

2011-2011 AREA PLAN UPDATE (APU) CHECKLIST

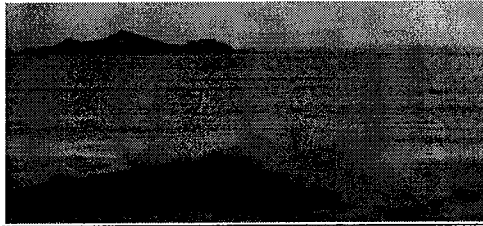
Section	Three-Year Area Plan Update Components	Annual Update
	REQUIRED	
	Original APU	<input type="checkbox"/>
	Transmittal Letter with authorized signatures or official stamp	<input checked="" type="checkbox"/>
	All APU documents are on single-sided paper, if submitted hard copy	<input checked="" type="checkbox"/>
5	Organization Chart	<input checked="" type="checkbox"/>
9	Public Hearings	<input checked="" type="checkbox"/>
	REQUIRED only if changed or not previously included in the Area Plan	
2	Description of the Planning and Service Area (PSA)	<input checked="" type="checkbox"/>
3	Description of the Area Agency on Aging (AAA)	<input checked="" type="checkbox"/>
6	Planning Process	<input checked="" type="checkbox"/>
7	Needs Assessment Must be conducted at least once during the Area Plan cycle	<input checked="" type="checkbox"/>
10	Identification of Priorities	<input type="checkbox"/>
11	Goals and Objectives: (May be updated at any time and need not conform to a twelve month time frame)	
	^ Title III B Funded Program Development (PD) Objectives	<input checked="" type="checkbox"/>
	^ Title III B Funded Coordination (C) Objectives	<input checked="" type="checkbox"/>
	System-Building and Administrative Goals & Objectives	<input checked="" type="checkbox"/>
	Title III B/VIIA Long-Term Care Ombudsman Objectives	<input checked="" type="checkbox"/>
	Title VII B Elder Abuse Prevention Objectives	<input checked="" type="checkbox"/>
12	* Service Unit Plan (SUP) Objectives	<input type="checkbox"/>
13	Focal Points	<input checked="" type="checkbox"/>
14	Priority Services	<input type="checkbox"/>
15	Notice of Intent to Provide Direct Services	<input type="checkbox"/>
16	Request for Approval to Provide Direct Services	<input type="checkbox"/>
17	Governing Board	<input checked="" type="checkbox"/>
18	Advisory Council	<input checked="" type="checkbox"/>
19	Legal Assistance	<input type="checkbox"/>
21	Title III E Family Caregiver Support Program	<input type="checkbox"/>

^ Required if PD and/or C are funded with Title III B

* AAAs will not submit SUP Objectives for the 2010-11 APU for Community Based Service Programs: Alzheimer's Day Care Resource Centers, Linkages, Senior Companion, Brown Bag, and Respite Purchase of Service

**PSA 8 San Mateo County Area Agency on Aging
Aging and Adult Services Strategic Plan Update FY 2011-12**

Changes in Description of Planning and Service Area 8



Unique Resources and Constraints

Healthy Aging Response Team (HART)

HART, a project of Adults Community Connecting, Education, Service and Support (ACCESS), was launched on April 5, 2010. HART is an innovative non-emergency, volunteer-based community initiative that promotes and supports the health and well-being of underserved older adults and persons with disabilities in Daly City. HART, along with the Aging and Adult Services (AAS) TIES Line, San Mateo County's 24-hour information and emergency response line, provides a safety-net of protection, information and support for older adults, people with disabilities, dependent adults, and caregivers and assists them in accessing services.

In the inception of HART, twenty-one volunteers received 30 hours of comprehensive training in February 2010 to answer phone calls from Daly City residents seeking information about services for older adults and people with disabilities. AAS and Behavioral Health and Recovery Services (BHRS) County staff provided training on their specific information and referral services, as well as how to respond to callers in need. Since April 2010, HART has fielded over 350 calls, proving to be a successful and necessary program in San Mateo County. Funding for a Volunteer Coordinator was received, but was only enough to last through February 2011. However, additional funding has been received to provide a second training of additional volunteers. Funding opportunities to sustain the program are currently being explored. AAS staff continues to provide technical assistance to ACCESS on the implementation of HART.

211 in San Mateo County

211 provides free confidential, and multi-lingual information, advocacy, resources and support to connect people to community services 24-hours a day. In October 2010, a pilot of the 211 system was initiated in San Mateo County. Due to the success of the pilot, the 211 system was made accessible to the public on February 11, 2011. With the

PSA 8 San Mateo County Area Agency on Aging Aging and Adult Services Strategic Plan Update FY 2011-12

addition of San Mateo County, there will now be 12 counties served by the 211 Bay Area network. County residents will have quick and easy access to trained specialists who will link the callers to available health and human services in the community. The Commission on Aging (CoA) and AAS staff have been involved in planning the implementation of 211 in San Mateo County, most specifically in determining how 211 will interface with the TIES Line.

Changes in Description of the Area Agency on Aging



Congregate Meals

As of July 2010, a congregate meal and Brown Bag provider in Daly City that served mostly an Asian population had to close its doors due to insufficient resources. The provider also has a site in San Mateo and several in San Francisco (SF). AAS, the affected provider, and other local providers met to develop a plan for the existing clients to ensure continuation of services. This included the decision to have a community meeting at the site to inform congregate and Brown Bag participants of the upcoming changes. Congregate clients were given information about other provider sites in San Mateo and SF counties. Brown Bag participants were informed of a provider site in Daly City. It was anticipated that the congregate clients in Daly City would go to one of the provider's SF sites because of the proximity of the locations to the closed center and because they serve the Asian community.

To date, a few Daly City congregate participants have begun attending services at the San Mateo site and many of the Brown Bag clients are being served at another site in Daly City. Another Brown Bag site is being opened in Daly City in April 2011 at the United Methodist Church, located in the vicinity of the St. Andrew site. Thirty people have registered to date and the site currently has a capacity for a hundred. It is expected that the site will be filled to capacity due to the number of Brown Bag participants from St. Andrew that did not register at another site since the closure. These participants are currently being contacted to register them for the new site.

