

Regional Aging Services Plan
July 1, 2016 – June 30, 2020

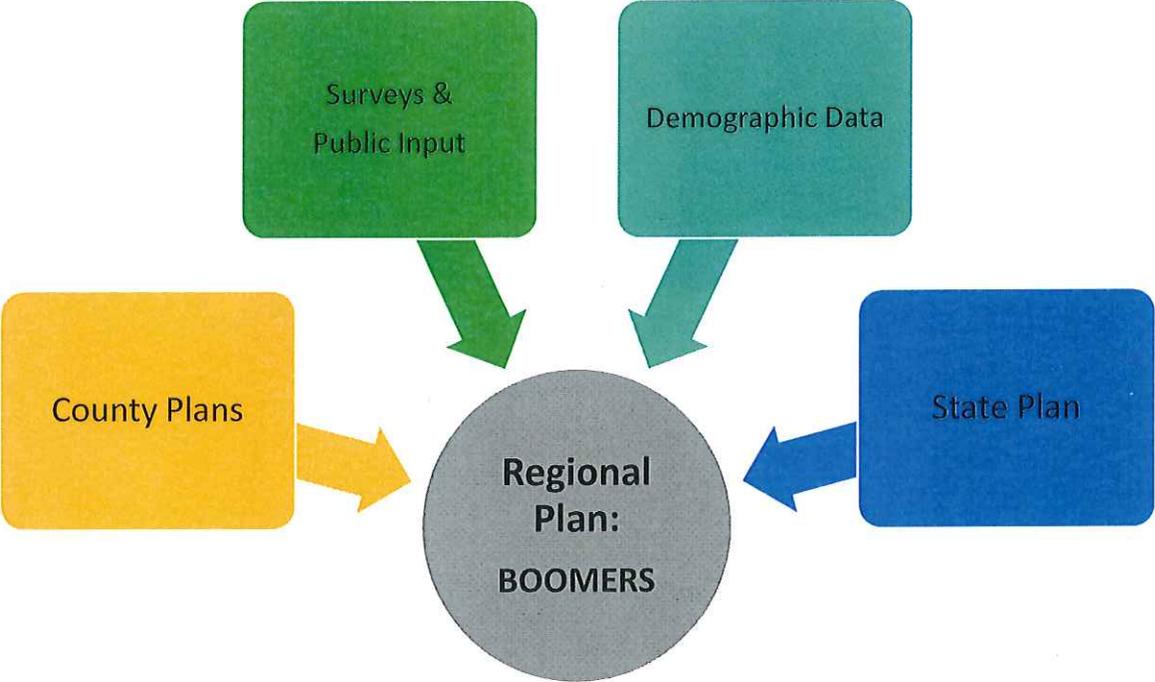
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Eastern Carolina Council
Area Agency on Aging

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Developing the Plan

The staff of the Eastern Carolina Council Area Agency on Aging underwent an intense process of planning to provide the foundation for developing this *Regional Aging Service Plan: Breaking Out Of the Mold: Evolving Resources & Services*. A needs assessment survey was developed and distributed throughout the region. Input was received from aging service providers, older adults, caregivers, government officials and many others. Existing County Plans in the region, the State Plan, data from the surveys and demographic data were also used in the development of this plan.



Demographics

Across the nation, there is huge demographic shift taking place. This holds true in Eastern North Carolina, particularly in Carteret, Craven, Duplin, Greene, Jones, Lenoir, Onslow, Pamlico and Wayne counties. It is projected, in eight of our nine counties, that there will be more people over sixty years of age than those under the age of eighteen by the year 2030. This significant increase in growth in the older adult population is caused by the wave of the baby boomers (those born between 1946 and 1964) beginning to reach retirement age. Many of those retirees are not only those who choose to come to Eastern North Carolina from other states or abroad, but are also those who served in the military or civil service from Marine Corps Base Camp Lejeune, Marine Corps Air Station Cherry Point, Seymour Johnson Air Force Bases as well as Coast Guard Stations Fort Macon, Hobucken and Emerald Isle. Older adults are drawn to stay in Eastern North Carolina not only for the Crystal Coast but also for the accessibility of services for older adults, their families and people with disabilities



Regional Population Change

County	60+ (2015)	60+ (2030)	Difference	% Change	Median Age by 2030
Carteret	21,299	25,927	4,628	22	48.16
Craven	23,392	29,062	5,670	24	35.96
Duplin	13,703	17,661	3,958	29	39.96
Greene	4,507	5,899	1,392	31	43.17
Jones	2,850	3,210	360	13	42.92
Lenoir	14,778	16,326	1,548	10	40.88
Onslow	24,145	33,463	9,318	39	25
Pamlico	4,595	5,284	689	15	50.28
Wayne	26,142	34,127	7,985	31	38.33
Region Total	137,426	172,989	35,548	26	40.51

*Source: NC Office of State Budget & Management, Oct. 2015

Break down of 60+ population totals of 2015

County	60-64	65-74	75-84	85-99	100+	Total Population	%	Median Age
<i>Carteret</i>	5,538	9,584	4,484	1,675	18	69,530	31	47.28
<i>Craven</i>	5,917	9,653	5,547	2,244	31	105,052	22	35.97
<i>Duplin</i>	3,709	5,769	3,033	1,177	15	60,446	23	38.7
<i>Greene</i>	1,384	1,825	923	369	6	21,309	21	39.7
<i>Jones</i>	814	1,176	617	240	3	10,490	27	43.53
<i>Lenoir</i>	4,129	6,067	3,271	1,302	9	58,780	25	41.45
<i>Onslow</i>	7,232	10,090	5,172	1,631	20	194,607	12	26.28
<i>Pamlico</i>	1,085	2,011	1,122	370	7	13,158	35	50.21
<i>Wayne</i>	7,457	10,658	5,872	2,127	28	125,912	21	36.9

*Source: NC Office of State Budget & Management, Oct. 2015



Break down of 60+ population totals of 2030

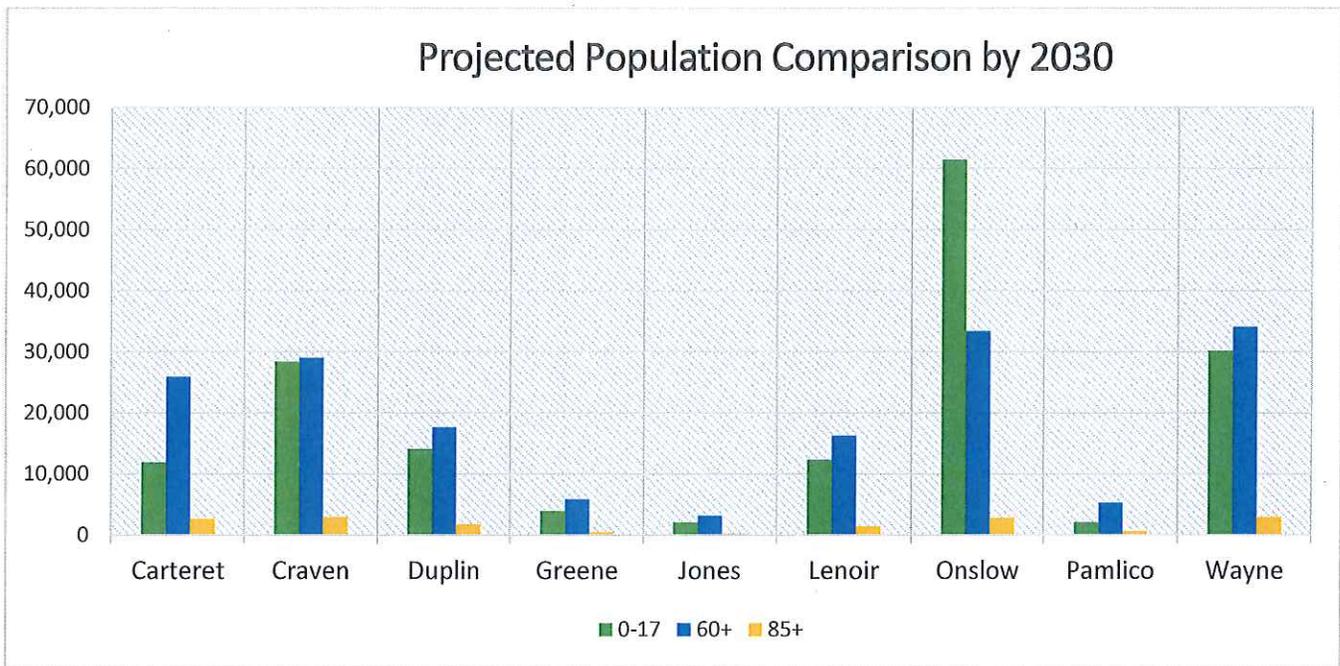
County	60-64	65-74	75-84	85-99	100+	Total Population	%	Median Age
<i>Carteret</i>	4,954	10,624	7,663	2,651	35	72,183	36	48.16
<i>Craven</i>	5,625	12,335	8,086	2,963	53	118,536	25	35.96
<i>Duplin</i>	3,672	7,259	4,943	1,748	39	65,213	27	39.96
<i>Greene</i>	1,229	2,584	1,608	469	9	21,309	28	43.17
<i>Jones</i>	574	1,388	970	274	4	10,861	30	42.92
<i>Lenoir</i>	3,138	7,035	4,672	1,461	20	58,034	28	40.88
<i>Onslow</i>	7,227	14,665	8,747	2,781	43	218,222	15	25
<i>Pamlico</i>	842	2,072	1,678	677	15	13,561	39	50.28
<i>Wayne</i>	7,294	14,828	9,074	2,880	51	137,064	25	38.33

