

Board of Directors
Middle Alabama Area Agency on Aging
November 8, 2005

Present:	Commissioner Larry Dillard
Board Members:	Commissioner Glenda Strength
Commissioner Jon Parker	Absent: Commissioner Lindsey Allison
Judge Royce King	Commissioner Stan Bateman
Commissioner David Cochran	Commissioner Mike Bowling
Commissioner Bruce Hamrick	Commissioner Jimmy Roberts
Richard Lovelady	Rev. Glen Bynum

Staff Present: Julie Miller, Executive Director, Alfredia Norris, Fiscal Officer, Carolyn Fortner, Attorney

Commissioner Dillard had proxy for Lindsey Allison

The meeting was called to Order by Chairman Larry Dillard.

The Board approved the minutes of the May 18, 2005 board meeting with a motion by Hamrick, 2nd: Lovelady, all passed

The Financial Report was discussed by Alfredia Norris. Ms. Norris stated she is continuing to work on a reporting system to show all programs income versus expense and to breakdown what is reported to the state in a regional report to a county by county report. The report handed out is a close version for Title III programs by county.

Ms. Norris reported that ADSS had asked for a wish list of which we asked for help on transition costs to include an increase in meals. Blount County had been awarded \$15,000 and Chilton County \$5,000 to be used for transition expenses. At the time of this meeting we had not received the additional funds nor was it clear from ADSS how we were to handle these funds. Our request was to receive assistance with the transition deficits which were also in Walker and St. Clair Counties. In addition the state allocated some additional funds for FY 06 to assist in increasing meals to the centers where we have to convert homebound to frozen meals in order for those areas to meet their 25meal minimum.

The budgets were also discussed. Commissioner Hamrick requested a motion to pass the budgets. The motion was seconded by Parker, All passed

The 2004 Audit was distributed by Julie Miller. Mrs. Miller stated that the Fiscal Officer, Ms. Norris should be commended for getting the books to the satisfaction of the auditors. The Audit Issues of the 2003 audit in regards to local support and conflict of interest continue as we were still in the process of transitioning change in FY 04.

Ms. Miller requested that the board approve the list of contracts.

There were 19 contracts for Title III Services, one transportation contract with Clastran, 15 contracts for Medicaid Waiver Services and 22 contracts for Alabama Cares. There are three lease agreements for the copy machine, postage meter and storage unit.

Mr. Lovelady made a motion that the board accepts the contracts with Commissioner Hamrick seconding the motion and all voting in favor.

Mrs. Miller reminded the board members who were present at the scheduled October board meeting we did not have a quorum and those present discussed that we must find a way to make the board more productive and efficient. After doing research the following changes are recommended in the bylaws:

The Board may appoint one alternate per county to officially attend meetings on behalf of absent board members. The alternate would have all the rights of a voting member and can vote with a proxy.

Thirty three % of the active board members must be present to constitute a quorum.

Commissioner Hamrick recommended that it be forty percent to constitute a quorum.

Commissioner Parker made a motion to accept the changes regarding an alternate and forty percent presence to constitute a quorum. Seconded by Comm. Hamrick. All in favor of passing. The bylaws were updated and changed effective 11/08/2005.

All board members were given copies of the Annual Operating Element which includes the goals and objectives of all programs.

Ms. Miller informed the board that the Retirement Systems of Alabama requires a resolution for COLA increases for retirees. An increase was not given the last time. Mrs. Miller recommended the board pass the resolution for the COLA increase. Cost of living increases will amount to approximately \$1,000. per year and will have to come from local and administrative funds. Commissioner Hamrick made a motion to accept the resolution giving the increase, Mr. Killian seconded the motion. All voted yes.

Commissioner Dillard gave a letter to all board members requesting a 6 % cost of living raise to employees since they have not have a cost of living increase in three years. Commissioner Hamrick requested that at a future time the board be presented with a list of employees and what salary they make. Ms. Miller expressed that she is working on a whole package of employee information to bring to the personnel committee and then the board. Commissioner Parker made the motion to give the employees a 6% cost of living raise and for the Board to review cost of living raises yearly. Commissioner Hamrick seconded the motion. All voted in favor.

Commissioner Strength presented the board with a letter from Joseph Headley resigning from the board. This leaves the board with one vacancy from Walker County and two from Chilton. Several board members expressed the difficulty of finding individuals willing to serve.

Executive Directors Report: Mrs. Miller was happy to report that the agency is covered as of October 1 with proper liability and P&C insurance. She expressed her gratitude to Carolyn Fortner for working with the various insurance brokers and underwriters to get our agency properly insured at an affordable rate.

Transition Update: In the essence of time Mrs. Miller referred to the information given out at the October meeting. September 28th all MOU's were signed and received one month after the due date. Three were signed for 90 days: Carbon Hill, Sumiton and Maplesville. Carbon Hill and Sumiton may require board assistance to resolve issues. Council meetings and work sessions will be attended until issues are resolved. One senior center in Thorsby was closed due to mutual agreement from all parties.

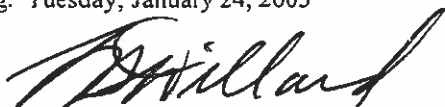
The AAA staff is working with all cities on making the transition run smoothly. A workshop was conducted on October 18. Board members were provided with memos outlining the policies and procedures. In the areas where there are not local funds to pay drivers to deliver meals or are not volunteers to deliver meals the AAA will work to transition these meals to frozen door to door delivery by Valley. ADSS has provided some funding to assist with bringing the center meal budgets for congregate meals up to 25 so that the homebound meals can be converted therefore eliminating the overhead expense of drivers which has caused the budget to be in the red for all counties with the exception of Shelby. These extra funds are why we have not had to request additional funding from the counties for FY 05.

Mrs. Miller expressed concerns to the board as to Medicare Part D and how it is steering the agency away from its mission. The sheer volume of calls and intensive work to help each person would take the entire staff working full time just on Part D. Carolyn Fortner also spoke on the effects Part D is having on the staff and the Agency as a whole.

The board was provided with a year end report for SenioRX and Legal. Suggestions were made by board members to improve how the legal program reports.

Next Meeting: Tuesday, January 24, 2005

Adjourn



Minutes Approved: January 24, 2006

Commissioner Larry Dillard, Board Chairman

Board Meeting Nov 8, 05

10-

NAME	YES	NO	RST	BEEF	CKN	SLD	SWEET	UNSWT	WATER
JUDGE ROYCE KING	✓		✓				✓		
REV. BYNUM	✓		✓						✓
DAVID COCHRAN	✓					✓			✓
Julie	✓					✓			✓
GLENDIA STRENGTH	✓					✓	✓		
Carolyn	✓					✓			✓
LINDSEY ALLISON		✓	<i>Mr Dillard has her proxy</i>						
JOHN PARKER	✓		✓				✓		
LARRY DILLARD	✓		✓				✓		
Kelly									
STANLEY BATEMON		✓							
MIKE BOWLING		✓	<i>comm meeting + govt day</i>						
JIMMY ROBERTS		✓	<i>wife has a cat sch</i>						
Alfredia	✓					✓		✓	
BRUCE HAMRICK	✓					✓		✓	
RICHARD LOVELADY	✓					✓	✓		

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Board of Directors
Middle Alabama Area Agency on Aging

May 18, 2005

In attendance

Chairman Dillard
Commissioner Parker
Commissioner Strength
Judge King
Commissioner Cochran
Rev. Bynum
Commissioner Roberts
Mr. Lovelady
Mr. Killian

Other: Julie Miller, Executive Director
Carolyn Fortner Price, Elder Rights Attorney

Proxy

Commissioner Allison (Proxy for Dillard)

Absent

Commissioner Headley
Commissioner Hamrick
Commissioner Bateman
Commissioner Bowling

Opening:

One Board Position Vacant for Chilton County

Call to order: Mr. Lovelady

Approval of Minutes for February 9, 2005 Board Minutes

No changes, motion by Killian, 2nd by Cochran

All in favor: Yes

Directors Report on update of transition:

Notices of Requests for Proposals were sent on April 12, 2005 and Official RFP's were sent on April 28, 2005, to all municipalities and approximately 20 other entities such as Housing Authorities and non-profit agencies for the Title III Senior Center and Community Based Services. All Board Members and County Commissions were mailed copies of the RFP. The deadline for proposals is June 10, 2005. Contracts will be issued September 1, 2005 with a contract start date of October 1, 2005. A workshop was conducted for applicants with only five attendees representing Blount County, The City of Clanton, The City of Montevallo, Pell City and the City of Cordova. A sample

proposal and copy of materials presented is included as a handout. Board members were asked to encourage cities with Senior Centers to apply for proposal in order to continue to receive federal meals at the Senior Center.

Board Members were updated on transportation. Shelby County Commission allocated funds for the AAA to sub-contract with Clastran for Senior Center Transportation, which began December 1, 2004. Clastran already covered this area for Rural Transportation so the process was easier to begin. Costs, DOT Compliance and liability issues in Chilton, St. Clair and Walker Counties resulted in the parking of the vans. Clastran was able to provide service in Odenville with St. Clair sharing the costs until a ALDot contract can be secured for public transportation hopefully in October. This is still costly and has liability issues. Blount County has its own transit system. Van Drivers were hired to deliver meals with mileage.

The AAA has been working with United Way and The Birmingham Regional Planning Commission to advocate for regional transportation.

Julie Miller introduced Speaker.

10:30- Speaker (Presentation Attached)

Shirley Worthington

United Way

Transportation

Carolyn Fortner-Price, Elder Rights Attorney introduced the next speaker. The AAA insurance and liability issues were discussed.

11:15 – Speaker

Jim Wilson

Colonial Insurance (Montgomery)

Board and Agency Liability

12:00-12:20 Lunch

Old Business

- Audit update: The Auditors from Aldridge Borden Company, Certified Public Accountants will be at the AAA for the first two or three weeks of June performing the annual audit of all federal and state funds. Board members may be contacted by auditors for interviews.
- Conflict of Interest Policy: The Board was reminded that one of the previous audit issues was conflict of interest. They were provided with another copy of the policy and were encouraged to read it. Conflict of interest forms were given to all board members to be completed and returned to the AAA. Ms. Miller recommended that due to audit issues and ADSS oversight of the issue that the Board Chairman appoint a conflict of interest committee to include staff member Carolyn Fournier.

- County Contracts: Contracts have been received from Blount, St. Clair and Shelby Counties. County Commissioners from Chilton and Walker were encouraged to have contracts returned to AAA by the end of the month. Commissioners were encouraged to include the AAA in their budget process for FY 06. They were asked to have commission staff to notify Alfreddia for any budget information.

New Business

- Employee issues: Executive Director is attempting to reorganize and evaluate all programs to provide more training, supervision and structure for employees. Rapid growth and lack of experienced staff have created our own internal set of problems.