As a cost savings mechanism, another congregate provider has shortened its hours of operation. The site opens a half an hour earlier and closes two hours earlier. There has been no negative affect on the population being served, as they tend to attend the center early in the day. Due to continued fiscal concerns, this provider is anticipating closing for an additional day during the week, bringing their meal service days to three days per week. Participants are being notified of the modifications in the lunch program through flyers, signage at the center, notification in their newsletter, and discussions with volunteers and staff. Participants have been made aware verbally of other sites, and this information will be included in the newsletter as well.

PSA 8 San Mateo County Area Agency on Aging Aging and Adult Services Strategic Plan Update FY 2011-12

Meals on Wheels (MOW) and Supplemental Meals on Wheels (SMOW)

The congregate provider mentioned above that closed one of their sites is also a MOW provider that serves mainly the Asian community in San Mateo and Daly City. Toward the end of FY 2009, in an attempt to preserve the delivery of a hot meal from both sites, the provider communicated with their Daly City MOW recipients about the need to increase the amount of donations that were received. The letter was well received and resulted in a slight increase in some recipients' donations. Unfortunately, the increase in donations was not sufficient to mitigate the provider's ongoing fiscal challenges resulting in a switch to a frozen meal delivery once a week for clients in Daly City. In order to continue to provide cost-efficient meals, the provider started delivery of frozen meals from a vendor they currently have that provides meals in SF. With the switch, ethnic meals geared toward the Asian clients were no longer feasible. The provider has stated that a few participants like the ease of a frozen meal delivery once a week; however; overall, clients are missing the daily hot ethnic food delivery, as well as the daily contact with volunteer drivers.

Alzheimer's and Adult Day Care

Starting in July 2010, funding has been shifted from the Alzheimer's Day Care program to better support the Adult Day programs. This was a decision made by AAS staff and community providers. Providers with dual funding were given the choice to keep funding sources separate, however, all of the providers decided to shift their funds to Adult Day Care. This affords participants the ability to receive scholarships to cover their day of service and allows for more targeting of those participants that need the services the most.

Medicare Improvements for Patients and Providers Act (MIPPA)

MIPPA was signed into law on July 15, 2008, encompassing significant changes and opportunities for Medicare beneficiaries, particularly those who are low income. For FY 2010-11, PSA 8 was recognized by the State for being at 362% of our goal with 408 Low Income Subsidy or Medicare Savings Programs (MSP) applications having been completed. This success rate was largely due to collaboration between the Health Plan of San Mateo (HPSM), AAS, and the Health Insurance Counseling and Advocacy Program (HICAP) contractor to identify individuals who could potentially benefit from the MSP. HPSM is the County's Organized Health System, which is a mixed model managed-care health plan that serves the most vulnerable residents of the County under a Medi-Cal managed care program.

PSA 8 San Mateo County Area Agency on Aging Aging and Adult Services Strategic Plan Update FY 2011-12

Organizational Changes within AAA and AAS

Organizational Chart

An updated organizational chart for San Mateo County Health System and AAS is attached. The County's Human Resources Department conducted a Countywide Classification Study of the Community Program Specialist Series, with a Final Recommendation Report released in August of 2010. This led to eight staff in AAS in the Community Program Specialist I, II, and III positions being reclassified on October 31, 2010 to a Community Program Analyst I and II, Community Program Supervisor, and Community Program Coordinator I positions. Of these eight positions, five were in the Commission and Provider Services Unit (CPSU), which administers the Older American's Act.

As a result of budget reductions, a vacant Community Program Analyst I position was deleted in CPSU for 2010-11.

Collaboration for MOW Assessments

For the past two and a half years, AAS has collaborated with San Francisco State University's - School of Nursing and the Samuel Merritt School of Nursing, to offer an opportunity for nursing students to gain experience completing reassessments for MOW during their fall and spring semesters. Quarterly MOW reassessments determine the continued need for the service, and in-home reassessments are required every other quarter. The experience of completing in-home reassessments allowed student nurses to gain experience establishing rapport with MOW participants and provided an opportunity for AAS to assess if a participant requires greater intervention. When completing the reassessments, the student nurses were trained to be aware of any deficits the participant may have, such as being hard of hearing. Aside from the nutritional risk, activities of daily living (ADLs), and instrumental activities of daily living (ADLs) questions, nursing students were asked to obtain a list of current medications as well as medical diagnoses. The student nurses also assessed the living situation. Activities such as observing what conditions exist for food preparation and looking in the refrigerator to see what accommodations exist for the heating/reheating of food are required. After reviewing the in-home reassessment information, an Adult Protective Services (APS) referral is made as appropriate.

In addition to the reassessments listed above, in FY 2010-11, AAS collaborated with other divisions in the Health System and Stanford University's Medical Center to have student nurses trained to also conduct a fall risk assessment. The assessment includes taking the participants blood pressure while standing and sitting. A chair stand test is also conducted to test the functional fitness of the MOW program participant. The test consists of the participant repeatedly standing completely upright and then sitting down for 30 seconds. The total number of complete chair stands are counted, scored, and compared on a table that lists the recommended ranges for the test based on age

PSA 8 San Mateo County Area Agency on Aging Aging and Adult Services Strategic Plan Update FY 2011-12

groups starting from age 60, with separate tables for men and women. In conducting the risk assessments, many of the MOW participants were found to be at risk for falling. Participants at risk for falling are referred to Stanford's Farewell to Falls Program (FTF), which is a free home-based program with an emphasis on medication review, home safety assessment/modification, home exercise, and other health factors. Eligibility is open to residents of San Mateo County, who are over the age of 60, reside in independent living situations, are ambulatory, have the cognitive ability to participate in the program, and are not in hospice. FTF program participants receive two home visits by a registered occupational therapist. The occupational therapist gathers information on health history/ADLs, completes a balance/mobility assessment, ensures that all medications are reviewed by a Stanford pharmacist, completes a home safety survey, recommends fall risk reduction methods, and introduces an exercise program. A third visit is made one year after enrollment. AAS would seek appropriate referrals for MOW participants that are not eligible for the FTF program. To date in FY 10-11, approximately 40 MOW reassessments have been conducted and 30 referrals have been made to FTF. Approximately 15 of the total referrals have indicated a desire to be enrolled in the fall prevention program.