*Source: NC Office of State Budget & Management, Oct. 2015

Population of 60+ will increase more than 0-17 age range by 2030

County	0-17	60+	85+
<i>Carteret</i>	11,944	25,927	2,686
<i>Craven</i>	28,458	29,062	3,016
<i>Duplin</i>	14,147	17,661	1,787
<i>Greene</i>	3,986	5,899	478
<i>Jones</i>	2,123	3,210	278
<i>Lenoir</i>	12,360	16,326	1,481
<i>Onslow</i>	61,500	33,463	2,824
<i>Pamlico</i>	2,106	5,284	692
<i>Wayne</i>	30,159	34,127	2,931

*Source: NC Office of State Budget & Management, Oct. 2015

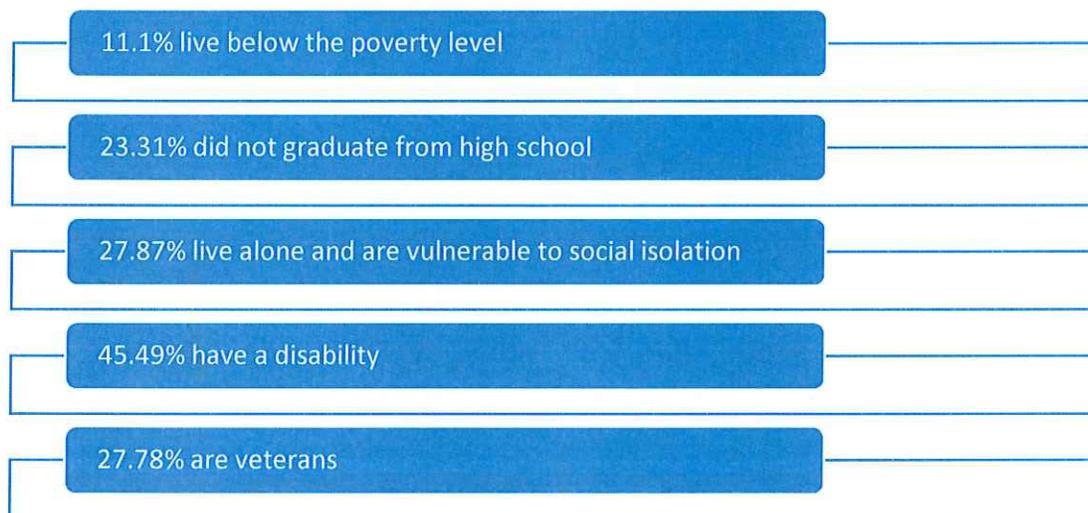


2015 and 2030 Race/Ethnicity Comparison

	<i>2015 White</i>	<i>2030 White</i>	<i>2015 Black African American</i>	<i>2030 Black African American</i>	<i>2015 American Indian & Alaska Native</i>	<i>2030 American Indian & Alaska Native</i>	<i>2015 Asian</i>	<i>2030 Asian</i>	<i>2015 Hispanic Latino</i>	<i>2030 Hispanic Latino</i>
<i>Carteret</i>	27.80	33.40	1.21	1.4	.09	.21	.22	.49	1.71	2.52
<i>Craven</i>	15.48	17.72	3.76	5.42	.06	.14	.29	.84	4.25	6.8
<i>Duplin</i>	15.09	19.64	5.46	5.95	.21	.81	.15	.53	5.92	7.44
<i>Greene</i>	13.82	17.58	6.96	8.86	.20	.83	0	.23	7.33	10.1
<i>Jones</i>	17.76	21.59	7.97	7.16	0	0	0	0	8.48	7.96
<i>Lenoir</i>	15.82	16.64	9.34	10.75	.08	.28	.12	.25	9.65	11.49
<i>Onslow</i>	8.86	11.79	1.70	2.55	.07	.13	.32	.54	2.20	3.54
<i>Pamlico</i>	28.46	33.04	5.09	2.18	0	0	0	0	5.43	5.92
<i>Wayne</i>	12.99	16.67	5.60	6.95	.10	.32	.26	.62	6.08	8.23



Of the age group of 65 and older in Eastern Carolina Council's region:



Characteristics	NC	Carteret	Craven	Duplin	Greene	Jones	Lenoir	Onslow	Pamlico	Wayne
Living alone	27%	27.10%	26.20%	26.70%	34.50%	24.70%	31.50%	28.90%	22.30%	28.90%
Veterans	22%	28.40%	28.70%	19.40%	18.90%	21.20%	16.30%	30.00%	25.50%	22.10%
Have a disability	38%	37.70%	40.20%	48.80%	44.70%	51.10%	56.60%	44.80%	43.70%	41.80%
Have less than high school education or higher	24%	15.40%	16.30%	31.50%	28.40%	27.60%	25.90%	20.00%	19.20%	25.50%
Median household income	\$34,117	\$42,397	\$40,018	\$24,958	\$34,737	\$26,875	\$30,849	\$39,292	\$39,917	\$33,006
Income below the poverty level	10%	7.60%	8.40%	19.10%	14.90%	9.40%	14.30%	8.60%	5.90%	11.70%
Income is between 100-199% poverty level	25%	19.60%	19.40%	29.50%	21.00%	38.30%	29.80%	23.70%	18.40%	24.90%
In labor force	16%	18.50%	12.80%	13.50%	19.80%	16.50%	15.60%	15.80%	14.40%	15.30%
Own their homes	82%	86.90%	83.00%	78.60%	85.70%	83.80%	76.10%	80.80%	88.90%	78.90%

Strategic Goals

Goal 1: Empower older adults and their families to make informed decisions and easily access existing health and long-term care options.

Objective 1: Educate the public on the availability of services to foster independence, self-sufficiency and their future planning for long-term needs

Strategy 1.1: Conduct outreach and inform older adults about health care benefits aimed at preventing disease and promoting wellness.

Actions:

- Annually facilitate two Low-Income Subsidy (LIS) outreach activities within the region.
- During the spring and summer of each year promote the LIS program using mass media.
- Annually during May (Older American's Month) promote senior centers using mass media.
- Annually participate in at least three health fairs and other similar events to educate older adults, caregivers and adults with disabilities about health and wellness, managing chronic diseases and disease prevention.
- Annually make presentations to at least six groups on disease prevention, managing chronic disease and health promotion.
- Collaborate with local Departments of Social Services and Health Departments to disseminate age related information through 2020.
- Create informative table tents to distribute to local restaurants to increase awareness of aging issues through 2020.
- Develop bi-monthly electronic newsletter for providers, volunteers and other stakeholders through 2020



Strategy 1.2: Support public education and awareness of the needs of family caregivers.

Actions:

- Annually recognize Family Caregiver Month in November.
- Facilitate three caregiver education workshops annually at different locations throughout the region.

- Annually make at least one presentation monthly on caregiving issues to civic, professional, governmental, business and other entities.
- Review the Family Caregiver Support Program (FCSP) services database housed on the Eastern Carolina Council's website quarterly to ensure accuracy through 2020.

Strategy 1.3: Provide caregiver training and educational resources to professionals serving family caregivers, to strengthen family capacity to provide care.

Actions:

- Ensure each county will have a certified Respecting Choices trainer by 2018.
- Collaborate with appropriate services providers to conduct family caregiver trainings in at least three geographic areas of the ECC region each year.
- Use social media tools to provide bi-weekly caregiving tips and resources to those following the page through 2020.
- Facilitate quarterly stakeholder meetings for professionals involved in transitioning older adults and adults with disabilities from a nursing home to the community through the Money Follows the Person (MFP) program.

Strategy 1.4: Target outreach and in-reach to nursing homes and their residents on home and community-based services and support options.

Actions:

- Make in-reach visits to 85% of nursing homes within the region each year.
- Maintain a literature rack with pertinent community transition information in larger nursing homes by 2017.

Objective 2: Streamline access to long-term services and supports to facilitate informed decision-making

Strategy 2.1: Support development of the North Carolina Division of Aging and Adult Services' statewide No Wrong Door access system for long-term services and supports.

Actions:

- Expand regional online database hosted on the ECCAAA webpage to include non-governmental services by 2017.
- Collaborate with regional stakeholders, public and private, to educate and promote the No Wrong Door initiative through 2020.

Strategy 2.2: Expand the Information & Options Counselor program.

Actions:

- Increase the number of certified Options Counselors to nine within the region by 2020.
- Facilitate at least one training pertinent to Options Counseling per year through 2020.

Objective 3: Ensure inclusion of diverse cultures and abilities in all aspects of the aging adult services network

Strategy 3.1: Increase outreach to consumers with limited English proficiency.

