CHC), which will change the way that long term services and supports are provided to those 60 and older who are dually eligible for both Medicare and Medicaid. The change is slated to take place in Lebanon County effective January 1, 2019, and it is expected that the AAA will play a role in preparing the community for this change as the time draws near.

b. Economic Factors

i. The third year of PDA’s historic investment in Aging programs is now ending. The AAA received a significant amount of new funding through this initiative, and was able to increase both the amount of services provided to individuals and the overall number of people served. However, the AAA cannot maintain this growth unless funding continues to increase, especially in light of the demographics noted above.

ii. Another important economic factor is the rising cost of personnel benefits, particularly pension and health insurance costs. These affect Lebanon County, as they do many employers. Costs to the agency for just these two items have increased by over 75% since 2013-2014, in part due to a renewed effort by the County to fund the Annual Required Pension Contribution.

iii. Another side of this same issue is the impact of changing health insurance coverage and the shift from traditional pensions to 401K-type accounts, which has impacted the ability of those 60 and older to afford their retirements. A recent needs assessment conducted by our local hospital noted that 90% of adults in the county have a personal physician and health insurance, yet 1 in 3 are often deterred from seeking medical attention for financial reasons.

c. Social Factors

i. Results of a national study indicate that 90% of older adults want to stay in their own homes. This supports the need for less costly home and community based services as an alternative to more costly institutional care.

ii. The AAA conducted its own needs assessment to determine social needs of the population as they relate more specifically to AAA services. The AAA developed a survey and gathered response from existing AAA consumers of either in-home or Senior Center services. Additional responses were gathered from attendees at the annual 50+ Festival. This was also the first year that the AAA designed a separate survey for use by AAA staff to provide input into the
Lebanon County Area Agency on Aging
Four-Year Plan
October 1, 2016 – September 30, 2020

plan. In addition, the AAA Administrator and the Advisory Council reviewed a discussion document at the regularly scheduled May 2016 meeting, and many Advisory Council members attended the AAA’s Public Hearing on June 1, 2016. Through these methods, the AAA gained an understanding of what services are most valued by people, what barriers exist to receiving services, and how it could improve awareness of services.

iii. The AAA also reviewed data from the Benchmark Reports provided by the PDA. These provided data on topics including the percentage of the population served, the nutritional risk scores of those served by our meal program, and other pertinent data.

d. Technological Factors
i. The AAA found that no consumers suggested technology or social media as a way to learn about AAA services, yet the agency website has seen over 6,600 visits in the last year. As a people business, the AAA needs to understand the importance of technology and take advantage of the opportunities for improvement in its data collection efforts, which provide a way to measure success and continue to advocate for the resources needed to serve a growing number of seniors.

4. Resource Development
To continue in its mission to serve those 60 and older in our community, the AAA must continue to partner with outside organizations. Feedback at the public hearing indicated a need to advocate to the Behavioral Health community concerning the aging of the Baby Boom generation and the increased need this will create for geriatric psychiatric care.

Due to the size of Lebanon County, the AAA is fortunate to be able to work directly and cooperatively with many other County Human Service Agencies. Staff members reach out into the community on a regular basis, to open doors as necessary when the need arises. The AAA also has strong relationships with other organizations serving the 60+ population, which include the Senior Outreach Services group, a network of professionals from a variety of industries, including those that don’t specifically focus on serving the senior population, such as banks and insurance companies. The AAA also partners with the Age Wave Initiative, a volunteer group of concerned professionals that are advocating to prepare the community for the changes that will take place as the Baby Boom generation continues to age.