Long-Term Care Integration (LTCI)

The planning for San Mateo County's long-standing vision for Long-Term Care Integration (LTCI) has made great strides over the past year. The San Mateo County Health System (SMCHS) and HPSM have worked closely with the State to develop this innovative system of service delivery.

The goal of LTCI is to provide integrated person-centered care, which would lead to improved health and quality of life for seniors and people with disabilities across the County. By allowing greater access to home- and community-based services, it is expected that lower numbers of people will be moving to nursing homes prematurely.

The core concepts of LTCI are to:

- 1) Emphasize home- and community-based services to allow individuals to remain in a community setting
- 2) Consolidate preventative, acute, long-term care, and home- and community-based services and funding
- 3) Allow more local control and flexibility
- 4) Eliminate administrative duplication and complexity
- 5) Enhance assessment, care planning, and medical management
- 6) Establish smooth and appropriate transitions between levels of care
- 7) Reinvest savings back into San Mateo County
- 8) Improve service delivery and access to care

Over the years, major milestones have been reached. For instance, AAS and HPSM have agreed that improving the health- and social-service delivery system is a priority. Also, AAS and HPSM convinced the State that the current model of care is

PSA 8 San Mateo County Area Agency on Aging Aging and Adult Services Strategic Plan Update FY 2011-12

unsustainable and that integrated care is necessary for older adults and people with disabilities.

In the last year, the State received approval for a Medicaid 1115 waiver (Bridge to Reform), which will allow for greater flexibility in service delivery. Ongoing collaboration with State representatives have allowed for continued LTCI planning efforts by SMCHS and HPSM. Work groups which include members from SMCHS and HPSM have been developed to build strategy and focus attention on specific areas of the local LTCI model. Work groups to develop details of the LTCI referral and intake process; the Care Coordination Unit; the use of the San Mateo County Uniform Assessment Tool; financing options; and stakeholder outreach have been meeting regularly. Each group is responsible for consulting with other key representatives within SMCHS and HPSM to utilize best practices in LTCI. Most recently, efforts to inform and receive public comment on the LTCI model are being planned via a public stakeholder forum. This forum will allow SMCHS and HPSM to present information on LTCI as well as understand any concerns and suggestions from consumers, medical- and social-service providers, as well as other community residents.

The planning for LTCI has been intensive, and the program is expected to begin in January 2012. Other collaborators across the system of care include the Ron Robinson Senior Care Center, San Mateo Medical Center (SMMC), BHRS to assist those with mental health or addiction issues, and the Hospital Consortium of San Mateo County, which consists of six participating local hospitals, some with associated skilled nursing facilities.

LTCI Learning Sessions

Learning Sessions have been offered to AAS staff since October 2010 since LTCI will create a transformation in the delivery of services for seniors and adults with disabilities. The purpose of the sessions is to:

- 1) Create a learning environment regarding LTCI
- 2) Enhance opportunities for dialogue, discussion, and planning regarding the implementation of LTCI
- 3) Establish a shared understanding and language related to the concept of LTCI
- 4) Engage AAS staff in making long-term care integration a reality

Goals of the sessions are to:

- 1) Expand awareness of key concepts and initiatives related to LTCI
- 2) Provide opportunities to learn about long-term integration efforts at the national, state, and local levels
- 3) Learn from other stakeholders potentially impacted by the implementation of LTCI

PSA 8 San Mateo County Area Agency on Aging Aging and Adult Services Strategic Plan Update FY 2011-12

A total of four sessions have been completed. Staff participation has been impressive and consistent. Future sessions will focus on core concepts around LTCI and details of what intake, uniform assessment and care coordination will entail.

High Utilizers' Group (HUG) Project

In accordance with the LTCI vision and to serve as a pilot of LTCI's full implementation, a proposal was submitted to the Gordon and Betty Moore Foundation in April 2010 to fund the HUG project. The goal of HUG is to improve the quality, cost efficiencies and outcomes for the highest service utilizers of the SMMC. The project is a collaboration of AAS, HPSM and SMMC. Three years of funding in the amount of \$360,000 per year was awarded by the Betty Moore Foundation.

The targeted enrollees for the HUG project are:

- Adult members/clients who are insured/covered by HPSM via its CareAdvantage (MediCal/Medicare duals) line of business
- HPSM members receiving services through AAS' IHSS program and may also be clients of BHRS

The goals of HUG are to:

- 1) Improve the quality of care, patient experience and appropriate use of services for enrollees
- 2) Reduce the costs of care via regular, coordinated care management (Interdisciplinary Teams)
- 3) Decrease duplication of services among multiple service agencies and increase proactive preventive clinical care
- 4) Increase member/client and medical provider knowledge of the county system of care that is available to serve frail, elderly members/clients by engaging medical providers through this project
- 5) Achieve results that are sufficient to demonstrate to HPSM the value (quality, fiscal, patient satisfaction/outcome) of financially sustaining the program via staff support after grant funding ends

Uniform Assessment Tool

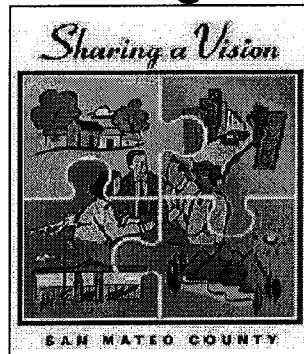
The Public Guardian/Public Conservatorship (PG) program provides services to frail elderly and adults with physical or mental disabilities who are unable to provide for their health care, basic needs and/or management of their own finances. To accurately assess medical and psychosocial needs as well as to ensure careful administration of conservatees' funds, a new procedure has been implemented in FY 2010-11 for those who receive home-health care services in their own home. An AAS public health nurse completes a Uniform Assessment Tool (UAT) to understand a number of demographic, social, cognitive, behavioral, functional and clinical measures that reflect the various needs of the population served by AAS. The additional use of the UAT in the PG creates a strong partnership with the public health nurses and the deputy public

**PSA 8 San Mateo County Area Agency on Aging
Aging and Adult Services Strategic Plan Update FY 2011-12**

guardians that allow conservatees to receive the most appropriate care for their needs. A more elaborate explanation of the use of the UAT is provided in the LTCI section of the area plan, page 5.