Personnel Policies and Procedures are still an issue for the board. Time has been the issue. These have been re-written and approval can be handled in two ways. The Board committee can review the policies, make recommendations and then mail to the board for review and vote. Alternatively, the ED can solicit an outside review and then mail to the board for a vote. Commissioner Dillard offered for the ED to take the policies to Shelby County Manager and ask him to have personnel department to review – all concurred.

ED also reminded the board that the by-laws require the board to handle a formal process for salary ranges, evaluations, step raises and cost of living raises. This has all been put by the wayside due to the many transitions, but has become an issue due to our size, responsibility and funding requirements. We are to operate no different from any other governmental entity. Commissioner Dillard again referred ED to Shelby County for assistance.

ED informed the board that the state budgets had not passed the Legislature would have to go to a special session.

Next Board Meeting Proposed Date: 3rd Wednesday September
ADJOURN

Approved: _____



Commissioner Larry Dillard, Board Chairman

Resolution for Retirees ACT 2005-316

Section 1.

Be it resolved by the Board of Directors of the Middle Alabama Area Agency on Aging that the Middle Alabama Area Agency on Aging elects to come under the provisions of Section 6 of Act 316 of the first special session of the 2005 Legislature.

Section 2.

The Middle Alabama Area Agency on Aging agrees to provide all funds necessary to the Employees' Retirement System to cover the cost of the increase as provided for by said Act for those eligible employees retired from The Middle Alabama Area Agency on Aging with the aforementioned increase being effective with the October 2005 benefit payment.

Certification

I, Larry Dillard, Board Chairman, of Middle Alabama Area Agency on Aging, hereby certify that the foregoing is a true and correct copy of the resolution passed on October 5, 2005.

**Larry Dillard, Board Chairman
Middle Alabama Area Agency on Aging**

Middle Alabama Area Agency on Aging
FY 06 Contracts

Contracts for Service Provision
Title III Nutrition Services

Valley Services, Inc.
City of Clanton
Town of Maplesville
City of Calera
City of Montevallo
City of Alabaster
City of Columbiana
Vincent Housing Authority
City of Moody
City of Odenville
City of Pell City
City of Ragland
City of Ashville
City of Sumiton
City of Carbon Hill
City of Jasper
City of Cordova
City of Oakman
Blount County

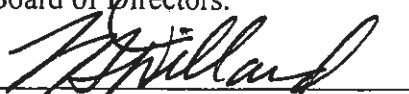
County and Title III Transportation
Clastran

Medicaid Waiver Services

Care First, Inc.
Comfort Keepers (Alabaster)
Comfort Keepers (Trusville)
Gentiva Health Services
Home Instead
Maxim Healthcare
Persona Health
Blount County Health Department
Chilton County Public Health
Shelby County Public Health
Walker County Life Care

All contracts approved for FY 2006 on this date: November 8, 2005 by the
Middle Alabama Area Agency on Aging Board of Directors.

Approved: Larry Dillard, Chairman



Care 24
Almost Family
Oxford Health Care
Valley Services, Inc.

Alabama Cares and Alzheimers Grant Program

Godbee Medical Distributor, Inc.
Medico, Inc.
All South Services, Inc.
MASH, Inc.
Alacare
Sunshine Manor
Care First, Inc.
Comfort Keepers (Alabaster)
Comfort Keepers (Trusville)
Gentiva Health Services
Home Instead
Maxim Healthcare
Persona Health
Blount County Health Department
Chilton County Public Health
Shelby County Public Health
Walker County Life Care
Care 24
Almost Family
Oxford Health Care
Valley Services, Inc.
Lifeline, Inc.

Lease Agreements:

Panasonic – Copy Machine
Pitney Bowles – Postage
Key Properties - Storage

Memorandum

To: Board of Directors

From: Chairman Larry Dillard

Date: November 2, 2005

RE: Cost of Living

One of the responsibilities of the Board of Directors, as a policy board for the Middle Alabama Area Agency on Aging is to ensure that the employees are treated fairly and that they follow a set of policies and procedures. It has been called to my attention by the attached letter from employees that no cost of living increases have been approved by the board since 2001 and that increase was at 2%. The employees have done a good job in explaining their stand on this issue. They are devoted employees and it is only fair to show them the same loyalty as we know they also work to fulfill their family obligations.

Julie has informed me that as of FY 06 she has included COLA increases in the allocation and budget request from ADSS and will continue to do so as long as there are no budget cuts. Therefore, the various budgets for all AAA programs will support the increases. Hiring and maintaining employees at the low salary levels and with no history of cost of living raises is increasingly hurting the ability to recruit and hire qualified professionals to take care of our senior programs. At the next board meeting I request that we discuss that the board pass a measure to mandate annual cost of living adjustments commensurate with the CPI if the budgets will allow such increase.

I as your board chairman request that you return this memo with your approval for the following resolution regarding employee cost of living raises:

All employees on the Area Agency on Aging payroll will receive a 6% cost of living raise for fiscal year 2006 to commensurate with the 6% pay increase for all state employees.

Resolution for Retirees ACT 2005-316

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Certification

I, Larry Dillard, Board Chairman, of Middle Alabama Area Agency on Aging, hereby certify that the foregoing is a true and correct copy of the resolution passed on October 5, 2005.


X _____
Larry Dillard, Board Chairman
Middle Alabama Area Agency on Aging



MIDDLE ALABAMA
AREA AGENCY ON AGING

110 NORTH MAIN STREET
COLUMBIANA, ALABAMA 35051
TELEPHONE (205) 670-5770 ~ FAX (205) 670-5750



JULIE OETTING-MILLER
EXECUTIVE DIRECTOR

1-866-570-2998

IRENE COLLINS
COMMISSIONER

October 3, 2005

Memorandum

To: City Clerks
Mayors
Parks and Recreation Directors

From: Julie Miller, Executive Director

RE: Senior Centers

It is with sincere appreciation that we welcome you as our senior service partners. A very special thank you to those who met the August 31 deadline. I apologize for the delay in sending this letter but our agency has just now completed negotiations with several municipalities. We are happy to say that all are on board at this time!

We need to make some minor modifications in previously announced procedures in response to (a) events that occurred in the area-by-area negotiations (b) the increased costs for service delivery resulting from the hurricanes (c) provider requests for limiting your responsibility and liability and (d) the need for very clear procedures to ensure that audit issues are covered for both the AAA and the municipality. Please plan to attend a meeting on October 18, 2005. We will discuss these changes in detail at that time and answer any questions that you may have.

In the interim, please follow these recommendations:

- Center Managers should be temporary part-time employees or contract labor. Senior Centers must be open for four hours, five days a week excepting contract holidays and approved local closings. You will be reimbursed your allowable rate, FICA, and workers compensation for the number of hours the Center Manager works up to 5 hours per day for the number of serving days specified in the ADSS food service contract (239 days in FY06). The Center Manager may work more than five hours or less than five hours. As the employer of the Center Manager, this is your decision; however, the Senior Center **must** be open for four hours and the AAA will **reimburse** you a **maximum** of 5 hours a day, if and only if the Center Manager actually works the 5 hours. For example, if you determine that the Center Manager is to work 4 hours a day, then you will bill the AAA for 4 hours. If you decide that the Center Manager will work 6 hours a day, the AAA will pay for 5 hours and your agency will be liable for 1 hour. The AAA will also reimburse the city for any Center Manager hours approved by the AAA for training or special assignments. Monthly reimbursement will be provided to the

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city within 30 days of receipt of reimbursement form. This form will be provided at the meeting on the 18th.

- Each Center Manager must identify and train a substitute to fill in at the center when he/she is unable to come to work. The Center Manager should work out the details of this designated Center Manager Substitute with you, including the selection process. When the Center Manager Substitute is called to work for the Center Manager, the AAA will reimburse the municipality for the hours worked by the Center Manager Substitute. However, under no circumstance, will the AAA reimburse the municipality for both the Center Manager's sick/vacation leave and for the hours worked by the Center Manager Substitute. In some centers, the Senior Aide can handle the operation of the senior center with center participant volunteers.
- After consultation with ADSS, the AAA has determined that hot meals currently delivered by paid staff to homebound clients will be converted to frozen meals delivered by Valley staff. Valley delivers frozen meals once a week to homebound clients throughout our service area. In light of rising gas prices, once-a-week delivery by Valley is more cost-effective for the AAA than hiring a local driver to deliver a hot meal five days a week. In some areas, delivery costs currently exceed the meal cost!!! The AAA has a 90-day plan for transitioning these meals to Valley. For areas that have paid drivers, the AAA will continue to pay the driver up to 90 days, at which time the alternative plan will be implemented. Areas that use volunteers to deliver hot meals to clients will continue the current volunteer delivery operations.
- Center Managers should follow existing procedures regarding contributions from program participants. Each center has been provided with a locked box and individual donation envelopes to help ensure privacy and security of donations. Donations must be forwarded weekly by check or money order to AAA with a daily log of donations. The AAA will re-reimburse expense of money orders with receipt attached to reimbursement sheets. These contributions can only be used to provide additional local meals or for overhead of staff. After careful review, consultation from ADSS, and recommendations from some local areas, we feel there are fewer audit issues for all involved if contributions come to the AAA and are designated to the county of origin to reimburse center manager expenses or provide additional local meals.
- Senior Aides will continue to work in senior centers and are employed by the Birmingham Regional Planning Commission. Each Senior Center has a slot available. We will have information regarding the program at the meeting on the 18th.



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JULIE OETTING-MILLER
EXECUTIVE DIRECTOR

IRENE COLLINS
COMMISSIONER

October 4, 2005

Dear Board Members,

Since FY 2002, the employees of the Middle Alabama Area Agency on Aging have not received a cost of living increase. Costs of living increases must be approved by the Board; however, the Board has not approved a cost of living increase for the AAA staff since 2002. This is in spite of the fact that state employees have received 5 costs of living increases since 1998, including a 6% cost of living increase for FY 2005. The high 6% COLA approved by the state legislature for FY 2005 was the result of lobbying by the teachers' union but, perhaps, also a reflection of the fact that state employees had not received a cost of living increase for the two previous fiscal years:

<u>Year</u>	<u>COLA %</u>
1998	1%
1999	0%
2000	2%
2001	2%
2002	3%
2003	0%
2004	0%
2005	6%

Source: Alabama State Personnel Department

The employees of the AAA are a dedicated group of professionals who provide courteous and quality services to seniors in our five-county area. Most employees travel long distances to provide services to clients and most employees work extra hours for which they are uncompensated in order to provide services. Every AAA employee has more than one job since understaffing, funding, and the growing needs of our service population demand this type of dedication and teamwork. Although we, the AAA staff, believe that we have earned a cost of living increase, we also think it is unfair to believe that employees of any organization, private or public, must earn a cost of living increase. A cost of living adjustment, after all, is simply an adjustment made to wages that corresponds to the change in the cost of living.