The AAA recognizes the need to provide services to older individuals with the greatest social and economic need and those at risk for institutional placement, as well as low-income minority individuals, older individuals with limited English Proficiency and older individuals living in rural areas. The AAA meets these objectives in many ways, including the recent addition of contracts to provide translation services both for intake and referral calls as well as
for formal assessments. The AAA delivers meals to every corner of the county. Farmers’ Market Nutrition Program check distribution sites are located throughout the County, including the subsidized senior housing locations. Provider contracts also pass on these requirements so that all are aware of the importance.
Goals, Objectives and Strategies

Based on analysis of all the data reviewed through our look at the community, the census data and our needs assessment, the AAA has prepared the following goals for the four-year period. For each goal, objectives and strategies are listed, as well as the related performance measures that will enable the AAA to measure its success in reaching them. In accordance with the request of PDA, the local plan is centered on the four broad goals developed by the PDA. It should be noted that many objectives and strategies will address more than goal, although each is only assigned to one goal.

• Goal #1: Promote Existing Services
  
  1. Objective 1.1: Increase general awareness of the agency and the support it can provide throughout the community.
     a. Strategies
        i. Evaluate use of electronic / social media.
        ii. Continue to update website and foster methods to direct people towards it.
        iii. Evaluate continued use of traditional advertising including billboards, newspaper, radio, direct mail
        iv. Provide updates at various community meetings, including LINK including LINK, SOS, Community Health Council, Age Wave, caregiver events, VA, Rotary and others. .
        v. Assess communication within the agency so that staff members are more aware of agency programs outside their area of direct responsibility.
     b. Performance measures
        i. Website hits
        ii. # people on a mailing list
        iii. # events attended
        iv. # and % of 60+ population served
        v. Analysis of referral sources

  2. Objective 1.2: Promote attendance at senior centers.
     a. Strategies
        i. Evaluate location, program offerings, and operating hours of each center to determine what works at each location, what could potentially bring in new participants, and what events, such as Prime Time Health and Farmers Market Nutrition Program, tie in to other AAA goals and objectives.
        ii. Development program themes to encourage participation in the monthly special meals.
        iii. Develop plan to support center participants found to be at high nutritional risk.
     b. Performance Measures
Lebanon County Area Agency on Aging  
Four-Year Plan  
October 1, 2016 – September 30, 2020

i. # of people attending centers  
ii. # of people eating at the centers  
iii. # of new events  
iv. Use of surveys to determine how attendance impacts their lives.  
v. Changes in nutritional risk scores.

• **Goal #2: Improve Access to Services**

1. **Objective 2.1:** Evaluate Waiting List process to ensure that individuals are served as promptly as possible and to provide appropriate support while individuals are waiting for service.  
   a. Strategies  
      i. Evaluate internal review process to streamline where possible.  
      ii. Evaluate criteria used to accept people into service.  
      iii. Develop tools to assist individuals who are not receiving in traditional AAA services.  
   b. Performance measures  
      i. Length of time on waiting list

2. **Objective 2.2:** Improve and maintain compliance with the requirement to complete assessments within 15 days so that individuals can receive necessary services as promptly as possible.  
   a. Strategies  
      i. Develop internal tools and tracking mechanism, using SAMS or other data system as appropriate to monitor progress.  
      ii. Provide training and feedback to staff as necessary to ensure compliance.  
      iii. Evaluate the component steps of the process and assign to staff in a way that maximizes efficiency and productivity.  
   b. Performance measures  
      i. # of assessments completed within 15 days.  
      ii. Cost per assessment

3. **Objective 2.3:** Advocate for changes throughout the community so that it may prepare for the increase in the number of people aged 60 and over, many of whom will have unique needs as they age.  
   a. Strategies  
      i. Include messaging about the changes in local demographics in all interactions with those outside the aging network.  
      ii. Continue work with the Age Wave, SOS and similar entities to help the community prepare for the changes that lie ahead.  
   b. Performance measures  
      i. # of presentations made
4. **Objective 2.4:** Implement necessary changes related to the Department of Aging and the Office of Long Term Living’s efforts to establish the Community HealthChoices program and the related change to enrollment.
   a. Strategies and performance measures will be developed as more information about these changes becomes available.