**PSA 8 San Mateo County Area Agency on Aging
Aging and Adult Services Strategic Plan Update FY 2011-12**

The Planning Process Establishing Priorities



Planning Process

AAS staff continues to work with the Transitional Steering Committee (TSC) of the New Beginning Coalition (NBC), to oversee the implementation of the strategic plan. The TSC has been meeting since March 2010 and members have developed a governance structure, currently in draft form, for the Steering Committee which includes their role with respect to the Area Plan's goals and objectives, their role in partnership with AAS, the make-up of the committee, how committee members will be selected, member commitment, member requirements, and evaluation. The TSC is currently developing documents for Steering Committee members to evaluate the committee as well as a self-evaluation of member participation in the committee. Nominations for the Steering Committee will open in the month of March for a term that would start on July 1, 2011. At least two current TSC members will become part of the Steering Committee the first year.

The NBC meetings have been scheduled every three months in January, May, and September 2011 and are expected to remain on this schedule for FY 2011-12. NBC meetings continue to be structured with the first hour dedicated to committee reports, agency reports, and other presentations. The second hour is dedicated to goal-specific discussions.

The Area Plan's goals for San Mateo County for 2009-2012 continue to be the following:

1. Increase volunteerism and involvement of consumers in advocacy, service planning and delivery.
2. Ensure cultural competence throughout the service planning and delivery system.
3. Create a coordinated seamless system of care for older adults and people with disabilities.

PSA 8 San Mateo County Area Agency on Aging Aging and Adult Services Strategic Plan Update FY 2011-12

4. Sustain critical services in a tight economic and budgetary environment.
5. Improve physical and programmatic access to services and supports for adults with disabilities.
6. Support options for adults to live as independently and safely as possible.
7. Collaborate to promote and/or provide physical and mental health services for older adults, people with disabilities and caregivers.
8. Educate and increase awareness to prevent violence, abuse and neglect.

Smaller committees (workgroups) continue to meet to complete objectives that are based on projects generated from the Area Plan's goals. Currently, there are workgroups that are meeting for Goal 1, 2, 3, 4, and 8. The workgroup for Goal 1 started to meet this fiscal year. The workgroup for Goal 2 is working on the implementation of a survey on cultural competence for providers of services for older adults and people with disabilities. This is a follow up to focus groups conducted to assess the experience of specific cultural groups when accessing services in the aging and disabilities network. The provider survey results will be presented at the May 2011 NBC meeting. It is expected that the results will be used to decide the direction for the Cultural Competence workgroup for the rest of FY 2010-11 and beyond. The workgroup for Goal 3 continues to be led by the Community-Based Continuum of Care Committee. This committee is discussing the implementation of MDS 3.0 by long-term care facilities and its widely-ranging consequences for older adults and adults with disabilities, including community services that are needed to transfer from a skilled nursing facility to a community setting. The workgroup for Goal 4 is beginning informational discussions on LTCI for its members. The workgroup for Goal 5 objectives fall within the scope of the Commission on Disabilities' (CoD) American's with Disabilities Act (ADA) Compliance Committee. The workgroup for Goal 8 continues to be led by the Adult Abuse Prevention Collaborative and one of the areas of focus through spring 2011 and possibly beyond will be the issue of hoarding. Workgroups for Goals 6 and 7 may be established in the future. Workgroups are not formally meeting for these goals, but ongoing work is being completed to address the objectives. It is still expected that the aforementioned workgroups will continue to meet until the projects are completed and then disband. As in FY 2010-11, once the objective has been completed, committees will no longer need to meet and committee members can then choose to join other workgroups to assist in completing that objective.

As planning is starting for the next Area Plan in FY 2011-12, it is expected that NBC members, which consists of a broad-based group of consumers, caregivers, service providers, and Commissioners from the CoA and CoD, will be involved in the planning, implementation, and development of the plan.

**PSA 8 San Mateo County Area Agency on Aging
Aging and Adult Services Strategic Plan Update FY 2011-12**

Needs Assessment



Needs Assessments

TIES Line

In FY 2010-11, the TIES Line received 7,401 calls. Calls received from those aged 60 and over totaled 3,316 (45%). The top three issues people called for in FY 2010-11 were (in descending order) IHSS, protective services/APS, and conservatorship. When comparing FY 2010-11 to FY 2009-10, the top two issues remain IHSS and APS but MOW calls were replaced by conservatorship as the third ranking issue. For the callers that state the cities in which they reside, the most calls continue to be received from San Mateo, Redwood City, and Daly City (in descending order). These findings have been consistent since FY.

See attached documents of TIES Line calls.

What San Mateo County is Doing to Address Issues

Oral Health

AAS is participating in the San Mateo County Oral Health Coalition, which is a collaborative for dental education and access, formerly the San Mateo County Dental Coalition (Coalition). AAS has a long history of participating in the Coalition but it had not met for an extended period of time before a recent restructuring. After the restructuring, AAS was invited in May 2010 to participate in the coalition in order to inform the Coalition about the dental needs of older adults. SMMC has received a grant to research provider capability and access to care in the County. A forum, titled Pathways to Dental Care, was held on August 31, 2010, to address access to dental care. The objectives were to develop an inventory of oral health services that currently exist in the County, to identify the greatest needs, and to begin the process for addressing needs. A follow-up forum was held in November 2010 with the objectives of discussing methods to leverage current resources through partnerships and advising on new resource opportunities available in 2011. The next forum will be on April 26, 2011.