In spite of the increased costs for utilities, fuel, groceries, insurance and other consumer indices, the salaries of the AAA employees have remained stagnant. For example, in 2002, the unadjusted consumer price index (CPI) was 2.4%; after adjustment for inflation the CPI was 1.6%. Nonetheless, the AAA employees had no cost of living increase. In 2003, the unadjusted CPI was 1.9% and the adjusted CPI was 2.3%. But the AAA staff had no cost of living increase. For 2004, the unadjusted CPI was 3.3% and the adjusted CPI was 2.7. But the AAA staff had no cost of living increase. For the first 8 months of 2005, the unadjusted CPI is 3.8%.

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In the past, the staff of the AAA had hoped that our dedication to the constituents in your counties would earn your respect and convince you, our Board, that we are entitled to the same benefits and consideration that employees in other organizations are entitled to. We hope we have earned your respect. In addition, our request for a cost of living adjustment is not a reflection of our dedication to the seniors in our service area. We remain dedicated to our seniors and we want to continue to work at the AAA. However, we have a responsibility to take care of our families, a responsibility that is increasingly difficult to fulfill without a cost of living increase

Therefore, we, the staff of the AAA, respectfully request that our Board approve a cost of living adjustment in the amount of 6%, which is the rate approved by the state legislature, to be effective beginning FY 2006. We further request that our Board pass a measure that would mandate annual cost of living adjustments commensurate with the CPI.



JULIE OETTING-MILLER
EXECUTIVE DIRECTOR

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In the interim, please follow these recommendations:

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JANUARY

November 2, 2005

ADSS NUTRITION PROGRAM

WINTER 2006

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>2</p> <p>Holiday Centers Closed</p>	<p>3</p> <p><u>Special Menu</u></p> <p>Pineapple-Orange Juice Chopped BBQ Pork Country Corn Green Peas Texas Toast Margarine Apple Flip Snack Cake Milk</p>	<p>4</p> <p><u>Menu 1</u></p> <p>Vegetable Plate: Cranberry Juice Macaroni and Cheese Black-eyed Peas Turnip Greens Mexican Cornbread Margarine Banana Flavored Pudding Milk/Buttermilk</p>	<p>5</p> <p><u>Menu 2</u></p> <p>Taco Salad: Taco Meat Tossed Salad/Cheese/ Tomatoes Pinto Beans Corn Chips Taco Sauce Hot Peach Cobbler Milk</p>	<p>6</p> <p><u>Menu 3</u></p> <p>Pineapple Juice Chicken/Broccoli/Rice Casserole Candied Sweet Potatoes Fruited Gelatin Wheat Bread Margarine Chocolate Chip Cookie Milk * Alternate: Chicken Dumpling Noodles</p>
<p>9</p> <p><u>Menu 4</u></p> <p>Apple Juice Macaroni/Meat/Tomato Casserole Broccoli Tropical Fruit Wheat Bread Margarine Maple Crème Pie Snack Cake Milk</p>	<p>10</p> <p><u>Menu 5</u></p> <p>Teriyaki Chicken Breast Rice Spring Mixed Vegetables Sliced Peaches White Bread Margarine Ginger Cookie Milk</p>	<p>11</p> <p><u>Menu 6</u></p> <p>Meatloaf/Tomato Gravy Country Potatoes Green Peas/Onions Tossed Salad/Ranch Dressing White Roll Margarine Fruited Gelatin Milk</p>	<p>12</p> <p><u>Menu 7</u></p> <p>Orange Juice Turkey Pot Pie Herbed Green Beans Pineapple Tidbits Wheat Bread Margarine Birthday Cake Milk</p>	<p>13</p> <p><u>Menu 8</u></p> <p>Tomato Juice Baked Ham Northern Beans Cabbage Cornbread Margarine Orange Milk/Buttermilk</p>
<p>16</p> <p>Holiday Centers Closed</p>	<p>17</p> <p><u>Menu 10</u></p> <p>Apple Juice Sloppy Joe/Bun Mexican Corn Baby Green Limas Margarine Oatmeal Crème Pie Snack Cake Milk</p>	<p>18</p> <p><u>Menu 11</u></p> <p>BBQ Chicken Leg Quarter Garlic Potatoes Marinated Slaw Texas Toast Margarine Chocolate Cake Milk</p>	<p>19</p> <p><u>Menu 12</u></p> <p>Blended Juice Pork Patty/Brown Gravy Tomatoes/Okra Applesauce White Bread Margarine Hot Sweet Potato Cobbler Milk</p>	<p>20</p> <p><u>Menu 13</u></p> <p>Orange Juice Lasagna Country Vegetables Fresh Fruit Wheat Roll Margarine Lime Gelatin Milk</p>
<p>23</p> <p><u>Menu 14</u></p> <p>Grape Juice Hot Dog/Bun BBQ Baked Beans Coleslaw/Carrots Ketchup/Mustard/Mayo Chopped Onion Hot Spiced Apples Milk</p>	<p>24</p> <p><u>Menu 15</u></p> <p>Cherry-Apple Juice Chicken Chili Mac Green Peas Tossed Salad/Italian Dressing Texas Toast Margarine Fresh Fruit Milk</p>	<p>25</p> <p><u>Menu 16</u></p> <p>Creole Steak Brown Rice Green Beans Pickled Peaches Wheat Bread Margarine Fig Bar Milk</p>	<p>26</p> <p><u>Menu 17</u></p> <p>Chicken Patty/Cream Gravy Crowder Peas Collard Greens Pineapple Tidbits Cornbread Margarine Molasses Cookie Milk/Buttermilk</p>	<p>27</p> <p><u>Menu 18</u></p> <p>Pineapple-Orange Juice Roast Beef/Au Jus Whipped Potatoes Buttered Carrots Wheat Roll Margarine Marbled Pudding Milk</p>
<p>30</p> <p><u>Menu 19</u></p> <p>Orange Juice Sliced Turkey/Gravy Rice Peas/Carrots Roll Margarine Yellow Cake Milk</p>	<p>31</p> <p><u>Menu 20</u></p> <p>Hamburger/Bun Baked Beans Hot Potato Salad Lettuce/Tomato/Onion Ketchup/Mustard/Mayo Fresh Fruit Milk/Chocolate Milk</p>			

JANUARY

November 2, 2005

ADSS NUTRITION PROGRAM

WINTER 2006

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Middle Alabama Area Agency on Aging
FY 06 Contracts

Contracts for Service Provision

Title III Nutrition Services

Valley Services, Inc.
City of Clanton
Town of Maplesville
City of Calera
City of Montevallo
City of Alabaster
City of Columbiana
Vincent Housing Authority
City of Moody
City of Odenville
City of Pell City
City of Ragland
City of Ashville
City of Sumiton
City of Carbon Hill
City of Jasper
City of Cordova
City of Oakman
Blount County

County and Title III Transportation

Clastran

Medicaid Waiver Services

Care First, Inc.
Comfort Keepers (Alabaster)
Comfort Keepers (Trusville)
Gentiva Health Services
Home Instead
Maxim Healthcare
Persona Health
Blount County Health Department
Chilton County Public Health
Shelby County Public Health
Walker County Life Care

All contracts approved for FY 2006 on this date: November 8, 2005 by the
Middle Alabama Area Agency on Aging Board of Directors.

Approved: Larry Dillard, Chairman _____

Care 24
Almost Family
Oxford Health Care
Valley Services, Inc.

**Alabama Cares and Alzheimers Grant
Program**

Godbee Medical Distributor, Inc.
Medico, Inc.
All South Services, Inc.
MASH, Inc.
Alacare
Sunshine Manor
Care First, Inc.
Comfort Keepers (Alabaster)
Comfort Keepers (Trusville)
Gentiva Health Services
Home Instead
Maxim Healthcare
Persona Health
Blount County Health Department
Chilton County Public Health
Shelby County Public Health
Walker County Life Care
Care 24
Almost Family
Oxford Health Care
Valley Services, Inc.
Lifeline, Inc.

Lease Agreements:

Panasonic – Copy Machine
Pitney Bowles – Postage
Key Properties - Storage



**MIDDLE ALABAMA
AREA AGENCY ON AGING**

P.O. DRAWER 90
COLUMBIANA, ALABAMA 35051

TELEPHONE (205) 670-5770 ~ FAX (205) 670-5750

1-866-570-2998



JULIE OETTING-MILLER
EXECUTIVE DIRECTOR

IRENE COLLINS
COMMISSIONER

Dear Medicare Beneficiary,

Thank you for your recent call regarding the new Medicare Part D Prescription Drug benefit. We understand the importance of the upcoming decisions you must make regarding your new prescription drug benefit. Our agency has experienced a very high volume of calls related to Medicare Part D. In addition, the Medicare Drug Plan Finder webtool that we will use to assist beneficiaries to compare plans is not fully functioning yet. While we will continue to work to assist people as quickly as possible, we wanted to inform you of the delay in responding to your request for help. Our staff will attempt to call you as soon as possible, but it may be several weeks before we are able to return your call. Thank you for your patience during this very busy time.

While you wait for us to call you back, please be aware of the following resources that may assist you in determining the best prescription drug coverage for you:

- 1) **Drug Plan Finder on www.medicare.gov** (after November 15). This webtool will allow you to input your personal info, medications and pharmacy to help you narrow down a plan for you. Use the webtool for yourself or have a family member help you.
- 2) **1-800-MEDICARE** Representatives will be available to help you compare plans.
- 3) **Talk with your local pharmacy** to see what plans it will accept. This may help you narrow your search of potential plans to contact for information.

What are your thoughts about the new Medicare Part D Prescription Drug Coverage? We encourage you to express your opinions regarding Medicare Part D to your local and state representatives listed below. As an eligible recipient of Medicare Part D, your feedback is vital in evaluating this important new benefit.

- Senator Jeff Sessions - 341 Vance Federal Building, 1800 Fifth Avenue North, Birmingham, Alabama 35203-2171, (205) 731-1500
- Senator Richard Shelby - 1800 5th Avenue North, 321 Federal Building, Birmingham, Alabama 35203, (205)731-1384
- Congressman Spencer Bachus - 1800 5th Avenue North, 321 Federal Building Birmingham, Alabama 35203, (205) 731-1384 {Chilton, Shelby, St. Clair}
- Congressman Robert B. Aderholt –
 - {St.Clair} 107 Federal Building, 600 Broad Street, Gadsden, Alabama 35901 (256) 546-0201
 - {Walker} 247 Carl Elliott Building, 1710 Alabama Avenue, Jasper, Alabama 35501 (205) 221-2310
 - {Blount} 205 Fourth Avenue, Northeast, Suite 104, Cullman, Alabama 35055 (256)734-6043

Again, we appreciate your patience during this very busy time.