- **Goal #3: Enhance Quality of Service**
  1. **Objective 3.1:** Evaluate the roll-out of the new quality assurance process developed after the January 2016 PDA monitoring.
     a. Strategies
        i. Review quarterly samples monitored for adherence to the new policy and to determine if results indicate a need for any refresher training or instruction to be given to staff.
        ii. Review process to ensure that is having the intended result.
     b. Outcomes
        i. # of files reviewed
        ii. Number of policies updated or clarified given to staff
        iii. Staff feedback
        iv. Subsequent PDA monitoring scores

  2. **Objective 3.2:** Evaluate annual contract monitoring process and related client satisfaction surveys to improve focus on quality of services, suggested areas of improvement, and performance outcomes.
     a. Strategies
        i. Develop questions related to quality rather than individual preferences
        ii. Try to ascertain how provision of services improves quality of life.
     b. Outcomes
        i. # surveys updated
        ii. Client measures of improved quality of life

- **Goal #4: Empower the Workforce**
  1. **Objective 4.1** Empower APPRISE volunteers by providing more structured training, so that they can be confident that they are providing credible information to those that they counsel.
     a. Strategies
        i. Expand upon the quarterly training program that was recently begun to provide more structure and increase focus on shadowing.
     b. Performance measures
        i. # of training sessions held
        ii. Rate at which volunteers are able to counsel independently
Lebanon County Area Agency on Aging
Four-Year Plan
October 1, 2016 – September 30, 2020

iii. # of people counseled
iv. # volunteers retained
v. # volunteers recruited

2. **Objective 4.2: Empower other AAA volunteers by providing more structured training.**
   a. Strategies
      i. Reinstate the refresher classes for MOW volunteers to periodically review program expectations.
      ii. Develop a written training packet to supplement the in-person training provided by paid AAA staff.
   b. Performance measures
      i. # of trainings session held
      ii. # volunteers retained
      iii. # volunteers recruited

3. **Objective 4.3: Empower AAA staff by providing them with the tools that they need to do their jobs.**
   a. Strategies
      i. Develop policies, manuals, or other instructions that will provide consistent guidance to staff, particularly for changing circumstances, unusual situations or staff transitions.
   b. Performance Measures
      i. # policies, manuals or instructions developed
      ii. Staff feedback
AREA PLAN

PART B
AREA PLAN PART B

Section 1. Signature Page/Standard Assurances Commonwealth of Pennsylvania
Department of Aging

FY 2016-20 Area Agency on Aging

Four-Year Area Plan on Aging

Signature Page
Area Agency on Aging Name and Address:

Lebanon County Area Agency on Aging
710 Maple Street, 2nd Floor
Lebanon, PA 17046

I/we certify that I/we are authorized to submit this Plan on behalf of the designated Area Agency on Aging and agree to abide by regulations issued by the Pennsylvania Department of Aging, the U.S. Department of Health and Human Services, and the U.S. Department of Labor. I/we further certify that the general public has had the opportunity to review and comment on this Plan through the public hearing process and that written policies, procedures or agreements, as appropriate, have been developed in accordance with Part A, Section 307 of the Older Americans Act, and are on file for review and approval, as appropriate, by Department of Aging officials.

I/we assure that services and programs of the Area Agency on Aging will be managed and delivered in accordance with the Plan submitted herewith. Any substantial changes to the Plan will be submitted to the Department of Aging for prior approval.

I/we hereby expressly, as a condition precedent to the receipt of State and Federal funds, assure:


1) I/we do not and will not discriminate against any person because of race, color, religious creed, ancestry, national origin, age, sex, or handicap:

   a) In providing services or employment, or in its relationship with other providers;

   b) In providing access to services and employment for handicapped individuals.

2) I/we will comply with all regulations promulgated to enforce the statutory provisions against discrimination.
I/we further hereby agree that all contracts for the provision of services addressed herein will require contractors to comply with these same provisions.