Actions:

- Support Senior Centers by identifying counties that have limited English speaking populations over 5% of the general population by 2017.
- Secure appropriate non-English materials that address aging programs and services for older adults, caregivers and adults with disabilities by 2017.

Strategy 3.2: Collaborate with key organizations supporting persons with disabilities to raise awareness about physical, sensory and intellectual disabilities affecting older adults and their caregivers.

Actions:

- Offer four trainings to providers and volunteers annually through 2020.
- Provide information and resources on the ECCAAA web page through 2020.
- Expand database housed on the ECCAAA webpage to include services for adults with disabilities by 2016.

Strategy 3.3: Expand training and educational opportunities to the aging network on the unique needs of the aging lesbian, gay, bisexual and transgender (LGBT) community.

Actions:

- Offer one training to providers and volunteers annually through 2020.
- Expand database housed on the ECCAAA webpage to include services for the older (LGBT) community by 2016.
- Provide information and resources on the ECCAAA web page through 2020.
- Facilitate 4 Virtual Dementia Tours per year.

Strategy 3.4: Continue to build the capacity of ECCAAA and providers to better support the needs of older adults with intellectual and developmental disabilities and their aging caregivers and to better support the needs of the LGBT community.

Actions:

- Revise Regional Aging Advisory Council by-laws to include representation of adults with disabilities by 2017.
- Collaborate with UNC-CARES host three person centered trainings to senior center staff and home and community based providers by 2020.
- Collaborate with service providers to identify and share methods and best practices to ensure inclusion in access to, planning for and participation in services through 2020.
- Provide the opportunity for ECC AAA staff to attend meetings where material is presented to help gain a better understanding of these issues through 2020.



Goal 2: Enable older adults to remain independent and age in the place of their choice with appropriate services and supports

Objective 1: Maintain and expand the availability of community-based services and supports

Strategy 1.1: Increase transportation options throughout the region.

Actions:

- Expand the database housed on the ECCAAA webpage to include all transportation services available throughout region, including private providers by 2017.
- Collaborate with the Down East Regional Planning Organization (RPO) and the Eastern Carolina RPO to encourage existing county transit systems to regionalize their systems thereby increasing access and efficiencies through 2020.
- Collaborate with local providers and stakeholders to advocate for additional transportation options for older adults and adults with disabilities through 2020.
- Provide input to each transit system's Transit Development Plans each time these plans are updated through 2020.
- Utilize various methods to advocate for increased transportation for the elderly and disabled especially in rural areas through 2020.

Strategy 1.2: Increase access to accessible and affordable housing for older adults and adults with disabilities.

Actions:

- Continue to actively participate in the NC Targeted Housing referral program through 2020.
- Create a map for each county detailing older adult demographics and location of existing low-income subsidized housing to assist in planning for future developments by 2017.
- Collaborate with Home Builder's Associations to advocate for increased homes using Universal Design techniques through 2020.

Strategy 1.3: Educate older and disabled adults, caregivers, service providers and other stakeholders regarding long term care options.

Actions:

- Increase the number of providers implementing the Home & Community Care Block Grant Information & Options Counseling program from one provider to three providers by 2019.
- Regional Ombudsmen will provide information and assistance on long term care options to residents and families through 2020.

Strategy 1.4: Improve services for Veterans.

Actions:

- Support and participate in the Veterans Directed Home Community Based Service initiative by 2020.
- Partner with Family Services offices at military installations to support the needs of long distance caregivers through 2020.
- Collaborate with each county Veteran's Service Office

Objective 2: Promote flexibility in publicly funded services and supports to offer older adults and their caregivers more opportunities to choose how and where they receive services.

Strategy 2.1: Increase the Home & Community Care Block grant consumer directed options.

Actions:

- Expand the In-Home Aide consumer directed programs administered in the region from one to three by 2019.
- Collaborate with NCDAAAS and Wayne County Services on Aging to transition the consumer directed transportation program from pilot status to permanent program status by 2020.

- Expand the Family Caregiver voucher program to include supplemental services as well as respite services by 2017.

Strategy 2.2: Continue to administer the Money Follows the Person program.

Actions:

- Support 12 eligible residents in nursing homes to transition back into the community through 2020.

Goal 3: Empower older adults to have optimal health status and to have a healthy lifestyle

Objective 1: Expand access to and increase participation in evidence-based health promotion and disease prevention programs

Strategy 1.1: Increase the number of evidence-based health promotion programs.

Actions:

- Increase the number of Master Trainers for the Living Healthy program to eight by 2017.
- Increase the number of Lay Leaders for the Living Healthy program to 30 by 2018.
- Increase the number of Matter of Balance coaches to 16 by 2018.

Objective 2: Promote engagement in health and wellness programs and initiatives

Strategy 2.1: Promote the four local Senior Games (Carteret Senior Games, Neuse River Senior Games, Onslow County Senior Games and Wayne Senior Games)

Actions:

- Assign each AAA team member to participate on steering committee for each local game in each year they are held through 2020.



Strategy 2.2: Promote health and wellness activities throughout region.

Actions:

- Assist communities hosting local health and wellness events through 2020.

- Collaborate with the medical community to provide information using various methods to staff and consumers on evidence-based health promotion and disease prevention programs through 2020.

Strategy 2.3: Promote improved wellness through education and access to better nutrition.

Actions:

- Collaborate with local food banks and other organizations to sponsor a Stop Senior Hunger food drive each year through 2020.
- Collaborate with local nutrition providers to identify resources for fresh fruits and vegetables to be delivered along with meals through 2020.

Goal 4: Protect the safety and rights of older and vulnerable adults and prevent their abuse, neglect, and exploitation.

Objective 1: Maximize collaboration, outreach and training to prevent abuse, neglect and exploitation

Strategy 1.1: Provide Elder Abuse prevention education to consumers and professionals.

Actions:

- Facilitate three Elder Abuse Prevention events annually to educate older adults, adults with disabilities, caregivers and other stakeholders.
- Recognize World Elder Abuse Day (June 15th) annually.
- Collaborate with stakeholders in each county to develop an Elder Abuse Taskforce by 2020.
- Collaborate with local Departments of Social Services to conduct two educational presentations annually for professionals, caregivers, and residents on their responsibilities in reporting suspected abuse and the process of reporting.
- Collaborate with Legal Aid of North Carolina to meet with each Community Advisory Committee during quarterly meetings to provide education on reporting suspected abuse, the warning signs, and the penalties for those accused of abuse by 2018.



Objective 2: Strengthen emergency preparedness and response for older adults and people with disabilities

Strategy 2.1: Support local providers and jurisdictions in the event of an emergency.

Actions:

- Identify unmet needs of older adults and adults with disabilities in affected area(s).
- Collaborate with local emergency management to facilitate emergency preparedness training for administrators and staff of long-term care facilities each year through 2020.
- Create a disaster preparedness page on the ECCAAA website by 2017.



Goal 5: Facilitate communities and older adults working together to plan and prepare for the future.

Objective 1: Promote volunteerism and other active engagement

Strategy 1.1: Promote volunteer opportunities throughout the region.

Actions:

- Post volunteer opportunities and links on the ECCAAA webpage through
- Host an annual volunteer appreciation luncheon for AAA volunteers.

Strategy 1.2: Provide volunteer opportunities to advocate on behalf of older adults and adults with disabilities.

Actions:

- Annually offer advocacy training to the Regional Aging Advisory Council to promote citizen involvement and continue to improve and empower members to advocate for older adults.
- Annually offer advocacy training to the Senior Tar Heel Legislature to promote citizen involvement and continue to improve and empower members to advocate for older adults.

Strategy 1.3: Promote volunteerism by recruiting volunteers for the Seniors' Health Insurance Information Program (SHIIP) in Craven County.

Actions:

- Increase the number of volunteers for Craven County SHIIP to 10 by 2017.

Objective 2: Support local communities to better prepare and plan for an aging population

Strategy 2.1: Build the capacity of senior centers to address the needs and interests of older adults and adults with disabilities in their counties.

Actions:

- All counties in the region will have Senior Centers of Excellence or Merit by 2020.
- Facilitate meeting for senior center staff to gather innovative programming ideas and to share best practices annually through 2020.

Strategy 2.2: Build the capacity of local communities to become more inclusive for all residents to remain active and engaged in their communities.

Actions:

- Convene an "Aging in Place" taskforce in four communities by 2020.
- Educate all County Aging Advisory Boards on the concept of "dementia capable" communities by 2017.
- Partner with one local transit organization and related community groups to develop an inclusive coordinated transportation system by 2018 with the intent of replicating plans throughout region.
- Publish Aging in Place resources on the ECCAAA webpage through 2020.
- Develop a "Senior Friendly Community" designation packet, to include a criteria list, a certificate and a public service announcement for communities by 2017.
- Identify a community to pilot the "Senior Friendly Community" designation program by 2017.



Strategy 2.3: Provide the most current aging population projections

Actions:

- Compile demographic data (or update) for counties within the region to share with providers, county aging planning boards and other stakeholders through 2020.
- Provide a link to the most current projections for the aging population in NC on the ECCAAA webpage through 2020.