Sincerely,

SHIP Staff (State Health Insurance Assistance Program)

MIDDLE ALABAMA AREA AGENCY ON AGING WILL SERVE AS THE ADVOCATE AND FOCAL POINT FOR OLDER INDIVIDUALS WITHIN THE COMMUNITIES OF BLOUNT, CHILTON, SHELBY, ST. CLAIR AND WALKER COUNTIES.



MIDDLE ALABAMA AREA AGENCY ON AGING

P.O. DRAWER 90
COLUMBIANA, ALABAMA 35051

TELEPHONE (205) 670-5770 ~ FAX (205) 670-5750

1-866-570-2998



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EXECUTIVE DIRECTOR

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**Annual Operating Element
Fiscal Year 2006**

Outline

- I. "Application for Award" Form
- II. CURRENT ACTIONS (you may re-submit information from the previous year, if there are no changes)
 - A. Recap of Fiscal Year 2005 Activities
 - 1. Summarize the major accomplishments made by the AAA during Fiscal Year 2005 for each of the following programs:

Nutrition

Beginning October FY 05 the AAA no longer contracted with local non-profit programs on aging to provide the nutrition services under title III. All meals are now purchased under the statewide contract with Valley Inc. Management of 24 senior nutrition sites became a direct responsibility of the AAA. All staff was trained to perform duties under the direction of the ADSS and the supervision of the AAA. Requests for proposals for local community programs or municipalities to assume ownership of the Senior Nutrition Sites were requested in April 2005 with a June 2005 due date. Only 4 local proposals were received. July and August 2005 the AAA Director has facilitated meetings with local municipalities to educate them further on the role of local communities in the Senior Programs and to encourage their participation through Memorandums of Understanding to be entered into for funds received in FY 06.

Major changes for FY 06 include:

Memorandums of Understanding will be entered into with any entity receiving AAA funding for the Senior Nutrition Program before September 30, 2005. (See Attachment) Each entity will have both financial and management responsibilities for operation of a Senior Center receiving meals. Any community choosing not to enter into agreements as of October 1, 2005 will no longer receive congregate meals until an agreement can be finalized to ensure local financial and management support, a legal relationship for funding and proper insurance for liability.

Frozen Meals will be available to any congregate or homebound meal recipient choosing the alternative. The AAA will assess the need for a congregate site in these areas and if found that the geographical area has a significant number of targeted seniors requesting and needing services then the AAA will begin an outreach effort to find a community partner to sponsor and manage the congregate site as a local focal point for senior services.

The AAA will use any potential excess budgeted meals to target rural seniors who can now be served through frozen door to door delivery of frozen meals by statewide vendor, Valley Inc.

Two Senior Centers will remain under the direct services of the AAA, Heardmont Center and Steele Center. These senior centers are in unincorporated parts of the county and we have not been able to determine who should have direct management of these centers.

Shelby and St. Clair Counties will have financial responsibility but have requested that the AAA manage these senior centers until a local entity can be determined. A waiver to provide these services has been granted by ADSS.

MAAAA has hired a Full Time Nutrition Coordinator to perform a variety of duties as per new job description for agency. This will facilitate better communication, education, coordination of services and monitoring of Title III Nutrition Program. The goals and objectives listed below will be some of the major responsibilities of the Nutrition Coordinator for FY 06.

Nutrition:

For congregate meals the attendees are requested to sign up for participation the week before. The centers work from a meal budget and are to contact the AAA if they request more meals for the congregate program. Now, there are no waiting lists and the AAA would like the program to remain with no waiting lists.

The waiting lists for homebound is determined by how many meals are available in a geographical area and clients are now being prioritized by their nutritional risk as determined by the Nutritional Risk Assessment on the Pre-Screen Intake form. The Nutrition Coordinator and Community Coordinators look for alternative ways to fund meals for those who are high risk and on waiting lists.

FY 06 all homebound clients will be re-assessed for eligibility and ranked by nutritional risks. In Shelby County, a Health Foundation Grant for homebound, weekend, holiday and emergency meals at this time eliminates any waiting list longer than 2 weeks to process the ordering of the meal.

The meal budget process developed by ADSS has helped to track these meals. For FY 06 the AAA will determine resources to help cover the cost to increase number of congregate and homebound meals through other private and non-profit donations.

Transportation

Beginning FY 05 the AAA took over all operations of non-profit contractors in Walker, St. Clair, Shelby and Chilton Counties for Title III services to include transportation. The AAA evaluated the services and their delivery systems during the first 6 months of the fiscal year. The transportation programs were found to be financially and programmatically inefficient. These programs also presented a great liability to the agency and Board of Directors. The agency began working with the Regional Planning Commission, County Commissions, United Way and Clastran to find temporary solutions to the long-term transportation problems that have been identified. The AAA changed its role from a temporary direct service provider of transportation to an advocate for regional transportation services. Current transportation depends on County Funding.

Blount County: AAA Title III B funds and County Funds pay for client transportation and delivery of homebound meals in Blount County. Blount County is over budgeted for Transportation in FY 05 and changes will have to be made in FY 06.

Chilton County: AAA Title IIIB funds have covered all transportation costs going over budget before first 6 months of FY 05. Costs were high, few clients were transported and vans were used to transport meals. April FY 05 all client transportation using vans was discontinued. Paid staff and few volunteers are used to transport homebound meals. Changes will have to be made to deliver homebound meals in FY 06 due to lack of local support and costs to deliver meals.

Shelby County: December 1, 2005 all client transportation costs were assumed by the County Government and contracts with Clastran were signed to provide client transportation to the senior center. Volunteers and paid staff deliver homebound meals paid for with Title III B funds, county funds and foundation funds. Beginning FY 06 the county will also financially support two shopping trips per month, per center for participants to take care of their personal needs.

St. Clair County: AAA Title III B funds and County funds pay for transportation. April 2005 all transportation of clients ceased in St. Clair County with the exception of Odenville who transported a large number of participants. The County agreed to pay the transportation expense for a contract with Clastran to provide center participants a ride to the Odenville Senior Center. Combinations of funds are used to pay staff to deliver homebound meals and some meals have been converted to frozen door to door delivery by food vendor.

Walker County: AAA Title IIIB funds have covered all transportation costs going over budget before first 6 months of FY 05. Costs were high, few clients were transported and vans were used to transport meals. April FY 05 all client transportation using vans was discontinued. Paid staff and few volunteers are used to transport homebound meals. Changes will have to be made to deliver homebound meals via the contractor, Valley, Inc. In FY 06 due to lack of local support and the costs to deliver meals.

Applications by Clastran have been submitted to ALDOT for a Rural Transportation Program in Walker and St. Clair counties. Alternative sources of funding will be sought to help supplement and develop a center transportation program that may or may not be feasible. Volunteer development for meal delivery will continue to be addressed. More meals will be converted to door to door Frozen Meals.

Alabama Cares

The Alabama Cares Program has been in a transition period for the last two quarters of FY 05. The Cares Coordinator who established the program left the Agency. The waiting list was at over 450. The AAA Director felt this was a good time to evaluate the program and possibly redirect some priorities for FY 06. An outside consultant provided direction for the AAA staff to determine what immediate changes should be made with the program through an identification of problems, resources and the beginning of a strategic planning process to be conducted with the needs assessment for FY 05-06. The program continues to operate as it has previously under a temporary program coordinator, a planning consultant and case manager. The waiting lists have been narrowed down to 45 and a new waiting list grows daily. New guidelines have been established for FY 06. More emphasis will be put on prevention, community outreach and education and a more detailed plan of care utilizing other community resources being provided through more intensive case management for those who meet new service guidelines. The search continues for the right person to be employed as the Alabama Cares

Coordinator. FY 06 will also include a needs assessment to help determine the future goals of the caregiver program.

FY 06 the AAA Al Cares program will work with the Alabama Caring Foundation a division of Blue Cross-Blue Shield to provide match money for Foundation grants to help pay for health insurance scholarships for children of custodial grandparents who do not qualify for All Kids. Blue Cross will match this program 50%. This program can help up to 120 grandparents caring for their grandchildren to receive health insurance therefore relieving some stress and financial pressure from the grandparent. This program will be a collaborative effort at the AAA between the Alabama Cares Program and the SHIP Program. The pre-screen tool used during the intake process will also help to identify these potential clients. (See attached)

Ombudsman

The AAA has had continuous turnover in the staff of the Ombudsman Program, which has created a lack of vision with the program. The Agency has hired a new ombudsman with experience and has transferred the existing ombudsman to a new program where they will work together to accomplish mutual goals. This will provide more leadership and experience with this important program.

The major accomplishments for October 1, 2004 through August 18, 2005 include:

Cases:

- Total number of cases opened: 34
- Number of cases closed: 28
- For cases which were closed during the reporting period, the total number of complaints received: 45
- For cases which were closed during the reporting period, the number of complaints fully or partially resolved: 25
- For cases which were closed during the reporting period, the number of complaints not resolved to the satisfaction of resident or complainant: 16
- For cases which were closed during the reporting period, the number of complaints for which no action was needed or appropriate: 2

LTCO Information and Assistance:

- 1 Training session was held for ombudsman staff and volunteers on August 16, 2005. This training was an all day event in which two new volunteers and one new AAA employee were trained on the Ombudsman and Ombudsman Representative Program. One of those volunteers has turned in her Representative Contract and is ready to begin on-site monitoring visits.
- 9 Sessions were held throughout FY 2005 for facility staff training.
- We worked with 1 resident council as of August 19, 2005, and we will be attending another on August 25, 2005.
- We worked with 1 family council.

- Our ombudsman staff provided 87 consultations to facility staff and other providers for FY 2005.
- Our ombudsman staff provided 154 consultations to individuals for FY 2005.

Information and Referral

In Fiscal Year 2005, the AAA continued with its vision of providing services through a single point of entry for Information and Assistance to clients and their care givers. Through this process all clients are directed from all AAA service providers to the toll free number. At this point the individual is provided with a number of a resource if this is requested or is pre-screened for all AAA services, Medicaid and Medicare Benefits, Food Stamps, etc. with a referral made on the clients behalf for AAA Services and paperwork provided to the client on the other services to facilitate their entry into the system. This service is provided by the I & A Coordinator or back-up staff who provide this service on their intake day. All staff is rotated for their intake day which is also their staff development day. AAA staff is cross trained on all program eligibility, community resources and problems specific to the elderly population through staff in-services, staff reading files, newsletter e-lists and an all inclusive training file which can be accessed by all staff on their computers. The I & A Coordinator and Community Coordinators follow up on clients needing universal assessment and case management. This service is in the beginning stages with more training and organization planned for FY 06.

The Staff I & A Coordinator and staff committee continued altering the agency pre-screen intake form to make it a better pre-assessment tool to be used on new clients contacting the agency for assistance. This tool includes a nutrition risk assessment that helps the community coordinators and nutrition coordinator to prioritize who should receive homebound meals. The new form is now a tool that can be used to pre-assess the needs of the whole person and provide referrals for wrap-around services to meet all of the clients needs holistically.