I/we certify that the advisory council of the Area Agency on Aging has participated in the development of this Plan and has reviewed the Plan as herewith submitted.

Signature(s) of Governing Authority
Official(s), e.g., Chairman of County Commissioners or President, Board of Directors.

<table>
<thead>
<tr>
<th>Title</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Commissioner</td>
<td>6/16/16</td>
</tr>
<tr>
<td>County Commissioner</td>
<td>6/16/16</td>
</tr>
<tr>
<td>County Commissioner</td>
<td>6/16/16</td>
</tr>
<tr>
<td>Administrator</td>
<td>6/16/16</td>
</tr>
</tbody>
</table>

(Signature of the Area Agency on Aging Director) (Title) (Date)

Name of Person to Contact Regarding the Contents of This Plan:

Carol A. Davies
(Name)

717-273-9262
(Area Code and Telephone)
Part B. Section 2

DOCUMENTATION OF PARTICIPATION BY THE AREA AGENCY ON AGING ADVISORY COUNCIL

PSA NO. 24

NAME OF AAA: Lebanon County Area Agency on Aging

PLAN PERIOD FROM Oct 1, 2016 TO Sept 30, 2020

In accordance with 6 PA Code, Section 35.23, a.(1) and (2) and the Older Americans Act of 1965, as amended, I certify that the Area Agency on Aging Advisory Council has had the opportunity to assist in the development of this Plan. I further certify that the Area Agency on Aging Advisory Council has participated in at least one Public Hearing held on this Plan.

The Area Agency on Aging Advisory Council (does / does-not) not recommend approval of this Plan.

[Signature]

Thomas L. Reilly
Signature of the Chief Officer of the Area Agency on Aging Advisory Council

Tom Reilly, Chairman of Advisory Council
Typed Name and Title

June 8, 2016
Date
**Part B. Section 3**

**Listing of Plan Assurances and Required Activities**

**Older Americans Act, As Amended in 2006**

**ASSURANCES**

The Older Americans Act of 1965, as amended, requires each Area Agency on Aging (AAA) to provide assurances that it will develop a Plan and carry out a program in accordance with the Plan. Each AAA must comply with the following provisions of the Act. Written policies, procedures, or agreements, as appropriate, must be on file in the AAA office and available for review and approval by Department of Aging officials.

**Area Plans**

- Assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services:
  - Services associated with access to services: transportation, health services (including mental health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services
  - In-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction
  - Legal assistance

- Assurances that the AAA will report annually to the Department of Aging in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

- Assurances that the AAA will:
  - Set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement
  - Include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and
  - Include proposed methods to achieve the objectives

- Assurances that the AAA will include in each agreement made with a provider of any service under this title, a requirement that such provider will:
  - Specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider
  - To the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services
  - Meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area
• Each AAA shall identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area, describe the methods used to satisfy the service needs of such minority older individuals, and provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

• Assurances that the AAA will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on:
  o Older individuals residing in rural areas
  o Older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas)
  o Older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas)
  o Older individuals with severe disabilities
  o Older individuals with limited English proficiency
  o Older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals)
  o Older individuals at risk for institutional placement

• Assurances that the AAA will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

• Assurances that the AAA will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities.

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

• Assurances that the AAA, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

• Information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as “older Native Americans”), including:
  o Information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities
  o Outreach, to increase access of those older Native Americans to programs and benefits provided under this title
  o Assurance that the AAA will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI
  o Assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

• Assurances that the AAA will maintain the integrity and public purpose of services provided, and service providers under this title in all contractual and commercial relationships.
• Assurances that the AAA will disclose to the Assistant Secretary and the State agency the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and the nature of such contract or such relationship.

• Assurances that the AAA will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.

• Assurances that the AAA will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.

• Assurances that the area agency will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

• Assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the AAA to carry out a contract or commercial relationship that is not carried out to implement this title.