Goal 6: Ensure public accountability and responsiveness

Objective 1: Implement operational improvements and managerial efficiencies for critical services and supports

Strategy 1.1: Improve the wait list housed in the Aging Resource Management System (ARMS)

Actions:

- Monitor quarterly providers wait list data in ARMS to ensure accuracy through 2020
- Provide annual training to providers on wait list policies.
- Utilize wait list data to educate stakeholders through 2020.



Strategy 1.2: Expand the implementation of and amount of consumer contributions for allowable Older Americans Act funding.

Actions:

- Provide annual training to providers on consumer contribution policies.
- Include consumer contributions on quarterly provider expenditure reports distributed to RAAC and County Aging Planning Boards.

Strategy 1.3: Monitor trends and impacts that the growth of older adult population and local economic climates will have on availability and delivery of home and community-based services.

Actions:

- Participate annually in NCDAAS provider survey through 2020.
- Provide an annual report to the region on the trends and impacts (including wait list information) that the aging population is having on the region through 2020.

Objective 2: Strengthen performance-based standards and outcomes

Strategy 1: Ensure all providers administer funded services according to North Carolina Division of Aging & Adult Services standards

Actions:

- Develop and adhere to annual provider monitoring plan each fiscal year.
- Annually perform risk assessments for all funded agencies to determine risk level of provide

Objective 3: Strengthen the capacity of Aging Network Providers to meet the needs of older adults and adults with disabilities

Strategy 3.1: Expand funding sources to include private pay options.

Actions:

- Annually provide training and technical assistance to providers in the development of private pay policies.

Strategy 3.2: Utilize ECC non-profit to expand funding for services.

Actions:

- Secure donations to increase the number of people served in the Home Delivered Meals and Congregate Nutrition programs through 2020.
- Secure donations to expand the FCSP through 2020.

Conclusion:

The Eastern Carolina Council Area Agency on Aging is committed to meeting the many needs of our region's rapidly growing aging population. The six goals outlined in this plan provide the vision and guidance for moving our region forward. To reach the goals defined in this plan, we must work together with regional and local agencies, as well as our volunteers who serve on our various committees and groups. In addition, we must forge new partnerships to expand our ability to meet the ever changing ever growing needs of older adults and adults with disabilities.

The Eastern Carolina Council Area Agency on Aging, our local service providers, and older adults continue to face increasing economic challenges. Continuing to provide programs and services to the growing number of seniors in our region is a challenge with our limited funding sources. Our best outcomes will be achieved when we work together to face these challenges.

We will need to improve collaboration, target and leverage available resources, and underscore accountability for ourselves and our provider agencies for enhanced results. The plan's goals can only be achieved with the support and strength of our many and varied stakeholders.





Verification of Intent

The Area Plan on Aging is hereby submitted for the Eastern Carolina Council Area Agency on Aging Planning and Service Area for the period July 1, 2016 through June 30, 2020.

It includes all assurances and plans to be followed by the Eastern Carolina Council Area Agency on Aging under the provisions of the Older Americans Act, as amended in 2006 (Public Law 109-365); hereafter referred to as the Act. The identified Area Agency on Aging will assume full authority to develop and administer the Area Plan on Aging in accordance with all requirements of the Act and related State policy. In accepting this authority the Area Agency assumes major responsibility to develop and administer the Area Plan for a comprehensive and coordinated system of services and to serve as an advocate for older people in the planning and service area.

The Area Plan on Aging has been developed in accordance with all rules and regulations specified under the Act and is hereby submitted to the State Unit on Aging for approval.

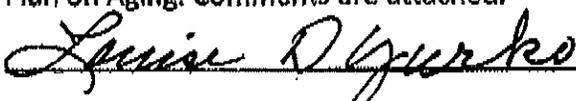


Area Agency Director

5/12/16

Date

The Regional Advisory Council on Aging has had the opportunity to review and comment on the Area Plan on Aging. Comments are attached.

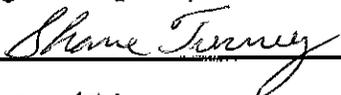


Chairperson of the Regional Advisory Council on Aging

4/18/16

Date

The governing body of the Area Agency has reviewed and approves the Area Plan



Signature/Title

5/12/16

Date

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Exhibit 2: Area Plan Assurances

As part of the Area Plan on Aging, the Area Agency on Aging assures that:

A) It will administer its Area Plan on Aging, as required under Title III of the Older Americans Act of 1965, as amended, in accordance with the regulations, policies and procedures as prescribed by the U.S. Administration on Aging and the North Carolina Division of Aging and Adult Services.

B) It will cooperate with the North Carolina Department of Health and Human Services and the U.S. Department of Health and Human Services and participate in the implementation of special initiatives that may be developed.

C) Each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas. OAA 306(a)(4)(C)

D) It will report annually to the Division of Aging and Adult Services in detail the amount of funds it receives or expends to provide services to older individuals. OAA 306(a)(13)(E)

E) Expenditures for Title III-B priority services will meet or exceed the following percentages, unless a lesser percentage has been approved by the Division of Aging and Adult Services as a part of the area plan review process:

Access - 30%

In-Home - 25%

Legal - 2%

OAA 306(a)(2)

F) Designation, where feasible, of a focal point for comprehensive service delivery will be made in each community, giving special consideration to designating multipurpose senior centers operated by organizations that have a proven track record of providing services to older individuals, that—

- 1) were officially designated as community action agencies or programs under section 210 of the Economic Opportunity Act of 1964 for FY 1981 and have maintained that status; or
- 2) came into existence during FY 1982 as direct successors in interest to such community action agencies or programs and meet the requirements under section 676B of the Community Services Block Grant Act.

It will specify in grants, contracts, and agreements implementing the area plan the identity of each focal point.

OAA 306(a)(3) and (6)(C)

Exhibit 10 provides information needed to meet this assurance.

G) It will set specific objectives for providing services to older individuals with the greatest economic or social needs and those at risk for institutional placement, to include specific objectives for providing services to

low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas. OAA 306(a)(4)

H) Each agreement with a service provider funded under Title III of the Older Americans Act (referred to in this section as 'the Act') shall require that the provider—

- 1) specify how the provider intends to satisfy the service needs of low-income minority elderly, older individuals with limited English proficiency, and older individuals residing in rural areas in the provider's service area;
- 2) to the extent feasible, provide services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and
- 3) meet specific objectives established by the Area Agency on Aging for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area (referred to in this Section as 'PSA'). OAA 306(a)(4)

I) Outreach efforts will identify and inform individuals eligible for assistance under the Act and their caregivers, with special emphasis on—

- 1) older individuals with greatest economic and social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- 2) older individuals with severe disabilities;
- 3) older individuals with limited English proficiency;
- 4) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and caregivers of such individuals);
- 5) older individuals at risk for institutional placement; and
- 6) older individuals who are Indians if there is a significant population in the planning and service area.

OAA 306(a)(4)(B) and (a)(6)(G)

J) It will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement with agencies that develop or provide services for individuals with disabilities. It will provide to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care. It will include information detailing how it will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and other institutions that have responsibility for disaster relief service delivery.

OAA 306(a)(5) (16)(17)

K) In connection with matters of general policy arising in the development and administration of the Area Plan, the views of recipients of services under such plan will be taken into account. OAA 306(a)(6)

Exhibit 12 and Area Plan Goals provide information to meet this assurance.

L) It will serve as an advocate and focal point for the elderly within the community by (in cooperation with agencies, organizations, and individuals participating in activities under the plan) monitoring, evaluating, and commenting upon all policies, programs, hearings, levies, and community actions which will affect older individuals. OAA 306(a)(6)

M) Where possible, it will enter into arrangements with organizations providing day care services for children, assistance to older individuals caring for relatives who are children, and respite for families so as to provide opportunities for older individuals to aid or assist on a voluntary basis in the delivery of such services to children, adults, and families. Where possible, preference will be given to entering into arrangements and coordinating with organizations that have a proven track record of providing services to older individuals, that—

- 1) were officially designated as community action agencies or programs under section 210 of the Economic Opportunity Act of 1964 for FY 1981 and have maintained that status; or
- 2) came into existence during FY 1982 as direct successors in interest to such community action agencies or programs and meet the requirements under section 676 B of the Community Services Block Grant Act. OAA 306(a)(6)(C)

N) It will make use of trained volunteers in providing services delivered to older individuals and individuals with disabilities needing such services and, if possible work in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as organizations carrying out Federal service programs administered by the Corporation for National and Community Service), in community settings. OAA 306(a)(6)(C)

O) It will establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under the Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of business community, local elected officials, providers of veteran's health care (if a veterans health care facility is located in the Area Agency PSA), and the general public, to advise continuously the Area Agency on Aging on all matters relating to the development of the area plan, the administration of the plan, and operations conducted under the plan. OAA 306(a)(6)(D)

Exhibit 9 provides information to meet this assurance.