PSA 8 San Mateo County Area Agency on Aging Aging and Adult Services Strategic Plan Update FY 2011-12

AAS staff will continue to participate in the forums and the Coalition to ensure that the dental needs of older adults are addressed.

Language and Culture

San Mateo County's Bilingual Employee Pilot Project (BEP) officially ended in March 2010 but the next steps in the project have continued. Recommendations were put forth by the BEP Advisory Group (which included AAS staff) to Health System leadership and County Human Resources (HR). Recommendations included items such as bilingual pay and testing, appropriate use of bilingual employees and tracking of time for bilingual services. Select members of the Advisory Group, including AAS staff, presented the recommendations to Health System Management in May 2010 and led discussions about how to implement these recommendations across the Health System. After the presentation to management, the Health System's Executive Committee (Health System Chief, County Health Officer, and SMMC Chief Executive Officer) discussed the recommendations from the Advisory Group and are currently in discussions with the County HR Director about how to implement the recommendations.

Lesbian Gay Bisexual Transgender Questioning Queer Community (LGBTQQ)

AAS continues to be involved with the Pride Initiative, which is led by BHRS staff and consists of individuals who are concerned about the well-being of the LGBTQQ communities in San Mateo County. The Pride Initiative held a strategic planning meeting in May 2010 that included a breakout group for youth and another for adults/older adults. The breakout group for the older adult population included a discussion about the following questions:

- 1) What resources exist to support the older LGBTQQ adult population?
- 2) What are the unmet needs for the older adult LGBTQQ community?
- 3) What is one project that participants are able to work on/contribute to in the next year?
- 4) Who else needs to be a part of the discussion?

The AAA Planner participated in the planning meeting and has attended subsequent meetings of the Pride Initiative. At the October 2010 meeting, discussion items included the difficulty of convening older adult providers around the issues of engaging the LGBTQQ community. Since that meeting, the Planner and the Pride Initiative Coordinator have been in discussions about how to convene this committee. It was decided that a starting point would be to reconvene those that attended the adult/older adult breakout session at the strategic planning meeting in May 2010. BHRS currently has an intern that will be able to assist with this process through August 2011. A meeting was held in January 2011 for those interested in the Older Adult Committee. The Planner has met with the intern to discuss the possible collaboration of the Pride Initiative with the NBC Cultural Competence Committee for Goal 2. Objective 2 under this goal is to "educate five key committees and groups on the concepts related to

PSA 8 San Mateo County Area Agency on Aging Aging and Adult Services Strategic Plan Update FY 2011-12

cultural competence that includes issues related to the LGBT population.” Objective 3 includes that the “Cultural Competence Committee will explore ways to further the inclusion of LGBT seniors into programs provided by the existing network of service providers.” Discussions about the needs of the LGBT community started in the NBC Steering Committee (which later became the Cultural Competence Committee) in 2007. These discussions culminated in three trainings for service providers to inform them about the unique needs of LGBT older adults and to demonstrate best practices for outreach and full inclusion of this community. The BHRS intern attended the Cultural Competence meeting in January 2011 where discussion included the possibility that the committee’s next project could be about older adult LGBT issues. The committee’s current project is a provider cultural competence assessment that is expected to be completed by May 2011.

Peninsula Family Service (formerly Family Service Agency of San Mateo) continues to be one of the AAA’s contracted providers. Their senior peer counseling services had most recently expanded to include services for Mandarin-speaking, Tagalog-speaking, and for the LGBT community. Unfortunately, the coordinator position for the LGBT senior peer counseling program is currently vacant because the staff member accepted a position in another county. It is the hope of the Senior Services Director to continue to receive funds to fill this position. The past coordinator of the LGBT senior peer counseling program was very involved in the Pride Initiative meetings, including the strategic planning meeting and was interested in convening the older adult committee. It is expected that if the position is filled, the coordinator would have an active role in the future of the Pride Initiative’s Older Adult Committee and collaborate with the Planner on future projects.

Mental Health

BHRS’ Mental Health and Substance Abuse Recovery Commission (formerly the Mental Health Board) held their yearly public forum on June 8, 2010. The group that takes the lead on the forum rotates between the existing committees. For that year the Older Adult Mental Health Committee hosted the forum, which focused on medication and substance abuse/use issues for older adults as it pertains to mental/physical health and overall well-being. AAS was represented on this committee and assisted in the planning of the conference. AAS will continue to be a part of the committee to seek other ways to foster collaboration with BHRS and their initiatives to address the mental health needs of older adults in San Mateo County. As part of this collaboration, there was a presentation about the Area Plan to the committee in January 2011 in order to incorporate mental health into more areas of the plan, such as the goals and objectives for FY 2011-12 and beyond.

PSA 8 San Mateo County Area Agency on Aging Aging and Adult Services Strategic Plan Update FY 2011-12

Transportation/Housing/Social Connections

In order to adequately plan for coordinated services for 2020 and 2030, San Mateo County seeks to predict the Baby Boom population's future characteristics, including racial/ethnic composition, income distribution, housing preferences, and disability rates. Representatives from the SMCHS, Department of Housing, San Mateo Transit District, HPSM, SMMC, and the CoA collaborated to create a model that projects the characteristics of the adults over the age of 65 in San Mateo County in 2020 and 2030. AAS staff assisted the Health Policy and Planning unit in the development of three prior policy briefs and most recently on "Maintaining the Health of an Aging San Mateo County," published in the fall of 2010. This is the fourth policy brief of the San Mateo County Aging Model Overview: Better Planning for Tomorrow. Issue 1 is the San Mateo County aging model overview. Issue 2 is the socio-demographic overview. Issue 3 is housing. Issue 4 has a focus on health. The latest policy brief has the following three goals:

Goal: Older adults must be able to get around without driving. Strategies include:

- Prioritize the development of housing in transit-rich centers
- Expand public transit connections
- Increase the number of neighborhood destinations that can be reached on foot and bike
- Implement street designs that are safe and inviting

Goal: Older adults need accessible homes in accessible places. Strategies include:

- Prioritize affordable housing for both renters and homeowners and increase the stock of transit-oriented housing units
- Implement universal design standards

Goal: Older adults must remain socially connected to friends, family, and ongoing activities. Strategies include:

- Increase the number of public gathering places
- Organize volunteer opportunities
- Engage the local community in conceiving mobility options
- Reinvent the traditional "senior center"
- Support community capacity that assists older adults in maintaining health

It is hoped that this local data source will help inform not only the AAA Area Plan, but the strategic planning of city and county departments and community partners.