• Assurances that funds received under this title will be used to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212.

• Information detailing how the AAA will coordinate activities and develop long-range emergency preparedness plans with local and State emergency.
Part B. Section 4

Narrative Summary of the Proceedings of the AAA Area Plan Public Hearing.

Attach a written narrative (no more than five pages) summarizing the proceedings of the AAA Area Plan Public Hearing.
The Lebanon County Area Agency on Aging (LCLCAA) held its annual Public Hearing to discuss the 2015-2016 budget and 2016-2020 Agency Area Plan. The meeting began at 10:30 a.m. in the Senior Center auditorium located on the 1st Floor.

There was a total of 27 people in attendance, including Commissioners Ames and Litz, members of the LCAA Advisory Council, area Providers, members of the community and LCAA staff.

Carol Davies, Administrator, welcomed those in attendance to the meeting and restated the purpose of the meeting in that it fulfills two requirements of the agency; 1) to discuss the 2015-16 Aging Block Grant, which is our primary funding source; and 2) to meet the requirements of the Pennsylvania Department of Aging Four Year Area Plan, which will be in effect from October 1, 2016 to September 30, 2020.

Using a PowerPoint presentation, with corresponding handout, Ms. Davies presented the day’s plan to discuss the 2015-16 Aging Block Grant, 2016-2020 Four Year Area Plan and to allow time for public comment.

Ms. Davies recapped the agency’s commitment, as stated in its Mission Statement, “to develop, coordinate and promote a continuum of services that values and supports older adults as they age; empowers them to maintain their independence, dignity and respect; and enhance their overall well-being and quality of life”.

The LCAA has provided over 40 years of service to the residents of Lebanon County and is an entity of the Lebanon County government. The majority of the LCAA funding, and program structure, is received through the Pennsylvania Department of Aging. 67% of the overall funding, though, is received through the PA Lottery. LCAA has 45 full and part-time employees who are committed to providing a continuum of services to Lebanon County residents.

It was explained that prior to 2013, there had been several years where there was no change in LCAA’s basic funding allocation. Part way through 2013-2014, through the 1st year of Pennsylvania’s historic investment in Aging programs, $357,000 in new funding was received, targeted solely to providing more in-home services to existing consumers and to serve new consumers. Even though services were increased through evening and weekend MOW meals, increased hours of personal care and the implementation of home modification and fuel assistance programs, approximately $100K could not be spent during the year and was then returned to the state. In 2014-15, during the 2nd year of the historic investment, no new funds were initially allocated. A request by LCAA for funds resulted in a second allocation totaling $357K in new funding later in the year to continue existing plans.
Next, Ms. Davies reviewed the history of population growth in Lebanon County as it pertained to the over 60 population from 2010 to 2014 (2015 census data was not available in time for this meeting). The numbers showed that even though the total population of Lebanon County only increased by 2,791 people or 2.09% in that time-frame, the 60 and over population had grown by 2,843 people or 9.21%. The over 85 group increased by 9.61%. The aging of the Baby Boomers was also noted, with increases in the 60-64, 65-69 and 70-74 year old categories of 6.71%, 15.12% and 19.42%, respectively, impacting services provided by the LCAAA and other local community agencies.

Service provision during the past five years was also reviewed. Meals on Wheels has nearly doubled in persons receiving meals (165 in 2013 to 301 by March 2016) and Personal Care services have increased from 65 persons served (and 604.5 hours of service) to 90 people receiving 1,532 hours of service. A summary of Selected Services, including Congregate Meals, I & R contacts, Soc/Rec promotional programs and APPRISE programs were shown from 2012 to 2016.