P) It will establish effective and efficient procedures for coordination of services with entities conducting—

- 1) programs that receive assistance under the Older Americans Act within the PSA; and
- 2) other Federal or federally assisted programs for older individuals at the local level, with particular emphases on entities conducting programs described in section 203(b) of the Older Americans Act within the PSA. OAA 306(a)(6)(E) and (12)

Q) In coordination with the State agency and with the State agency responsible for mental health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the

Area Agency on Aging with mental health services provided by community health centers and by other public health agencies and nonprofit private organizations. OAA 306(a)(6)(F)

R) It will facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by:

- 1) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care;
- 2) conducting analyses and making recommendations with respect to strategies for modifying the local systems of long-term care to better respond to the needs and preferences of older individuals and family caregivers; facilitate the provision, by service providers, of long-term care in home and community-based settings; and target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings;
- 3) implementing, through the agency or service providers, evidence-based programs to assist older individuals and their family caregivers in learning about and making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals; and
- 4) providing for the availability and distribution (through public education campaigns, Aging and Disability Resource Centers/Connections, the area agency on aging itself, and other appropriate means) of information relating to the need to plan in advance for long-term care and full range of available public and private long-term care (including integrated long-term care) programs, options, service providers, and resources. OAA 306(a)(7)

S) Case management services provided under Title III of the Act through the Area Agency on Aging will—

- 1) not duplicate case management services provided through other Federal and State programs;
- 2) be coordinated with services described in subparagraph (1); and
- 3) be provided by a public agency or nonprofit private agency that: (i) gives each older individual seeking services under Title III a list of agencies that provide similar services within the jurisdiction of the Area Agency on Aging; (ii) gives each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipt by such individual of such statement; (iii) has case managers acting as agents for the individuals receiving the services and not as promoters for the agency providing such services; or (iv) is located in a rural area and obtains a waiver of the requirements described in clauses (i) through (iii). OAA 306(a)(8)(C)

T) It will provide assurances that the agency, in carrying out the State Long-Term Ombudsman Program under section 307(a)(9), will expend not less than the total amount of funds appropriated under the Act and expended by the agency in fiscal year 2000 in carrying out such a program under Title VII of the Act. OAA 306(a)(9)

U) It will provide a grievance procedure for older individuals who are dissatisfied with or denied services under Title III of the Act. OAA 306(a)(10)

V) It will provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as 'older Native Americans'), including—

- 1) information concerning whether there is a significant population of older Native Americans in the PSA and if so, an assurance that the Area Agency on Aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under Title III of the Act;
- 2) an assurance that the Area Agency on Aging will, to the maximum extent practicable, coordinate the services the agency provides under Title III of the Act with services provided under Title VI of the Act; and
- 3) an assurance that the Area Agency on Aging will make services under the area plan available, to the same extent as such services are available to older individuals within the PSA, to older Native Americans. OAA 306(a)(11)

W) If a substantial number of the older individuals residing in the planning and service area are of limited English-speaking ability, then the area agency on aging for the planning and service area will (a) utilize in the delivery of outreach services under section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability; and will (b) will designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include (i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and (ii) providing guidance to individuals engaged in the delivery of supportive services under the Area Plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effectively linguistic and cultural differences. OAA 307(15)

X) It will maintain the integrity and the public purpose of services provided, and service providers, under Title III of the Act in all commercial and contractual relationships. It shall disclose to the Division of Aging and Adult Services and the Federal Assistant Secretary on Aging the identity of each non-governmental entity with which it has a contract or commercial relationship relating to the provision of services to older individuals as specified in the Act and the nature of such contract or relationship. It shall demonstrate the effectiveness and efficiency of services provided through these contract or commercial relationships as required by the Act. On the request of the Federal Assistant Secretary or the Division of Aging and Adult Services, it shall disclose all sources and expenditures of funds such agency receives or spends to provide services to older individuals, for the purpose of monitoring compliance with the Act (including conducting an audit). OAA 306(a)(13)

Y) Funds received under Title III will be used-

1) to provide benefits and services to older individuals, giving priority to older individuals identified in assurance G; and

2) in compliance with assurance X and the limitations specified in Section 212 of the Act, pertaining to contracting and grant authority; private pay relationships; and appropriate use of funds (see Appendix C for details on Section 212) OAA 306(a)15

AA) Preference in receiving services under Title III of the Act will not be given by it to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this Title. OAA 306(a)(14)

BB) If it desires to provide directly any supportive, nutrition, or in-home services (as defined in Section 342) a waiver shall be requested as part of the Area Plan process and such request(s) will be evaluated based upon the following criteria--

- 1) provision of such services by the agency is necessary to assure an adequate supply of such services;
- 2) such services are directly related to the agency's administrative functions; or
- 3) such services can be provided more economically, and with comparable quality, by the agency.

OAA 307(a)(8)(A)

Exhibit 13 provides information needed to meet this assurance. Even though the Long-Term Care Ombudsman Program is a direct service provided by the Area Agency, no waiver is required because State statute (G.S. 143B-181.17) places the program in the Area Agency. The Division of Aging and Adult Services will not require a waiver request for direct provision of Information and Options Counseling (I&OC) or Outreach. OAA 307(a)(8)(C)

CC) It will complete Exhibit 5 to assure compliance with the 1987 Amendments to the Act, Section 712(g)(1)(ii) which requires that legal representation as well as consultation and advice be provided for the Regional Ombudsman. The assurance is required on an ongoing basis and is to be submitted as part of the Area Plan. OAA 712(g)(1)(ii)

DD) Each Regional Ombudsman reports regularly to the Office of State Long-Term Care Ombudsman about data collected and activities of the Regional Ombudsmen, provides information to the general public, and maintains documentation of the required Program duties. [42 U.S.C. §§ 3058g (5)(C)]; [G. S. 143B-181.19(3) (7) (9)]

EE) Each Regional Ombudsman performs mandated duties to identify, investigate, and resolve complaints made by or on behalf of long-term care residents [42 U.S.C. §§ 3058g (5)(B)(iii); G. S. 143B-181.19-.20]

FF) There is the provision of the required initial training for new Community Advisory Committee members; ongoing training for established community advisory committee members, and technical assistance to these community advisory committees in completion of the committees' reporting requirements [G. S. 143B-181.19 (8); Long-Term Care Ombudsman Program Policy and Procedures: Section 1506 (Q)]

GG) The Elder Abuse Prevention funds are used to provide public education and outreach services to identify and prevent abuse, neglect, and exploitation of older individuals, provide for receipt of reports of abuse, neglect, and exploitation, and the referral of complaints of older individuals to law enforcement agencies, public protective service agencies, licensing and certification agencies, ombudsman programs or other protection and advocacy systems as appropriate. [42 U.S.C. §§ 3058 (i)] Area Plan Goal 4 provides information needed to meet this assurance.

HH) It will notify the Division of Aging and Adult Services within 30 days of any complaints of discrimination or legal actions filed against the Area Agency or the Council of Governments in its treatment of applicants and employees. ECCAAA Policies and Procedures Manual, Section 302.

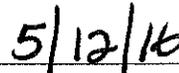
II) It will support the mission of the NC Senior Tar Heel Legislature in a manner prescribed by the Division of Aging and Adult Services and endorsed by the NC Association of Area Agencies on Aging. (G.S. 143B-181.55)

JJ) It will be in compliance with all other requirements stated in Section 306 of the 2006 Amendments to the Older Americans Act.

KK) It will submit further assurances to the NC Division of Aging and Adult Services in the event of any change and/or addition to the regulations, policies, and procedures governing the Area Agency on Aging and its Area Plan.



Area Agency Director's Signature



Date

Exhibit 3: Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, as Amended, and The disabilities Act of 1990

The Area Agency on Aging agrees to comply with Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794) and with the Americans with Disabilities Act of 1990.

Though the Area Agency on Aging will not make a survey of identifiable barriers to people with disabilities in the programs listed below, we do promise to follow a policy of "nondiscrimination against the handicapped" in providing or contracting for these services. If we find that present services or facilities provided by this agency or of those with whom we contract do discriminate against the handicapped, we promise, (1) first, to try to remedy the situation; (2) second, to contract with another provider that does not discriminate; or (3) third, if an alternative is not available or feasible, to find a comparable service for the handicapped person. If the last course (3) is chosen, we shall take steps to ensure that no additional costs are incurred by the handicapped person and that the service is both equally effective, affords equal opportunity, and does not segregate handicapped individuals such that they are in a more restrictive setting than non-handicapped persons receiving the same service.

The purpose of this agreement is to ensure that all services and facilities obtained from contracts made through local services agencies are readily accessible to and usable by persons with disabilities.

Judith G. Hill, E. Dir

Signature and Title of Authorized Official

May 12, 2016

Date

Exhibit 4: Assurance of Compliance with the Department of Health and Human Services Regulation under Title VI of The Civil Rights Act of 1964

The Area Agency on Aging (herein called the "Applicant") will comply with Title VI of the Civil Rights Act of 1964 (P.L.88-352) and all requirements imposed by or pursuant to the Regulations of the Department of Health and Human Services (45 CFR Part 80) issued pursuant to that title, to the end that in accordance with Title VI of that Act and Regulation, no person in the United States shall on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department; and hereby gives assurance that it will immediately take any measure necessary to effectuate this agreement.

If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. In all other cases, this assurance shall obligate the Applicant for the period during which the Federal financial assistance is extended to it by the Department.