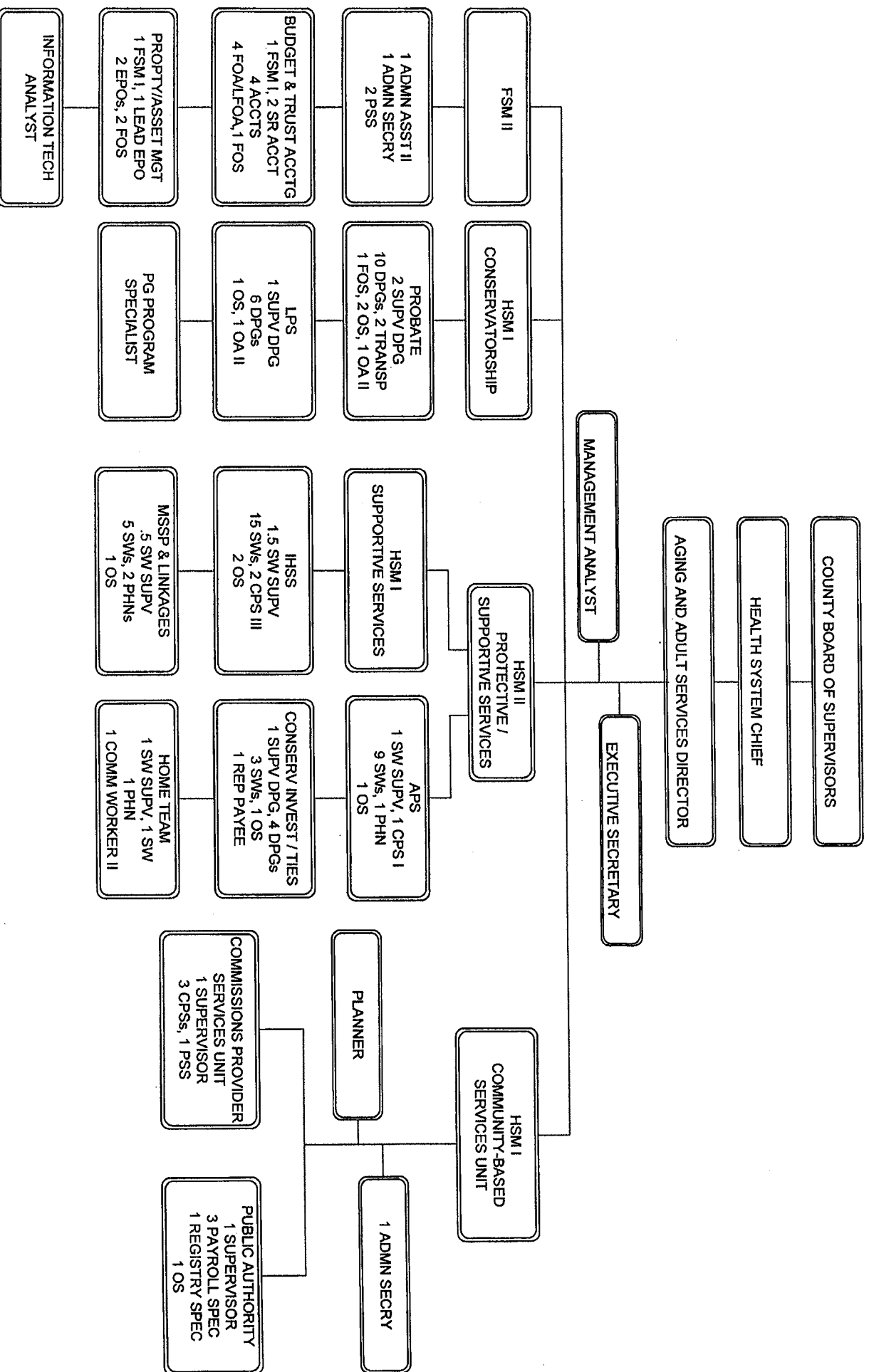
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AAA Organization Chart

2011-2012

Health Services Manager- MF 50% Non OAA/OCA 49.5% FTE .5% Direct Service B	
Supervisor – MM 98% FTE Administration 2% FTE Direct Service B	Community Program Analyst– CU 96.3% FTE Administration 3.7% FTE Direct Service B
Community Program Analyst– CM 37.5% FTE Administration 2.5% FTE Direct Service B 22% HICAP 2% MIPPA 36% Non OAA/OCA	Community Program Analyst– ZA 99% FTE Administration 1% FTE Direct Service B
Accountant II – MY 95% FTE Administration 5% Non OAA/OCA	
Admin Secretary – MR 100% FTE Administration	Public Service Specialist – LJ 100% FTE Administration