In Fiscal Year 2005, Information and Referral was challenged due to not having a data base available for input of client data and documentation. This has made the program less efficient than desired and has resulted in a loss of tracking numbers of clients served. It has caused unnecessary duplication of client information and has also made client follow-up very difficult. Our agency put some thought into designing our own data base system, but felt it would be best to wait for AIMS to be updated to fulfill these needs. In the meantime a staff monthly report has been developed to track program by program data and information needed for reports, staff accountability quality assurance and identification of problems. These reports are being compiled into a master report to track data. For FY 06, the agency has hired a new employee who will assume the roles of AIMS Manager, Quality Assurance, Grant writing and management and Health Prevention. This person will oversee and monitor data collection for I & A and all other programs.

The whole staff acts as agents of the I&A process. The staff met with ADSS IT staff at a staff meeting to discuss frustrations and alterations that could be made in AIMS to accommodate more inclusive client information, easy access to staff information on what services client may already receive and a note section for ongoing narratives of clients that can be accessed by all staff when they are working with a client and need to follow up with where they are in the process. This will help to give process more credibility, save time and frustration for staff and client, eliminate duplication and ensure more follow-up through accountability. The I & A Coordinator will be responsible for monitoring this process of

follow-up and monitoring. This is great accomplishment and the AAA is grateful to the ADSS IT Staff for their assistance.

For FY 06 the AAA will continue on the process to provide a successful I & A program accessed through a single point of entry for all senior services. The program goals will become more defined and the process will be ready to seek outside grants to help finance the implementation of the whole process with a training module to be developed for future staff and outside agency partners.

SHIP/MEDISMART FY 05-06

In FY 05, the AAA lost its committed Ship Coordinator to Retirement. It took several months to find a qualified coordinator and the program is centered to accomplish its goals for FY 06. All staff at the AAA is cross-trained to assist the Ship Coordinator and work as SHIP Counselors.

Fiscal Year 2005 Accomplishments (through July 31, 2005):

- 453 Client Contacts
- 211 one-on-one client contact hours
- 21 SHIP Counselors (volunteer, paid, in-kind)
- 41 outreach events (interactive presentations and booth exhibits) reaching an estimated 844 people
- More than **half** of clients served were low-income
- Med smart – 2 presentations and mailings reached approx. 350 clients

Notes:

Because there has not been a permanent SHIP Coordinator in place January-June 2005, there has been a decreased level of volunteer involvement this fiscal year. Increased focus will be given to existing SHIP counselors (volunteer and in-kind) to make sure they are as adequately trained and involved as they are able. Volunteer activities will include: general SHIP client counseling, distribution of SHIP information materials, presentations, and other administrative functions.

The main focus of the SHIP program October 2005 through May 2006 will be Medicare Part D. It is anticipated that the volume of SHIP referrals/counseling will continue to increase during this period.

2. Waiting Lists:

- a. Identify the number of people on waiting lists for each of the following programs:

Nutrition:

- a. Congregate Meals -0
- b. Home-Delivered Meals-
Blount-4
Chilton – 25

St. Clair -65
Walker-29

Transportation:
Waiting list undetermined

Alabama Cares-76
Ombudsman: No waiting lists
SHIP: No waiting lists

- b. How does the AAA determine which persons on each of the waiting lists will receive services?

Transportation: No formal waiting list maintained at this time.

Alabama Cares: Currently clients are put on waiting list until they can be assessed for service and development of care plan. Program will always maintain a waiting list until more funding is available for case management. The program continues to add new clients, but the case load is entirely too high to provide effective and appropriate case management. A pre-assessment form has been developed to determine the risk of the caregiver and to facilitate a process of prioritizing which referrals should be provided with services when case management is possible.

Ombudsman: No waiting lists

SHIP: Due to pre-screen process during single point of entry and cross training of staff to provide information and assistance to all clients there is currently no waiting list. This is a probable change with the mass numbers of people who will need counseling in FY 06 due to Medicare Part D.

3. Briefly describe any grants the AAA received in Fiscal Year 2005.

Greater Birmingham Community Foundation Grant

This grant was for the Mr. Fix-it home maintenance program. The grant was for \$20,000 to hire a coordinator of the program for 18 months and ended after the first quarter of FY 05. The grant was successful although the AAA did not have the funding or staff to continue the program. The AAA attempted to keep the program working with senior aides but was not successful in finding individuals to fill the positions.

Shelby County Health Foundation Grant

This grant is for FY 05 and is being applied for FY 06. This grant helps to support the Homebound Program in Shelby County by providing the funding for more homebound meals than budgeted, providing weekend and holiday meals for homebound, emergency meals for all participants needing meals, financial assistance to transport meals, and financial assistance for a part-time homebound coordinator. FY 06 this grant will include \$5, 000 for Emergency Response Systems such as life line for 15 clients.

Walker County Community Health Foundation Grant

A small grant was received to provide fax machines and recreational supplies to the six senior centers in Walker County.

4. Include a copy of client satisfaction surveys used by the AAA to obtain information on the clients' changing service needs and their opinions regarding the services they receive.

AAA used the state assessment survey and independent program surveys. Due to transition of services, no other tools were utilized.

5. Describe the AAA's methods of recruiting volunteers and which programs they will support.

Volunteers are recruited for meals on wheels delivery, telephone reassurance, and board of directors, Advisory Councils, mail buddies, activities and programs at senior centers and for SHIP Counselors.

Ombudsman Volunteer Program Activities:

The Middle Alabama Area Agency on Aging Ombudsman Program for FY 2005 has trained 2 prospective Ombudsman Representatives, receiving a signed agreement from one. This training was held on August 16, 2005. This is currently our only active volunteer. We are waiting to hear back from the other trainee. There is another volunteer training scheduled for September, which will train another group of prospective volunteers.

The goal for the Ombudsman Representative Program is to provide a volunteer training biannually, and more often as necessary. Our goal is to train interested individuals promptly so that interest is not lost. Once an individual expresses interest in volunteering with the Ombudsman Representative program, they must complete the application process. Once the application is approved, each individual must participate in a one-day training event in which the Ombudsman Representative training manual is distributed and explained. After this training day, on-site monitoring visits are done with each volunteer and the certified ombudsman in order to show each individual the appropriate way to conduct a friendly facility visit.

In August 2005 a letter was sent to churches in Shelby County educating their staff about volunteer opportunities available within our agency and the programs that we offer to senior citizens. We have received one response as of August 19, 2005 regarding this letter.

Our goal is to continue growing the team of volunteers in the Ombudsman Representative Program so that our presence can become more regular in our long-term care facilities, allowing relationships to be built, trust to be established, and a stronger voice of advocacy to be achieved.

We will continue to work towards this goal county by county, with our primary focus presently being Shelby County.

Recruitment comes from:

RSVP: We fax requests on a form we use with very little success. Center participants are signed up to be RSVP Volunteers in some counties by the RSVP Programs.

United Way Volunteer and Information Center: Requests are made for volunteers.

News paper Articles.

Out reach to churches.

Brochures. (The AAA has designed a brochure for each local area to assist with volunteer recruitment and to show the partnership with the local municipality)

Word of mouth.

Internet: Volunteer Match

A. Methods of meeting the needs of subgroups of the older population:

See attached individual program reports.

1. Provide supporting data to describe your region's population in the following categories:
 - a. Low-income older individuals;
 - b. Older persons with greatest social need;
 - c. Low-income minority older individuals;
 - d. Older persons living in rural areas; and
 - e. Other segments of the older population your agency is striving to serve.

60+ Minority (2000)	
Blount	239
Chilton	666
Shelby	1,148
St. Clair	737
Walker	<u>799</u>
Total:	3,589

Age Groups (2000)

	<u>60+</u>	<u>60-61</u>	<u>62-64</u>	<u>65-66</u>	<u>67-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80-84</u>	<u>85+</u>
Blount	9,046	1,013	1,475	876	1,159	1,730	1,208	869	716
Chilton	6,926	757	1,072	655	944	1,270	1,009	663	556
Shelby	17,162	2,218	2,765	1,726	2,294	3,322	2,416	1,371	1,050
St. Clair	10,474	1,240	1,656	1,068	1,438	2,010	1,466	912	684
Walker	<u>14,071</u>	<u>1,490</u>	<u>2,128</u>	<u>1,304</u>	<u>1,733</u>	<u>2,742</u>	<u>2,180</u>	<u>1,322</u>	<u>1,172</u>
Total:	57,679	6,718	9,096	5,629	7,568	11,074	8,279	5,137	4,178

Age 60+ Rural Status (1990)

Blount	5,797
Chilton	4,250
Shelby	5,589
St. Clair	5,892
Walker	<u>8,425</u>
Total:	29,953

Age 60+ Living Alone (2000)

Blount	2,168
Chilton	1,873
Shelby	3,546
St. Clair	2,412
Walker	<u>3,789</u>
Total:	13,788

Age 60+ Below Poverty (using 1990 poverty figures applied to 2000 60+ population figures)

Blount	2,243
Chilton	1,716

Shelby	2,571
St. Clair	2,008
Walker	2,744
Total:	11,282

2. For each subgroup identified in Item #1 above:

a. What progress has been made by the AAA to meet the needs of each subgroup?

The AAA targets all sub-groups as target population to be served through all AAA programs. AAA will continue to target these groups of people with an increased emphasis on serving more homebound meals and wrap around services to the rural, frail elderly.

b. How has the AAA focused its targeting efforts to effectively inform seniors of available services?

Since very little outreach was previously done with senior center participants in the past, the AAA has in FY 05 and will continue in FY 06 to have a strong presence in the local senior centers and local communities to effectively inform seniors and their caregivers of services. Targeting and outreach will result in waiting lists for this AAA service area as we have limited and stagnant funding at this point and a large growing population of seniors.

B. Outreach Efforts

1. Describe the AAA's outreach efforts to effectively inform seniors of available services. Include copies of pamphlets and other written materials used by the AAA in these efforts.

All programs use brochures, power point presentations, speaking engagements, etc to publicize programs. FY 06 we will begin a quarterly newsletter to be distributed to Senior Centers, Homebound and the community at large.

Ombudsman Outreach information:

The Middle Alabama Area Agency on Aging Ombudsman Program is working to become more visible in each of our five counties' facilities. In FY 2005, the ombudsman program has made 39 Nursing home visits and 26 ALF/SCALF visits. Our goal is to increase these numbers to 15 nursing home visits per quarter and 31 ALF/SCALF visits every 6 months. This increased presence in the facilities will contribute to our goal of building relationships, establishing trust with both the residents and the facilities, and thus increasing the voice of advocacy in our long-term care facilities. These relationships can empower not only residents but also families and facilities to also become strong advocates.

Our ombudsman program participated in 9 trainings for facility staff, 1 resident council meeting, and 1 family council meeting as of August 19, 2005. There is another resident council meeting we will be participating in on August 25, 2005.