This Assurance is given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts, property, discounts or other Federal financial assistance extended after the date hereof to the Applicant by the Department, including installment payments after such date on account of applications for Federal financial assistance which were approved before such date. The Applicant recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations agreements made in this assurance, and that the United States shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Applicant, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this assurance on behalf of the Applicant.


Signature and Title of Authorized Official

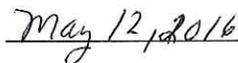

Date

Exhibit 5: Assurance of Legal Representation of Regional Ombudsman

Name and Address of Attorney/Firm:

Period of Time Covered by Contract:

Scope of Services: Pursuant to 2006 Amendments to the Older Americans Act, Section 712(g)
Division of Aging and Adult Services Administrative Letter 89-34

Key Elements of Contractual Agreement

Ensure that adequate legal counsel is available to each regional ombudsman for advice and consultation and that legal representation will be provided for the regional ombudsman against whom suit or other legal action is brought in connection with the performance of his/her official duties.

Ensure that the Office of Regional Ombudsman has the ability to pursue administrative, legal and other appropriate remedies on behalf of residents in long-term care facilities.

AGREED UPON BY:

Executive Director, Name of Council of Governments,

Date

Area Agency on Aging Director,

Date

Legal Representative, Name of Firm,

Date

Exhibit 6: Organizational Chart of Single Organizational Unit

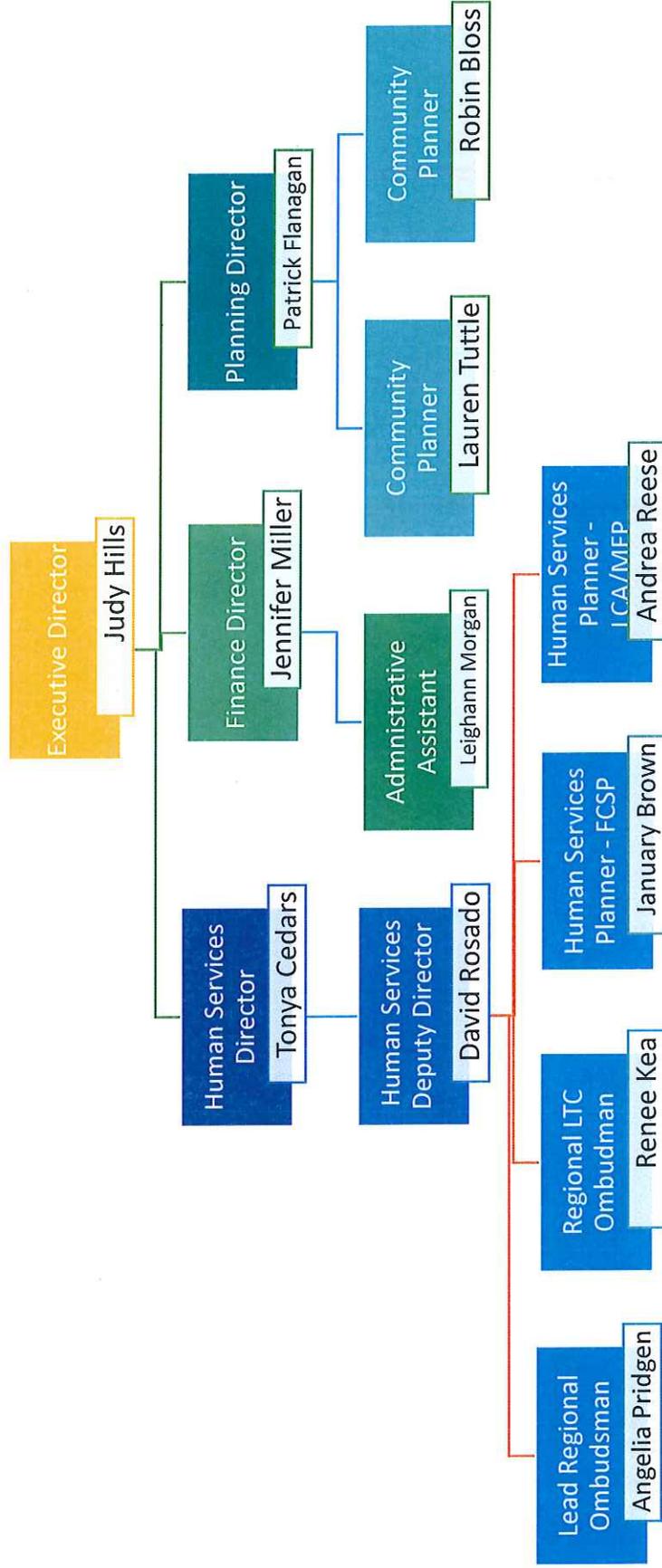


Exhibit 7: Organizations Chart of Area Agency on Aging

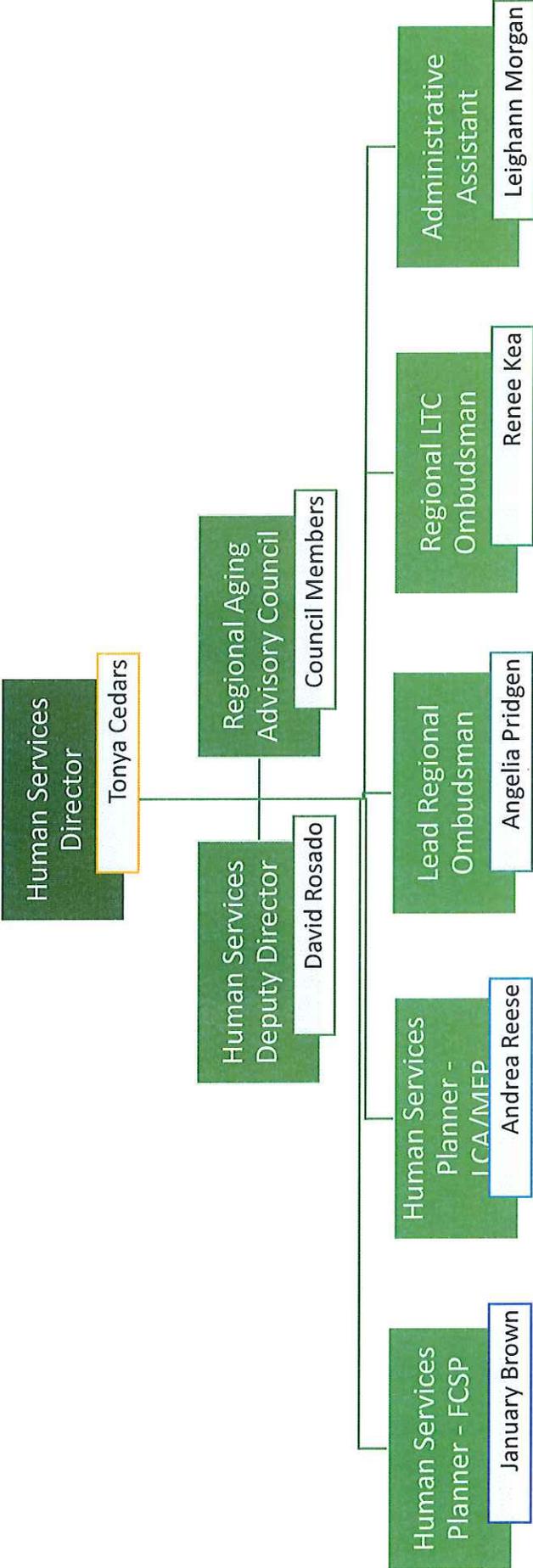


Exhibit 8: Area Agency on Aging Staffing List

	Name	Position	Race/Ethnicity	FTE/Temporary	List funding source	% of time spent on duties
1	Tonya Cedars	Human Services Director	5	1	P&A	100%
2	David Rosado	Deputy Dir. For Human Services	6	1	P&A Senate Bill	50% 50%
3	Angelia Pridgen	Lead Regional LTC Ombudsman	5	1	Ombudsman	100%
4	Renee Kea	Regional LTC Ombudsman	3	1	Ombudsman Elder Abuse P&A	66% 13% 21%
5	Andi Reese	Human Services Planner – LCA/MFP	5	1	LCA MFP FCSP P&A	50% 41% 5% 4%
6	January Brown	Human Services Planner - FCSP	5	1	FCSP	100%
7	Leighann Morgan	Human Service Specialist	5	.5	P&A, FSCP	50%

(Please submit the amended exhibit annually)

Race/Ethnicity Categories:

1. American Indian or Alaskan Native (Alone)
2. Asian (Alone)
3. Black/African American (Alone)
4. Native Hawaiian or Pacific Islander (Alone)
5. Non-Hispanic White (Alone)
6. White Hispanic (Alone)
7. Some Other Race
8. Two or More Races

Exhibit 9: Regional Advisory Council Membership and Participation

Complete the list of current members of the Regional Advisory Council as indicated below.