During the final year of the historic investment (2015-2016), the agency eliminated the pilot home mods and fuel assistance programs due to unsustainability, the six month state budget impasse delayed the request for additional funding until February; extra hours of PC and new evening/weekend meals were eliminated in July and September, respectively; a Waiting List was established and even though one-time only funds were eventually received, the agency cannot count on having these funds going forward. Ms. Davies noted that even though we are forced to have a Waiting List, 111 people have been removed with 44 people are still on the list.

The 2015-2016 Budget was then reviewed, including the $3.7 million agencies sources of funds; expenditures by types and expenditures by programs. Ms. Davies pointed out that funds used for Administration costs is 8.31% which is less that the 10% allowed by the State.

The meeting then shifted to a discussion to the Four Year Planning process which the PDA requires all area agencies on to complete. Ms. Davies noted that the State also has to go through their own process. The LCAAA is required to develop a plan every four years to meeting the following five (5) goals: 1) Inform/educate stakeholders; 2) comply with Act 70 and OAA; 3) ensure that local needs are integrated with state and federal goals, initiatives and regulations; 4) provide management tool to help guide decision making throughout plan period; and 5) provide critical info to PDA. The plan process involves looking at the community outlook through a review of surveys and other information, and then developing goals, objectives and strategies. The goals must be measurable (not only how many served, but also the impact the services has on our service recipients). The process would then be reviewed by oversight entities such as our Advisory Council, County Commissioners and the Pennsylvania Department of Aging.
Areas that would impact services include political, economic, social and technological factors. It was noted that whatever goals the PDA set will impact the local aging agencies. The Managed Care for Long Term serves and supports, or Community HealthChoices, is scheduled to begin in our area, effective January 1, 2019, although changes in enrollment and assessment are already being noted. Economic factors such as expected state allocations, health insurance and pension costs, and the ability of people to afford services would impact the budget; and the social factors must be examined through surveys by needs, health statistics and demographics. A look at Lebanon County’s population growth over a longer period than previously reviewed, shows an overall total increase from 2005 to 2014 in the 60+ population of 28.34% vs. a 8.59% increase in growth in the number of all Lebanon Countians In 2014-2015, LCAAA serves 5.2% of the County’s over 60 population, an increase over the 4.9% served the prior year, but less than the statewide average of 6.4%.

A final factor impacting future plans is the lack of use of social media and technology by the over 60 population. The use of in-house technology to support our goals and objectives must also be addressed.

In summary, the LCAAA must set goals using PDA’s framework and attempt to strengthen the network as the Baby Boomers continue to age. Ms. Davies invited comments from those in attendance on other factors that might impact our plans and suggestions as to what goals could be addressed.

Public Comments/Questions

Question: Please explain, for better understanding, the Community HealthChoices (CHC) coming in 2019.

Answer: CHC, which is coming to Pennsylvania, is for the consumer who is dually eligible for Medicare/Medicaid, replacing the Aging Waiver, effective 1/1/2019. Since April 2016, the State has also changed the enrollment process from going through the local offices of aging to having to go through an independent enrollment broker, Maximus.

Question: Does the LCAAA has any advice for providers on how to receive information from Maximus on where their clients are in the enrollment process?

Answer: Service providers can get the contact information by phoning the office of aging.

Question: What is managed care and what does it encompass?

Answer: Managed Care for Long Term Services and Supports, or Community HealthChoices, will operate on a capitated payment basis, rather than the traditional fee-for-service basis, and will provide services that are currently provided under several waiver programs, including the PDA Waiver.
Question:  How can services be coordinated with what LCAA is doing within their agency? How can Mental Health be expanded out through the community?

Answer:  The LCAA does not directly provide mental health services, but collaborates with various service providers throughout the County.

Question:  Is there a timeframe concerning getting MOW recipients off of the Waiting List?

Answer:  Even though the ideal would be to have 0 people on the Waiting List, it is difficult to say when that could occur, especially given the constraints on our budget and the growing number of people needing our services.

There being no further questions or comments, the meeting was adjourned.

Respectfully submitted by,

Kathleen Fryer
Administrative Secretary