SAN MATEO COUNTY HEALTH SYSTEM AND AGING AN ADULT SERVICES



TIES Calls by Issue - FY 2010 - 2011

Issues (In frequency order)	No. of Calls	% of Total	Calls by Age Category														
			Regular Hours				Extended Hours				24-Hours On-Call						
			18-59	60+	75+	Unk.	18-59	60+	75+	Unk.	18-59	60+	75+	Unk.			
43 Congregate Housing	0	0.00%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
44 AIDS	1	0.01%	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45 Mental Health	172	2.32%	86	25	35	11	0	0	0	0	0	10	4	0	1		
46 Dental	4	0.05%	2	0	1	1	0	0	0	0	0	0	0	0	0	0	0
47 Home Repair / Modification	20	0.27%	3	2	7	8	0	0	0	0	0	0	0	0	0	0	0
48 Shopping / Errands	5	0.07%	0	0	3	2	0	0	0	0	0	0	0	0	0	0	0
49 Alcohol Abuse	10	0.14%	2	2	1	1	0	0	0	0	0	2	0	2	0		
50 Drug Abuse	5	0.07%	2	0	0	1	0	0	0	0	0	2	0	0	0	0	0
51 Repatriate	0	0.00%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
52 Homeless / Core Svc Issues	45	0.61%	15	14	3	3	0	0	0	0	0	7	0	0	0	3	
53 Financial Problems / Crisis	48	0.65%	15	23	3	3	0	0	0	0	0	2	0	2	0		
54 Hospital Discharge Planning	17	0.23%	1	2	10	0	0	0	0	0	0	2	1	1	0		
55 Developmental Disabilities	8	0.11%	3	2	0	1	0	0	0	0	0	2	0	0	0	0	0
56 5150	13	0.18%	1	0	4	0	0	0	0	0	0	4	4	0	0	0	0
57 OWAL	43	0.58%	0	0	0	0	0	0	0	0	0	38	1	0	4		
58 Death	21	0.28%	0	0	3	0	0	0	0	0	0	2	9	7	0		
59 Physical Abuse / Neglect	158	2.13%	17	15	71	2	0	0	0	0	0	12	6	29	6		
60 Fiduciary Abuse	95	1.28%	2	9	63	2	0	0	0	0	0	3	4	12	0		
61 Self Abuse / Neglect	162	2.19%	16	25	72	5	0	0	0	0	0	8	13	22	1		
62 Hospitalization	128	1.73%	1	0	3	1	0	0	0	0	0	56	26	29	12		
TOTAL CALLS	7,401	100%	1,244	1,077	2,239	1,511	17	14	35	44	535	228	319	138			
Shift Totals			Regular Hrs. 6,071				Extended Hrs 110				24-Hr. 1,220						

TIES Calls by Location - FY 2010 - 2011

Location	No. of Calls	% of Total	Calls by Age Category												
			Regular Hours				Extended Hours				24-Hours On-Call				
			18-59	60+	75+	Unk.	18-59	60+	75+	Unk.	18-59	60+	75+	Unk.	
Atherton	38	0.51%	6	8	12	7	0	0	0	0	0	0	0	5	0
Brisbane	25	0.34%	10	2	6	3	0	0	0	0	3	0	1	0	0
Belmont	210	2.84%	30	47	104	13	0	0	1	0	3	2	10	0	0
Burlingame	306	4.13%	34	41	89	14	1	0	2	0	34	16	67	8	0
Colma	24	0.32%	3	11	7	0	0	0	0	0	2	0	1	0	0
Daly City	753	10.17%	121	143	373	45	1	0	6	0	31	6	23	4	0
East Palo Alto	193	2.61%	40	55	70	12	0	0	1	1	9	0	4	1	0
El Granada	2	0.03%	0	0	0	0	0	0	0	0	2	0	0	0	0
Foster City	74	1.00%	8	15	41	4	0	0	0	0	0	1	5	0	0
Half Moon Bay	74	1.00%	10	28	21	4	0	1	0	0	9	0	1	0	0
Hillsborough	29	0.39%	4	1	13	3	0	0	0	1	0	1	6	0	0
Homeless	9	0.12%	3	4	0	1	0	0	0	0	1	0	0	0	0
La Honda	2	0.03%	1	0	1	0	0	0	0	0	0	0	0	0	0
Lamar	0	0.00%	0	0	0	0	0	0	0	0	0	0	0	0	0
Menlo Park	219	2.96%	37	29	101	17	0	0	4	0	13	3	13	2	0
Millbrae	101	1.36%	8	26	53	4	0	0	4	0	1	1	3	1	0
Montara	5	0.07%	0	1	1	0	0	0	0	0	0	2	1	0	0
Moss Beach	13	0.18%	0	0	5	0	0	0	0	0	0	4	4	0	0
Out of County	319	4.31%	30	15	52	34	1	6	3	1	35	90	35	17	0
Pacifica	246	3.32%	46	62	87	28	0	0	1	0	8	4	10	0	0
Pescadero	1	0.01%	0	0	0	0	0	0	0	0	0	1	0	0	0
Portola Valley	7	0.09%	0	1	3	2	0	1	0	0	0	0	0	0	0
Prince by the Sea	0	0.00%	0	0	0	0	0	0	0	0	0	0	0	0	0
Redwood City	838	11.32%	119	118	252	40	6	0	0	2	190	43	28	40	0
San Bruno	211	2.85%	39	47	81	20	0	1	0	0	1	10	10	2	0
San Carlos	135	1.82%	16	27	51	10	0	1	3	0	4	3	19	1	0
San Geronimo	0	0.00%	0	0	0	0	0	0	0	0	0	0	0	0	0
San Mateo	995	13.44%	173	159	339	75	6	9	1	7	135	35	33	23	0
So San Francisco	492	6.65%	69	81	208	45	1	1	1	0	46	5	33	2	0
Unknown	2062	27.86%	437	148	267	1128	1	1	1	32	6	1	3	37	0
Woodside	18	0.24%	0	1	8	3	0	0	0	0	2	0	4	0	0
TOTAL CALLS	7,401	100%	1244	1070	2245	1512	17	21	28	44	535	228	319	138	0
Shift Totals			Regular Hrs. 6,071				Extended Hrs. 110				24-Hrs. 1,220				

Goal 1

**Increase Involvement of Consumers in Advocacy,
Service Planning and Delivery through Volunteerism**

Rationale:

San Mateo County's network of aging and disabilities providers is committed to the ongoing involvement of consumers and volunteers in advocacy, planning and delivery of services.