Name		Gender	County	Position Code(s)	Organizational Affiliation(s)
Last	First				
Yurko	Louis	F	Carteret	2,5,6	
Thompson	John	M	Carteret	2,6	
Williams	Lavick	M	Craven	2,3,6	
Bland	Carolyn	F	Craven	1,2,3,6	
Pittman	Thomas	M	Craven	2, 6	
Grubbs	Darrell	M	Duplin	2,6	
Grubbs	Donna	F	Duplin	2,6	
Bryant	Geraldine	F	Duplin	2,3,6	
Jones	David	M	Greene	1,2,3,6	
Taylor	Faye	F	Greene	2,6	
Garner	Jean	F	Greene	2,6	
Ancrum	Della	F	Jones	1,2,3,6	
Burton	Gladys	F	Jones	1,2,3,6	
Brinkley	Matthew	M	Jones	2,3,6	
LaRoque	Walter	M	Lenoir	2, 6	
Tyson	Audrey	F	Lenoir	2,6	
Patterson	Elaine	F	Lenoir	1,2,3,6	
DuPlevich	Joyce	F	Onslow	2,6	
DeLa Vega	Steve	M	Onslow	2,3,6	
Zima	Marge	F	Onslow	2,6	
Gracie	Joan	F	Pamlico	2,6	
Mason	James	M	Pamlico	2,3,6	
Midgette	Angelo	M	Pamlico	2,3,6	
Harper	Linda	F	Wayne	2,6	
Ford	Jimmie	M	Wayne	2,6	
McLamb	Yvonne	F	Wayne	2,6	

<u>Position Code#</u>	<u>Description</u>
#1	Recipient of Older Americans Act Services
#2	Person age 60 or older
#3	Non-white person
#4	Person representing Veteran's Affairs
#5	Chairperson of the Council
#6	Resident of rural area
#7	Family caregiver of older person
#8	Service provider
#9	Representative of business community

How many times did the Regional Advisory Council meet during the past full state fiscal year? 4

Exhibit 10: Focal Point Organization

Designated Focal Point Agency			Check if		
Name/Address	County	Multipurpose Senior Center	Community Action Program	Other	
Carteret Senior Services	Carteret	X			
Craven Department of Social Services	Craven			X	
Duplin Services for the Aged	Duplin	X			
Greene Senior Services	Greene	X			
Jones County Department of Social Services	Jones			X	
Lenoir County Council on Aging	Lenoir	X			
Onslow Senior Services	Onslow	X			
Pamlico Senior Services	Pamlico	X			
Wayne Services on Aging	Wayne	X			

Exhibit 11: Documentation of Area Agency on Aging Public Hearing

N/A

Exhibit 12: Needs Assessment Regional Summary
 Top 3 inadequately met needs in the each county

County	1 st Need	2 nd Need	3 rd Need
Carteret	Community-based services	Housing	Transportation
Craven	Community-based services	Transportation	Housing
Duplin	Housing	Long Term Care	Finances or income
Greene	Housing	Transportation	Medical Care or Treatment
Jones	Transportation	Housing	Medical Care or Treatment
Lenoir	Safety and Security	Caregiving	Community-based services
Onslow	Finances or income	Transportation	Caregiving
Pamlico	Transportation	Housing	Caregiving
Wayne	Community-based services	Finances or income	Long Term Care

Exhibit 13: Provision of Direct Services – Waiver Request

1. Name of the Organization: Eastern Carolina Council Area Agency on Aging Fiscal Year: 2017

2. Summary of Service Information:

Client Directed Care respite Voucher Services and Supplemental services are arranged directly by ECCC ECCAAA. ECC ECCAAA administers through the waiver are for those caregivers requesting services that existing partners are unable to provide.

Name of Service	Service Code	Affected Counties	Nature of Request	
			New	Continuation
III-E Client Directed Services Respite Vouchers	844/846/847	All		X
III-E Supplemental Services	850's	All		X

By signing below the ECCAAA Director is affirming that affected local interest (e.g.; Board of County Commissioners, local HCCBG planning committee) agree with this plan for services.



Area Agency on Aging Director

5/12/16

Date

Provision of Direct Services (Continued)

The information requested below is required for **each service** that the Area Agency on Aging requests approval to provide directly.

Name of the Organization: Eastern Carolina Council Area Agency on Aging

1. Name of Service: Client Directed Services Respite Vouchers (CDSRV)

Service Code: 844/846/847

FY: 16-17

Budget: For non-unit activities (including health promotion, medication management, senior center general purpose, Housing and Home Improvement, and the family caregiver support program), attach a line-item budget identifying all personnel involved, salaries, fringe, travel, equipment, indirect cost rate, and other expenses.

For Unit-producing activities, funded by the HCCBG, attach the Provider Services Summary (DOA-732) and the Service Cost Computation Worksheet (DOA-732A) and the Labor Distribution Worksheet (DOA-732A1).

Complete and attach Form DOA-733 describing the method for targeting low-income minority and rural persons.

Describe the efforts made to cultivate new or existing contractors to provide this service, the results to date, and plans for the upcoming year: ECCAAA has effectively expanded the CDSRV throughout the region over the last couple of years from providing vouchers for 7 of the 9 counties to only providing direct service vouchers for 1 county. Partner agencies within the 8 counties that are in direct service for CDSRV have assumed the role once provided by ECCAAA. CDSRV managed by ECCAAA are provided directly to the caregiver while in situations where institutional respite is required ECCAAA will coordinate needed services with the facility and caregiver. ECCAAA will continue to work with the funded providers in meeting the needs of caregivers.

For non-unit producing activities only (item #1A above) provide a brief narrative of the planned service and activities: All activities described above will be reported in ARMS by unit appropriate to service type.

2. Name of Service: Supplemental Services

Service Code: 850's

FY: 16-17

Budget: For non-unit activities (including health promotion, medication management, senior center general purpose, Housing and Home Improvement, and the family caregiver support program), attach a line-item budget identifying all personnel involved, salaries, fringe, travel, equipment, indirect cost rate, and other expenses.

For unit-producing activities, funded by the HCCBG, attach the Provider Services Summary (DOA-732) and the Service Cost Computation Worksheet (DOA-732A) and the Labor Distribution Worksheet (DOA-732A1).

Complete and attach Form DOA-733 describing the method for targeting low-income minority and rural persons.

Describe the efforts made to cultivate new or existing contractors to provide this service, the results to date, and plans for the upcoming year: Supplemental services arranged directly by ECCAAA in the event that services contracted with the primary provider of respite care in the county of the clients residence is not able to provide services to meet the needs of the caregiver.

For non-unit producing activities only (item #1A above) provide a brief narrative of the planned service and activities: All activities described above will be reported in ARMS by unit appropriate to service type.



Area Agency on Aging Director

5/12/16

Date

Approved Not Approved
(Circle one)

Director, NC DAAS

Date

Home and Community Care Block Grant for Older Adults

County Funding Plan

July 1, 2016 through June 30, 2017

Methodology to Address Service Needs of Low Income (Including Low-Income Minority Elderly), Rural Elderly and Elderly with Limited English Proficiency

(Older Americans Act, Section 305(a)(2)(E))

Community Service Provider Eastern Carolina Council Area Agency on Aging

County Craven, Pamlico, Wayne, Duplin, Greene, Carteret, Lenoir, Onslow, Jones

The Older Americans Act requires that the service provider attempt to provide services to low-income minority individuals in accordance to their need for aging services. The community service provider shall specify how the service needs of low income, **low-income (including low income minority elderly), rural elderly and elderly with limited English proficiency** will be met through the services identified on the Provider Services Summary (DOA-732). This narrative shall address outreach and service delivery methodologies that will ensure that this target population is adequately served and conform with specific objectives established by the Area Agency on Aging, for providing services to low income minority individuals. Additional pages may be used as necessary.

Client directed services are arranged directly by ECCAAA in the event that services contracted with the primary provider of respite care in the county of the client's residence is not able to provide services appropriate to the needs of the care recipient.

The waiver is safety net for those caregivers residing in unserved or underserved areas of the region and ensures that they are served. Additionally, the waiver allows ECCAAA to help caregivers who do not participate in the traditional service system and often times this is our rural, low-income and limited English speaking populations.

ECCAAA conducts outreach in all counties through the annual events that hosted by service providers. We also conduct larger media campaigns and work through churches and other grassroots organizations to reach targeted populations.

Provision of Direct Services (Continued) Provision of Direct Services Line-Item Budget			
Region: P Eastern Carolina Council Area Agency on Aging			
Name of Service:	FCSP	HP/DP	Other
Revenue			
Federal/State Allocation	\$251,273		
Local Match In-Kind			
Other			
Total Revenue	\$251,273	\$0.00	\$0.00

Expenses			
Salary	\$60,682		
Fringe Benefits	\$16,209		
Other			
<i>Subtotal</i>	<i>\$76,891</i>		
<i>Indirect</i>			
Indirect	\$33,063		
Other			
<i>Subtotal</i>	<i>\$33,063</i>	<i>\$0.00</i>	<i>\$0.00</i>
<i>Direct Cost</i>			
Communication (phone, internet)	\$6,318		
Travel	\$2,803		
Supplies	\$2,700		
Materials			
Outreach Activities	\$300		
Other	\$7,848		
<i>Subtotal</i>	<i>\$19,969</i>	<i>\$0.00</i>	<i>\$0.00</i>
**Direct Service Cost (Service Directly Provided to the Clients)			
Respite	\$2,000		
Supplemental Services	\$500		
Grandparents Raising Grandchildren	\$850		
Allocation to be distributed to counties	\$118,000		
<i>Subtotal</i>	<i>\$121,350</i>	<i>\$0.00</i>	<i>\$0.00</i>
Total Expenses	\$251,273	\$0.00	\$0.00

Personnel	
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Name of Personnel	January Brown
Position/Title:	Human Services Provider
% of time worked	100%

Provide a description below or attach a budget narrative of supplies, materials, travel, salary, fringes, FT/PT staff, title, % of hours worked.