As part of our volunteer recruitment, a letter was sent to area churches expressing not only volunteer opportunities but also educating them about programs our agency offers to seniors. This packet also included information about Medicare Part D and the SHIP program. Over 250 packets were mailed throughout Shelby County.

Our goal is to continue improving our community outreach so that the community becomes more aware of the power of its voice of advocacy and in aiding its seniors.

2. Describe the AAA's use of Internet technology to publicize the agency's programs and services and to improve staff efficiency.

Services are posted on County websites where available. The AAA does not have a website at this time. The AAA does use internet list to advocate and transmit information and referral. Job postings are also done through internet websites.

C. Challenges and Resolutions

1. Describe the areas in which the AAA is experiencing challenges and the methods being utilized to resolve these problem areas.

The AAA has had numerous challenges to overcome and has been in a total reorganization process for FY 04, FY 05 and FY 06. Challenges and solutions too complicated to explain in this report.

Ombudsman Challenges and Resolutions:

One of the major challenges faced within our ombudsman program and throughout the state of Alabama is facility staff shortages. Due to the lack of staffing ratios specified by the rules and regulations for nursing facilities and assisted living facilities, advocacy regarding staff shortages is extremely difficult, yet is one of the most common concerns we hear.

One of the ombudsman's greatest challenges is empowering other residents and their families to advocate for themselves. One of the most common hindrances to residents and families advocating for themselves (or their loved ones) is a fear of retaliation. Quality of care cannot improve if people are scared to voice their concerns.

An act was recently passed establishing goals for the ALF/SCALF surveyors to focus on unlicensed ALF/SCALFs rather than on regular surveys of the licensed

facilities. The educated consumer is taught to more readily trust their loved ones to a licensed rather than unlicensed facility. Surveyors are there to help maintain a minimum standard of care, and if they are not allowed to focus on maintaining that standard, the residents and quality of care in these facilities could suffer.

Through a continued effort to improve the ombudsman's presence in both the facilities and the community, the consumer can become more educated about issues of interest regarding living in a long-term care facility.

D. Planning for the Baby Boom era of seniors

1. Describe the AAA's planning efforts to design programs and/or to modify services to meet the changing demands relative to the transition from Depression era to Baby Boom era seniors.

Beginning FY 05 the boomers will begin their transition into senior citizenship. Baby boomers are more demanding and have expectations for quality, professional services. They believe in smaller government, yet, have an expectation that services are free, all encompassing and they want choices. We do not have a plan as we are only at the point of trying to understand this new generation of seniors. We know we must do more educational programs and focus on prevention. We must clearly educate local and state officials and the general public of what the role of the AAA is so they do not have unrealistic expectations of what we can provide for them and their elderly family members.

2. Include a copy of any surveys and/or needs assessments that the AAA developed and used in Fiscal Year 2005 (Note: Do not include needs assessments developed by ADSS.)

III. UPDATES / AMENDMENTS TO AREA PLAN (if necessary)

Describe any administrative changes, new emergency call plans, etc.
See new organizational chart. See Emergency call list.

IV. AAA ACTIVITIES

- A. List the specific AAA activities to be completed in Fiscal Year 2006 in each of the following areas.

1. Training to be conducted by the AAA for specific programs (i.e., provide this information in a calendar format)
2. Elder abuse/elder rights:
The AAA will work closely with sheriff departments and local police on elderly rights and abuse education.

The Middle Alabama Area Agency on Aging Ombudsman Program's goal for elder abuse / elder rights is to assist facilities in staff trainings regarding abuse and neglect to increase awareness of it and how to report it.

We would also like to do similar trainings for Resident and Family Councils, which could be done in conjunction with residents' rights.

3. Public hearings: State ADSS Public Hearing Attended. None held in area.
4. Surveys/needs assessments: See comments previously addressing topic.
5. Advisory council activities:

The Advisory Council for the AAA has proven to be a non functioning advisory arm for the AAA. Last year the Board of Directors changed the composition of the advisory council in the by-laws and it is now up to county commissions to appoint advisory members. The AAA has set up procedures and forms for nominations and the process has proved to be unsuccessful. We will attempt the process again this year as we feel the process was unsuccessful due to the controversy surrounding the AAA due to the transition of reorganizing the organization and how we provide services.

Ombudsman:

The Middle Alabama Area Agency on Aging Ombudsman Program does not currently have an active advisory council. It is the intent for the Advisory Council for the agency to have a long-term care committee to serve as an advisory arm to the Ombudsman Program.

6. New programs/initiatives:
The AAA will focus on new program initiatives centering on health prevention. See Attached information.

AAA will also seek sponsors to provide more lifelines to homebound clients.

AAA will also work to enhance and improve with other community partners the Telephone Reassurance Program.

Ombudsman: With only one active volunteer presently, the Ombudsman Representative program will be the new program of primary focus for FY 2006. Our initial target population will be those of Shelby County. Once a solid group is established there, we will make the same volunteer recruitment efforts in each of our other five counties.

Due to the obstacles and challenges of a total reorganization, the agency will focus on existing initiatives and programs.

7. Methods of obtaining additional local funds

Currently all county commissions are asked to contribute funding and enter into contracts with AAA.

All Cities with Senior Centers are required to enter into Memorandums of Understanding and to provide matching funds that cover the physical location of the senior center such as space, utilities, etc.

The AAA is working to establish community partners such as United Way whom may be potential local funders in the future.

Grants are made for local foundation funds.

Obtaining local funding is one of the biggest obstacles for the AAA as many of The programs have been viewed locally as entitlement programs. The AAA will Work to change this perception.

8. Grant applications

Hill Crest Foundation

An application has been applied for through this foundation for \$6, 000 to assist the AAA in outsourcing through the United Way of Central Alabama Planning Division to conduct an intensive needs assessment. The partners would if this grant is received be funded by the AAA, Hillcrest Foundation and United Way of Central Alabama.

9. Partnership development

The AAA has been through a major process to bring local municipalities in as partners. The AAA is also is developing partnerships with the Sheriff Departments for Elder Abuse and Fraud Programs. The AAA is constantly finding community partners to work with on all senior issues.

- B. Identify how the AAA will spend Title III-D funds during Fiscal Year 2006.

**Health Promotion
Goals & Objectives
FY 2005 – 2006**

Goal: To increase the health and well-being of senior center participants, other AAA seniors and home-bound clients by providing monthly health education materials.

Objectives:

Provide center managers each month with a daily health and safety tip calendar in an effort increase the amount of health education units per center.

Provide center managers each month with an educational packet to use to teach center participants in an effort increase the amount of health education units per center.

Provide center managers with health and safety brochures and other literature to be delivered with home-bound meals.

MAAAA staff will be provided with presentations to give to designated senior centers once a month. Most MAAAA team members have 1-2 senior centers they are responsible for providing public education and health prevention topics. Topics include: New Medicare Part Benefits, Exercise, Depression Screenings, Services provided by the AAA, etc. Health topics focus on program developed called: Senior Wise! This program's focus is on medication management, health issues with hot and cold weather, the importance of drinking water, health journals, Exercises you can do from home, etc. FY 06 will include a walking program designed for health promotion and to stimulate competition among senior centers to accumulate the most steps. The AAA will model a program designed by Blue/Cross Blue Shield. This program will provide participants with a pedometer, water bottles, stress and exercise balls and fans. Many materials used in this program will be printed with health messages to remind client of "Senior Wise" health messages. AAA staff will also participate in this health project. This outreach program will be extended to non-title III senior groups and programs requesting participation.

Health Prevention supplies and messages are used in all outreach activities by the AAA staff to include giveaways at health fairs, etc. to include 7 day pill boxes, health journals, water bottles, stress/exercise balls, fans with health messages and other printed health materials.

V. ACTION PLANS

- A. List contractors who will provide services for the fiscal year; See attached list, and
- B. Identify those services that will be provided *directly* by the AAA (will need prior ADSS approval according to OAA 307(a) (8)).
Waiver has already been requested and approved.

OBJECTIVES FOR AAA ACTIVITIES FY 2006

1. The AAA will host five roundtable discussions/public hearings for the senior population and public on area plan activities within the planning and service area during the 3rd quarter of FY 2006.
2. The AAA will meet with all senior centers in an open forum to discuss the center participants needs, concerns and opinions of senior services in their county.
3. The AAA will conduct a needs assessment in collaboration with United Way and at least one other public or non-profit agency. This assessment will be used for the Area Plan and will information will be abstracted and put in county-by-county plans to be submitted to all County Commissions in the Region.
4. The AAA will focus on accurate and accountable numbers to show unduplicated clients Receiving services from the AAA. These will be maintained on a regional and county-by-county basis. These numbers will be used in an outreach effort to educate local officials of the wide variety of services provided by the AAA.
5. The AAA will focus on staff development, updating personal policies, job descriptions In addition, a structured evaluation process to ensure and enhance credibility and viability of agency. AAA will evaluate and survey local area to make sure salaries are complete to ensure that employees are high quality, passionate individuals who will have long-term commitment to agency and its mission, vision and goals.
6. The AAA will work as a collaborative partner with another agency or educational institution on a grant related to Alzheimer's, Adult Abuse, and Fraud Prevention or building coalitions.
7. The AAA will do outreach and education to help to inform the general public and public Officials as to the role of the AAA and to dispel the perception that AAA programs are of an entitlement nature. The AAA will advocate encouraging communities to look after Their seniors as neighbors, church members and business owners.