- Travel: mileage and per diem
- Communication: Telephone, postage, broadband, system administration
- Supplies: supplies and copier
- Other: rent, training, program services
- Outreach: printing and publication

****Example Direct Service**

Direct Service (for example, how much specifically in respite, supplemental or counseling and education will be kept and administer to specific Caregiver services), Respite \$15,000 (30@500 Vouchers), Supplemental \$10,000

Appendix A: Provider Monitoring Plan (Exhibit 14) and List of Subcontractors (Exhibit 14A)

A. Prov. Code	B. Community Service Providers & Funded Services	C. Counties Served	D. Monitoring Agency*	E. Schedule for Programmatic Review**					F. Schedule for Unit Verification***					G. Schedule for Fiscal Review****					
				16/17	17/18	18/19	19/20	16/17	17/18	18/19	19/20	16/17	17/18	18/19	19/20				
070	Carteret Senior Services																		
	- Home Delivered Meals	Carteret	ECCAAA-3	X			X				X					X			
	- Congregate Nutrition	Carteret	ECCAAA-3	X			X				X					X			
	- Senior Ctr. Ops	Carteret	ECCAAA		X		X												
	- General Transp.	Carteret	ECCAAA-3		X		X				X					X			
	- Evidence Based Health	Carteret	ECCAAA	X	X		X												
016	DSS																		
	- In Home LV II	Carteret	ECCAAA-3			X					X								
090	Coastal Community Action																		
	- Senior Companion	Carteret	ECCAAA			X					X					X			
	- Family Caregiver Program	Carteret	ECCAAA	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
	- Medical Transportation	Carteret	ECCAAA		X						X					X			
045	-Legal Aid of NC – New Bern																		
	- Legal	Carteret	ECCAAA	X			X				X					X			

*Identifies assessment responsibilities for the Area Agency on Aging (ECCAAA) and the NC Division of Aging and Adult Services (DAAS). If the ECCAAA is the monitor and there is both a provider and subcontractor(s) to be monitored, insert one of the following codes to indicate how subcontractor(s) will be monitored: ECCAAA-1 = ECCAAA will monitor subcontractor, ECCAAA-2 = provider will monitor subcontractor, ECCAAA-3 = both ECCAAA and provider will monitor subcontractor.

Scheduled as needed but at least once every three years; * Scheduled as needed but at least every other year; **** Scheduled as warranted by annual risk evaluations.

A. Prov. Code	B. Community Service Providers & Funded Services	C. Counties Served	D. Monitoring Agency*	E. Schedule for Programmatic Review**			F. Schedule for Unit Verification***			G. Schedule for Fiscal Review****			
				16/17	17/18	18/19				16/17	17/18	18/19	
020	Craven DOT (CARTS) - General Transportation	Craven	ECCAAA		X				X				
025	DSS - In Home LV II - In Home LV III - Care Management - Family Caregiver Program - Cong Nutrition - HDM - Evidence Based Health	Craven	ECCAAA-3 ECCAAA-3 ECCAAA ECCAAA ECCAAA-3 ECCAAA-3 ECCAAA		X X X X X X X				X X X X X X				
045	Legal Aid of NC – New Bern - Legal	Craven	ECCAAA	X					X				
090	Coastal Community Action - Senior Companion - Family Caregiver Program	Craven Craven	ECCAAA ECCAAA		X X					X			
003	Havelock Senior Center - Congregate Nutrition	Craven Craven	ECCAAA ECCAAA-3	X					X				

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A. Prov. Code	B. Community Service Providers & Funded Services	C. Counties Served	D. Monitoring Agency*	E. Schedule for Programmatic Review**				F. Schedule for Unit Verification***				G. Schedule for Fiscal Review****							
				16/17	17/18	18/19	19/20	16/17	17/18	18/19	19/20	16/17	17/18	18/19	19/20				
040	DSS																		
	- In Home LV II	Greene	ECCAAA-3		X						X								
	- In Home LV III	Greene	ECCAAA-3		X						X								
	-Family Caregiver Program	Greene	ECCAAA	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
080	Senior Services																		
	- Congregate Nutrition	Greene	ECCAAA-3		X						X								
	- Home Delivered Meals	Greene	ECCAAA-3		X						X								
	- Senior Center Ops	Greene	ECCAAA		X														
	- Evidence Based Health	Greene	ECCAAA	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
	- Senior Center Long-Term	Greene	ECCAAA	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
032	-Legal Aid of NC – Wilson	Greene	ECCAAA	X							X								
	- Legal																		

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A. Prov. Code	B. Community Service Providers & Funded Services	C. Counties Served	D. Monitoring Agency*	E. Schedule for Programmatic Review**				F. Schedule for Unit Verification***				G. Schedule for Fiscal Review****							
				16/17	17/18	18/19	19/20	16/17	17/18	18/19	19/20	16/17	17/18	18/19	19/20				
052	DSS																		
	-In Home LVII	Jones	ECCAAA-3		X						X								
	- Congregate Nutrition	Jones	ECCAAA-3	X							X								
	- Home Delivered Meals	Jones	ECCAAA-3	X							X								
	- Evidence Based Health	Jones	ECCAAA				X												
	- Senior Center Long-Term	Jones	ECCAAA																
045	-Legal Aid of NC – New Bern	Jones	ECCAAA	X							X								
	- Legal		ECCAAA																
090	Coastal Community Action																		
	- Senior Companion	Jones	ECCAAA		X						X								
	- Family Caregiver Program	Jones	ECCAAA	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
020	Craven DOT (CARTS)																		
	- General Transportation	Jones	ECCAAA					X											

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Scheduled as needed but at least once every three years; * Scheduled as needed but at least every other year; **** Scheduled as warranted by annual risk evaluations.

A. Prov. Code	B. Community Service Providers & Funded Services	C. Counties Served	D. Monitoring Agency*	E. Schedule for Programmatic Review**				F. Schedule for Unit Verification***				G. Schedule for Fiscal Review****							
				16/17	17/18	18/19	19/20	16/17	17/18	18/19	19/20	16/17	17/18	18/19	19/20				
085	Senior Services																		
	- Medical Transportation	Onslow	ECCAAA		X						X								
	- General Transportation	Onslow	ECCAAA		X						X								
	- Adult Day Care	Onslow	ECCAAA	X							X								
	- In Home Aide LV II	Onslow	ECCAAA		X						X								
	- In Home Aide LVIII	Onslow	ECCAAA		X						X								
	- Congregate Nutrition	Onslow	ECCAAA-3	X							X								
	- Home Delivered Meals	Onslow	ECCAAA-3	X							X								
	- Evidence Based Health	Onslow	ECCAAA	X	X						X								
	- Family Caregiver Program	Onslow	ECCAAA	X	X						X	X							
026	Legal Aid of North Carolina - - Legal	Wayne	ECCAAA	X							X								

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A. Prov. Code	B. Community Service Providers & Funded Services	C. Counties Served	D. Monitoring Agency*	E. Schedule for Programmatic Review**					F. Schedule for Unit Verification***			G. Schedule for Fiscal Review****							
				16/17	17/18	18/19	19/20	16/17	17/18	18/19	19/20	16/17	17/18	18/19	19/20				
004	Pamlico Senior Services																		
	- Home Delivered Meals	Pamlico	ECCAAA-3	X						X									
	- Congregate	Pamlico	ECCAAA-3	X						X									
	- Evidence Based Health	Pamlico	ECCAAA	X	X		X												
	-Senior Center Ops	Pamlico	ECCAAA	X			X												
069	Pamlico DSS																		
	- In Home LV II	Pamlico	ECCAAA	X			X							X					
	- In Home LVIII	Pamlico	ECCAAA	X			X							X					
045	-Legal Aid of NC – New Bern	Pamlico		X			X							X					
	- Legal	Pamlico	ECCAAA	X			X							X					
090	Coastal Community Action																		
	- Family Caregiver Program	Pamlico	ECCAAA	X	X		X							X	X				

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Monitoring by Program and Fiscal year

FY 16-17

- Congregate Nutrition
- Home Delivered Meals
- House/Home Improvements
- Evidence Based Health Promotion
- Family Caregiver Program

FY 17-18

- In-Home Services I, II, III, IV
- Adult Day Care/Day Health
- Group Respite
- House/Home Improvements
- Senior Companion
- Evidence based Health Promotion
- Family Caregiver Program

FY 18-19

- Information and Assistance
- Transportation
- House/Home Improvements
- Evidence based Health Promotion
- Family Caregiver program

FY 19-20

- Congregate nutrition
- Home Delivered meals
- House/Home Improvements
- Evidence Based health Promotion
- Family Caregiver Program