Nutrition Project Goals and Objectives

- Goal:** To provide adequate preventive health services to help seniors remain at home independently.
- Objective:** Promote the senior nutrition program throughout the County to assure that every older person has access to nutrition and other services to meet their needs.
- Objective:** Encourage participation in the congregate nutrition program when possible so that opportunities for recreation and social interaction are made available to seniors.
- Objective:** Provide additional weekend meals to assure that no senior is without food where funding is available.
- Objective:** Provide frozen meals to rural and isolated seniors living outside the normal service delivery area.
- Objective:** Provide liquid supplements to clients on doctor's recommendation.
- Objective:** Provide a Needs Assessment and follow-up assistance to seniors who may require services in addition to meals.
- Goal:** To increase all eligible meals and stay within meal budget
- Objective:** Educate Center Managers, participants, public officials and the public about what are an eligible meal and the need for increased community support to expand program.
- Goal:** To increase revenue for eligible meals to exceed title III meal budget
- Objective:** Write grants to foundations and other entities to increase revenue to expand meals. Seek more local support from individuals and the religious and business community to increase sponsorships and revenue to expand meals. Request more funding from ADSS.
- Goal:** To increase congregate meals in all centers not serving 20 or more clients at center
- Objective:** Increase congregate participation the informing media of events at senior centers and putting flyers on local bulletin boards and in churches. Work collaboratively with cities and towns to increase interest and participation.
- Goal:** To evaluate homebound program to ensure accountability and efficiency
- Objective:** Evaluate all homebound clients for nutritional risks and eligibility.
Review all homebound routes with paid drivers and determine efficiency.
- Goal:** To decrease number of clients receiving more than one meal to assist with increasing clients in unincorporated, rural areas receiving frozen meals

- Objective:** Convert meals with no means of delivery or inefficient means to frozen door-to-door delivery. In budget for FY 06 establish an unincorporated homebound meal category and begin serving rural isolated seniors with other meal options such as frozen door-to-door and liquid supplements.
- Goal:** To improve socialization and well-being of homebound clients receiving frozen meals by increasing telephone reassurance and friendly visits
- Objective:** Increase volunteers by writing letters to churches, civic groups and encouraging articles in local paper(s) and solicit support from fire and police departments. Develop a telephone reassurance program using center participants, volunteers, and local fire departments to call isolated homebound receiving frozen meals. Develop a pen pal program with local schools for isolated homebound meal clients receiving frozen and hot meals.
- Goal:** To decrease liability risk of nutrition program for AAA, Board of Directors, local officials, volunteers.
- Objective:** Ensure that all centers have adequate liability and property insurance. Ensure that Board of Directors has Directors and Officers insurance. Provide adequate instructions and training for volunteers delivering meals
- Goal:** To decrease waiting list
- Objective:** Find other sources of revenue to cover costs of meals and offer private pay and sponsored meals to those on waiting lists.
- Goal:** To improve the nutritional risk of clients
- Objective:** Evaluate all nutrition program clients for nutritional risks and provide other health services and resources to improve overall quality of life for those at high nutritional risk.
- Goal:** To improve education for center managers
- Objectives:** Provide Center Managers with adequate training and supervisions through two regional trainings per year, two county wide meetings per year or one on one instruction where needed and written educational and instructional materials. Center Mangers will meet in there own counties 2 times a year

**Shelby County Coordinator
Goals and Objectives
FY 06**

Goal -To work with each community in collaboration with local governments, churches, civic groups, etc. to improve volunteerism at each senior center to aid in homebound meal delivery and recreation within each center.

Objective- The Shelby County Coordinator will be visible within the community to educate local governments, churches, civic groups, etc about the volunteer need and to educate about the needs of the senior centers.

Goal- Homebound Meal Assessments to all new clients within a specified period after a referral has been received.

Objective- Part time employee will be hired and trained to assist coordinator with completion of all homebound meal assessments.

Goal-To increase activities and outings within each senior center.

Objective- A survey and center planning process will be conducted at each center to determine the recreational, educational and social needs for each center. Clastran will provide a shopping trip at a large community business center such as Wall mart Super Centers, two times a month with pick up facilitating at the Senior Center. Local community resources at churches, civic clubs, and schools will be accessed in collaboration with local senior center contractors.

Goal- Increase Community Education about senior centers and AAA services to increase participation at the senior centers.

Objective-Schedule in-services throughout each community within the first quarter of FY 06. In collaboration with Long Term Care Ombudsman schedule breakfast meeting for local public officials and their wife's to provide education, commitment for local support of program and to target potential volunteer resources.

Goal- Continued education and training for center managers and senior participants on the programs available for seniors.

Objective-Scheduled trainings throughout the year to be publicized throughout the county. Collaborate with all other AAA Program Coordinator staff.

Goal- Work with each center manager to keep his or her resource manual up to date.

Objective- Collaboration with the Information and Referral Coordinator and Information Specialist to create a database of the most updated resources for seniors in our service area.

Goal- Increase rider ship and accountability in Shelby County Transportation Program.

Objectives- Provide ongoing communication with Class Tran to monitor missed pick-ups and cancellations to ensure accountability. In collaboration with Clastran Staff and Center Managers, Develop a monitoring schedule that can ensure there is not an abundance of missed pick-ups and cancellations. Work with Center Managers to increase transportation where needed and to ensure that all routes are full. Within six months increase rider ship to Calera by eight passengers.

Goal- Provide telephone reassurance to Class Tran riders who may need to be reminded when the bus is coming to pick them up.

Objective- Develop a system to decide which riders may need to be reminded of the bus pick up times and then to provide telephone reassurance through volunteers or Middle Alabama Area Agency on Aging staff.

Goal- Pre-Screening tool for transportation through the single point of entry system.

Objective- Work with Information and Referral Coordinator and Class Tran to develop a pre-screening tool for transportation to add to the Intake Form.

Goal- To work with the local media on senior issues and health prevention.

Objectives- Develop relationships with local television, radio, and newspaper outlets to conduct press releases on important senior issues and health prevention.

**Health Promotion
Goals & Objectives
FY 2005 – 2006**

Goal: To increase the health and well-being of senior center participants, other AAA seniors and homebound clients by providing monthly health education materials.

Objectives:

Provide center managers each month with a daily health and safety tip calendar in an effort increase the amount of health education units per center.

Provide center managers each month with an educational packet to use to teach center participants in an effort increase the amount of health education units per center.

Provide center managers with health and safety brochures and other literature to be delivered with home-bound meals.

MAAAA staff will be provided with presentations to give to designated senior centers once a month. Most MAAAA team members have 1-2 senior centers they are responsible for providing public education and health prevention topics. Topics include New Medicare Part Benefits, Exercise, Depression Screenings, Services provided by the AAA, etc. Health topics focus on program developed called Senior Wise! This program's focus is on medication management, health issues with hot and cold weather, the importance of drinking water, health journals, Exercises you can do from home, etc. FY 06 will include a walking program designed for health promotion and to stimulate competition among senior centers to accumulate the most steps. The AAA will model a program designed by Blue/Cross Blue Shield. This program will provide participants with a pedometer, water bottles, stress and exercise balls and fans. Many materials used in this program will be printed with health messages to remind client of "Senior Wise" health messages. AAA staff will also participate in this health project.

This outreach program will be extended to non-title III senior groups and programs requesting participation.

Health Prevention supplies and messages are used in all outreach activities by the AAA staff to include giveaways at health fairs, etc. to include 7 day pill boxes, health journals, water bottles, stress/exercise balls, fans with health messages and other printed health materials.

**Quality Assurance
Goals & Objectives
FY 2005 – 2006**

Goal: To improve accountability by improving the accuracy of data collected from the centers and programs.

Objective:

Redesign data collection form for each department to maximize accurate recording of outreach efforts.

Record data monthly into a central database designed to classify data by county and program outreach efforts.

Prepare reports of data as needed by Executive Director or individual program directors.

Review program/outreach data, AIMS reports, and identify potential problems.

Assist with design of Area Plan.

Goal: To increase grant funding to support existing programs and future programs that will enhance the quality of life for seniors.

Objectives:

Garner funding through area foundations to pay for area assessment.

Garner funding through National and/or local grants to enhance and improve Single Point of Entry Information and Assistance Program.

Garner funding to launch a computer program in centers where there is a need.

Garner funding for additional projects as the need arises.

Goal: To increase professional development.

Objectives:

Staff to attend training programs as required.

Collaboration with local governments and agencies to provide education for staff with joint resources.

Work collaboratively with local governments and other organizations (ex: BC/BS) on projects.

SenioRx
Objectives and Goals
FY 2006

Program Goal: Because the high cost of prescription drugs can be a great burden, we strive to reduce economic stress, promote better health and improve quality of life of Alabama's older population by providing ways to reduce the expense of life sustaining medications. Additionally, we believe this program will reduce the incidence of emergency room visits as well as hospital and nursing home admissions.

Objectives:

- Coordinate efforts among differing organizations to reach as many eligible seniors as possible.
- Establish efficient and effective service delivery.
- Establish a comprehensive knowledge base for Coordinators to easily and accurately identify available services.

Goal:

Create partnership development throughout our service area, which involves tapping into and developing working relationships with existing networks, agencies and organizations in each community.

Objectives:

- Educate community, religious, civic and other groups about the SenioRx program, by contacting community leaders and attending group meetings.
- Use the partnership opportunities to better and more efficiently serve each region's clients.

Goal:

Use outreach to inform the public by providing details regarding the available information channels as well as general, factual information about the need for prescription drug assistance.

Objectives:

- Set up a schedule with visits to senior centers in each of our five counties.
- Give presentations and participate in health fairs throughout our PSA to inform the public about SenioRx.

Goal:

Continuously educate SenioRx and M4A staff in order to develop the Program by attending meetings, workshops, and training seminars.

Objectives:

- Keep abreast of all information made public thru news media.
- Participate in all training offered by the Alabama Department of Senior Services that relates to SenioRx.
- Research in order to find other sources of information that relates to prescription drug assistance for senior citizens.

Goal:

Maintain client records in an organized and suitable condition for monitoring client and program progress.

Objectives:

- Collect thorough and accurate information from the client.
- Document information on referrals and recommendations made to the client by the Coordinator.
- Track contacts made with the client throughout the program participation period.
- Follow up with clients on a regular basis.

SenioRx has served 1179 clients as of 7/1/2002 – 7/31/2005. Clients that we have served broken down by county are:

- Blount: 159
- Chilton: 376
- Shelby: 229
- St. Clair: 191
- Walker: 224

SenioRx has saved a total of \$5,131,403.51 for our senior citizens during this time period.

Legal Services Goals & Objectives **Revised FY 2006**

Goal:

To develop an effective and comprehensive legal services program at the AAA that meets both the requirements of the OAA and State Plan

Objectives:

- The Legal Services Coordinator will seek relevant advice from the Executive Director, State Coordinator, and other in-house attorneys in providing legal assistance related to income; healthcare; long-term care; nutrition; housing; utilities; protective services; defense of guardianship; abuse; neglect; and age discrimination.
- The Legal Services Coordinator or legal assistant under the supervision of an attorney will provide assistance to those individuals 60 years of age or older in the PSA who are being abused, neglected or financially exploited or who need assistance with public benefits, healthcare, housing, nutrition, autonomy or consumer issues. Although the Legal Services Program has been able to assist seniors who have been financially exploited, it is rare that a senior who has been abused or neglected contacts the Area Agency on Aging. Therefore, the Legal Services Provider will work with the Executive Director to develop a plan to educate those in the public sector who come into contact with seniors who may be victims of abuse, neglect or financial exploitation. The goal of education will be equip these groups to recognize the signs of abuse and neglect in the elderly. Another goal of education will be to increase public awareness of the prevalence of elder abuse and neglect.

Goal:

To serve first and give priority to those clients designated for targeting by the Older Americans Act

Objectives:

- The Legal Services Coordinator will work with the Executive Director, local groups (government, nonprofit, religious, or civic) and other contacts to develop relevant outreach programs in the PSA. Outreach with religious organization was intended to focus on predominantly African-American churches and congregations. This has not been done.
- The Legal Services Coordinator, legal assistant, or staff will schedule outreach events at senior centers and other focal points, particularly those centers and focal points in rural areas or focal points for minority or limited English proficiency seniors.
- The Legal Services Coordinator will continue to work with the Information and Referral Coordinator and all AAA staff who participate in the intake process to recognize and prioritize for services those clients who are 85+ years of age, poverty-level, minority and/or rural.
- The Legal Services Coordinator will continue to work with the Information and Referral Coordinator and other staff who participate in the intake process to recognize and prioritize for services those seniors who are homebound, on hospice, or residents of long-term care facilities.

- The Legal Services Coordinator will continue to work with the Long-term Care Ombudsman to make long-term care residents and nursing home staff aware of the legal services program.
- The Legal Services Coordinator will continue to work with SHIP and SenioRx to advertise legal services to seniors who are at poverty-level or below or who are eligible for the Medicare Savings Program. The SenioRx Program no longer mails legal fliers with its applications and mailings. The SenioRx Coordinator made this decision with the support of the Legal Services Provider. Information now being mailed to SenioRx clients is critical because the information pertains to Medicare Part D and how Part D might affect SenioRx eligibility. Because so many program materials (for example, from SHIP and legal) were being mailed to SenioRx clients which did not pertain to SenioRx or Part D, it was decided that it would be best for clients to reduce enclosures.
- The Legal Services Coordinator will work with the Alabama Cares Coordinator and the Lead Medicaid Case Manager to make their clients (who are a priority under the Older Americans Act) aware of legal services.

Goal:

To provide timely and professional legal assistance to all clients designated for targeting by the Older Americans Act

Objective:

- The Legal Services Coordinator will prioritize clients according to legal needs.
- The Legal Services Coordinator will designate at least 2 days each quarter for legal appointments in each of the counties in the PSA. The Legal Services Coordinator has increased scheduled county appointments to at least 3 days per quarter.
- The Legal Services Coordinator, legal assistant, or staff will keep clients informed of the progress of their legal matter.
- Under the scope of legal services, the Legal Services Coordinator, legal assistant, and all legal staff will be bound by confidentiality.

Goal:

To provide oversight to the Ombudsman and State Health Insurance Assistance Program (SHIP)

Objectives:

- The Legal Services Coordinator will become familiar with nursing home regulations.
- The Legal Services Coordinator will work with the Ombudsman and the SHIP Coordinator to fulfill the standards of the State Plan.
- In providing oversight or advice to these or other programs, the Legal Services Coordinator will observe the attorney-client privilege and avoid conflicts of interest.

Goal:

To work with the Executive Director and other AAA staff on significant senior advocacy issues

Objective:

- The Legal Services Coordinator will stay informed of current developments in SHIP, the Ombudsman Program and the Information and Referral Program, particularly as these programs pertain to Medication Assistance/Prescription Health Insurance and Health Insurance choices for seniors; residents' rights; and single-point of entry.

- As assigned or approved by the Executive Director, the Legal Services Coordinator will serve on committees, advisory councils, focus groups or other groups which address senior advocacy issues.

Goal:

To develop a standard procedure for referrals made to the Legal Services Program

Objective:

- The Legal Services Coordinator will provide in-service to all staff on the qualifications for legal services (appropriate referrals), scope of legal services, importance of attorney-client privilege, and prohibition against attorney solicitation. This objective was not met because of concern about over-burdening the staff with the responsibility of screening legal clients. The Information and Referral Process (single-point-of entry) effectively determines basic client eligibility (age, county of residence) for legal services. It is felt that other determinations about legal eligibility are best made by the Legal Services Provider.
- The Legal Services Coordinator will develop an appropriate referral process for other program coordinators (for example, the SHIP Coordinator and Long-term Care Ombudsman) to make referrals to the Legal Services Program. This is being accomplished by the Information and Referral Process.

Goal:

To work with the AIMS Coordinator to report and track legal services activities which are not currently being reported and to identify problem areas in the legal services program so that solutions for these problems can be developed.

Objectives:

- The Legal Services Coordinator will schedule meetings and work with the AIMS Coordinator so that a database can be created which tracks legal activities currently not being tracked.
- The Legal Services Coordinator will review the current methodology for documents monthly legal activities with the AIMS Coordinator so that more effective methodologies can be developed.
- The Legal Services Coordinator will review current legal services data with the AIMS Coordinator in order to identify problem areas in legal services.
- The Legal Services Coordinator will work with work relevant staff, including the AIMS Coordinator, in order to develop effective strategies for addressing problem areas.

Goal:

To hire a legal assistant.

Objectives:

- The Legal Services Coordinator will post the job opening for legal assistant on the Nonprofit Resource Center of Alabama website.
- The Legal Services Coordinator will interview qualified applicants to assist with the Legal Services Program.

**OUTLINE OF STEPS TO TAKEN TO MORE FULLY IMPLEMENT THE ALABAMA CARES PROGRAM
MIDDLE ALABAMA AREA AGENCY ON AGING**

A. Administration	Issue	Description of Problem	Actions to be Taken
	1. Long Waiting Lists	No guidelines have been developed to identify who is eligible for services.	<ul style="list-style-type: none"> Research eligibility guidelines that have been developed by other A.A.s. Identify eligibility requirements required by each funding source Ask persons from agencies making referrals to participate in developing the eligibility guidelines Prepare guidelines to determine who is eligible for services Identify one or two agencies to use the guidelines as pilot programs.
		Guidelines do not establish priorities for service	Prepare guidelines that establish what priorities will be considered for admission into the program e.g. need for service, length on time on waiting list, length of time needing services, or proximity to services
		Duplicate names are on the waiting list	Eliminate duplication on existing list
			Remove names of persons receiving services through other programs e.g. Medicaid waiver clients
			Program computer to identify duplicates when entries onto the list are first generated.
		List contains persons who could receive services from another program	Identify programs provided by other agencies to whom referrals can be made appropriately
		Not enough money to provide services for persons who are eligible	Identify additional sources of funding
			Refer individuals to other agencies who could provide services
			Reduce Per Person allocations
			Prioritize who will receive services
		Administrative costs are being absorbed by the agency	Identify what administrative expenses can be reimbursed
			Develop a system to document administrative costs.
			Submit administrative cost for reimbursement
	3. Duplication of Paper Work	Paper work requests the same information	Establish a work group (1) to identify information that is required on specific forms (2) to revise forms to eliminate duplication
	4. Conflict between cost sharing guidelines and goals of program.	Cost sharing or sliding fee schedule appear to conflict with AOA guidelines but yet they are required by Federal guidelines.	Develop a model that reflects the goals of the program but allows for the client sharing in the cost of the services based on their ability to pay.

B. System for Services

Issue	Description of Problem	Actions to be Taken
1. Referrals	Persons making referrals lack accurate information on who is eligible for the Alabama Care Program	Prepare materials describing the guidelines that have been established for eligibility. Identify staff from agencies, hospitals, and physicians that have made referrals to the program Send them the materials giving the guidelines for eligibility Provide training on what services are available and who is eligible for the services
	Referral source may not be aware of services provided by another agency that may better serve the person being referred	Develop a way to provide information and feedback on each referral that is efficient, user-friendly, and timely. Suggest another agency if ineligible for services or waiting list is too long to respond to the need
2. Documentation	Sometimes services are not well documented.	Prepare form or other means for documentation as part of care plan
3. Accountability	System needs better accountability	
4. Monitoring of Program	Better monitoring of the program is needed	

C. Assessment and Care Plan

Issue	Description of Problem	Actions to be Taken
1. Assessment form	Universal assessment is not being followed; different assessment tools currently used Current assessments frequently lack the specifics needed to develop a care plan.	The initial assessment lays the foundation for the care plan and the services needed by an individual. Evaluate the universal assessment form to determine that it incorporates all of the information needed to prepare a care plan. Make sure that the information needed for potential sources of assistance is incorporated into the assessment form. Revise or make additions if needed. Train staff to use the (revised) universal assessment form Provide means to incorporate required documentation Include open-ended questions
2. Assistance for Persons Ineligible for Alabama Care	Persons who are determined to be ineligible for services or whose needs require a more immediate approach are not directed to alternative services.	Develop a referral process that is efficient enough that the individual conducting the assessment would know that the client is being recommended for an appropriate service and that he/she will be able to get the needed service by that agency.
3. Care Plan	A holistic approach is needed rather than individualistic services Lack of a good model for a care plan; vouchers are most often used for bathing and homemaker services. Other service providers not be used even when person is eligible	Develop the plan around the individual by looking at individual needs. See the client as a whole person. Brainstorm who, what, where, why, of relief for caregiver Be willing to think "out of the box" for ways to help caregivers. Develop model care plans to serve as a guide using an asset (generative) approach Determine if client qualifies for (1) Medicaid, (2) Medicare, (3) V.A., (4) Hospice, or (5) other home health services Determine if client qualifies for other in-home services.
3. Development of care plan	Lack software that can be used for case management (?)	Secure software and train case managers to use it (?)
4. Perception of Program	Program is seen as a catch-all to serve their clients.	
5. Service Providers	"Ghost" caregivers are used to serve clients.	

D. Provision of Services

Issue	Description of Problem	Actions to be Taken
1. Implementation of care plan		
2. Documentation	The care given is not always being documented.	Incorporate documentation into the care plan.
3. Treatable Conditions	Conditions that could be corrected are not identified and treated	Identify persons who can provide services that would reduce or eliminate services needed e.g. incontinence
4. Persons Without a Caregiver	Lack of alternative funding and resources for persons who do not have a caregiver so that these individuals can continue to live in their home.	Identify model programs that have been effective in serving this population. Secure sources of funding to assist these individuals. Support legislation to address this population, if necessary.

WHERE ARE WE AND WHERE DO WE NEED TO GO

Issue	Action	Method
1. Where Are We? Where Do We Need to Go?	Staff: Work with the staff to review and evaluate program. Hire qualified Caregiver Coordinator	Identify strengths of program Develop a group process to identify changes that would benefit the program
	Caregivers: Secure input from caregivers in each county	1. Advertise on NRCA Website 2. Word of mouth 3. Review job description of Careg Coordinator and Assistant Coordinator (Case Manager)
	Service Providers: Secure input from services providers.	Share help received from program Identify strengths of the program Use nominal group technique to identify best ways in which to address the needs of caregivers. Prioritize these items. (Conduct a survey of all caregivers)
		Discuss strengths of the program Conduct one-on-one with key providers Conduct group meeting by county or by region – focus group or nominal group technique Revise contracts for FY '06
	Families on Waiting List: Secure input from families that are on the waiting list.	Mail Post Cards with deadline Follow up with Phone Call Conduct a mail survey to secure their input into the program
	Board Members: Secure input from the members of the Board of Directors	Conduct a session with the members of the Board of Directors to get their input into the program. Educate Board on program guidelines
2. Relationship and Assistance from ADSS.	Identify services desired from ADSS	Meet with them to discuss strategies