Objective 1:	Projected Start and End Dates	Title III B Funded PD or C	Status
Increase the number of effective volunteers.	July 2009 through June 2012	C	Continued
(1) Promote best practices regarding recruitment and retention of volunteers through supporting efforts by DOVIA	July 2009 through June 2012		Continued
(2) Provide an opportunity for OAA providers to learn more about available volunteer resources	July 2009 through June 2010		Completed
(3) Explore successful models for increasing participation of individuals from ethnic/racial groups reflected in the local community	July 2009 through June 2010		Continued
(4) Aging and Adult Services staff and other agencies in the aging network will participate in the Transforming Life after 50 (TLA50) Advisory Group to plan the "Life Connects @ Your Library project", which will create volunteer opportunities for midlife and older adults	March 2010 through August 2011		New
Objective 2:	Projected Start and End Dates	Title III B Funded PD or C	Status
Increase the participation of consumers in leadership roles and service development opportunities.	July 2009 through June 1012	No	Continued
(1) Develop a database of opportunities for consumer participation (i.e. Commission on Aging, Commission on Disabilities, citizen's academies)	Sept. 2010 through June 2012		Continued

<p>(2) Increase the participation of consumers in the development of services for older adults and adults with disabilities, (e.g. by implementing satisfaction surveys to assist with program improvements, inviting participation on Advisory Committees, conducting focus groups, etc.)</p>	<p>Jan. 2011 through June 2012</p>		<p>Continued</p>
<p>(3) Promote existing leadership development/training opportunities to the aging and disabilities network</p>	<p>March 2011 through June 2012</p>		<p>Continued</p>
<p>(4) Collaborate with agencies (e.g. such as TLAF50, HART, etc.) that are seeking to implement volunteer leadership opportunities</p>	<p>March 2011 through June 2012</p>		<p>New</p>

Goal 2

Ensure Cultural Competence Throughout the Service Planning and Delivery System

Rationale:

In order to effectively serve our increasingly diverse community, San Mateo County is in need of a system of services that is both sensitive to language and culture. While many agencies have made progress towards this goal, it is important that this issue be addressed from a system perspective. The network must ensure that our service-delivery system is capable of meeting the needs of our future generations of older adults and adults with disabilities by ensuring its evolution towards one that is culturally competent at all levels of the system.

Objective 1:	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>The Network will assess the level of cultural competence among aging and disabilities network providers at the individual, organizational and community levels through a provider survey.</p> <p>(1) The Cultural Competence Committee will conduct an assessment of the cultural competence of providers that serve older adults and adults with disabilities.</p> <p>(2) The Cultural Competence Committee will compare client focus group and provider survey data in order to assess differences in delivery of services with respect to cultural competence that exist between the program participants and those providing the services.</p>	<p>July 2009 through June 2012</p> <p>July 2010 through June 2011</p> <p>July 2009 through June 2012</p>	<p>C</p>	<p>Continued</p> <p>Completed</p> <p>New</p>
Objective 2:	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>Educate five key committees and groups on concepts related to cultural competence that includes issues related to the LGBT population.</p>	<p>July 2009 through June 2012</p>	<p>C</p>	<p>Continued</p>

Objective 3:	Projected Start and End Dates	Title III B Funded PD or C	Status
Develop, adapt and/or adapt best practice models and policies for culturally competent service delivery.	July 2009 through June 2012	No	Continued
(1) The Health System will conduct the Bilingual Employee Pilot Project, which will make trained bilingual staff available to address immediate interpretation, translation, and written document review.	July 2009 through June 2010		Completed
(2) The Health System will conduct a 16-hour training on Basic Interpretation Skills for bilingual staff involved in the Bilingual Employee Pilot Project.	July 2009 through June 2010		Completed
(3) Utilize the Health System report of the findings and lessons learned from the Bilingual Employee Pilot Project.	July 2009 through June 2012		Continued
(4) The Health System will produce signs printed in multiple languages notifying the public of their right to an interpreter and post them at all Health System sites.	July 2009 through June 2012		Completed
(5) The Health System will incorporate standardized linguistic access requirements into RFP and contract language for external contractors.	July 2009 through June 2012		Continued
(6) The Cultural Competence Committee will explore ways to further the inclusion of LGBT seniors into programs provided by the Network.	July 2009 through December 2011		Continued
(7) In order to decrease duplication of work, the Cultural Competence workgroup will collaborate with others carrying out similar work (e.g. Behavioral Health and Recovery Services and the San Mateo County Health System Cultural Competence Steering Committee) around best practices in cultural competence.	January 2011 through June 2012		New

Goal 3

**Create a Coordinated Seamless System of Care for Older Adults
and People with Disabilities**

Rationale:

Our ability to maintain seniors and people with disabilities safely in the community is predicated on the availability of a comprehensive and coordinated system of supportive services that meets the needs of our changing community of seniors and people with disabilities. Changes in County demographics will result in a greater demand for services, as well as changes in the way programs are designed and delivered.

Objective 1:	Projected Start and End Dates	Title III B Funded PD or C	Status
Utilize a variety of communication tools (e.g., email, internet postings and conference calling) to increase communication among community-based providers and improve the coordination of services.	July 2009 through June 2012	C	Continued
Objective 2:	Projected Start and End Dates	Title III B Funded PD or C	Status
Support and further best practice models across the service-delivery system with an emphasis on evaluation, sustainability and coordination.	July 2009 through June 2012	PD	Continued
(1) Explore and support best practices in the implementation of MDS 3.0 by long-term care facilities in order to assist individuals to live in a more independent living arrangement.	September 2010 through June 2012		New
Objective 3:	Projected Start and End Dates	Title III B Funded PD or C	Status
Inform consumers regarding the network of services available taking into account literacy, linguistic access, and access to technology.	July 2009 through June 2012	No	Continued
(1) Begin outreach to the senior Spanish-speaking community at North Fair Oaks to educate about Adult Protective Services and Elder Abuse.	July 2009 through June 2012		Continued
(2) Provide presentations about the Network of Care to consumers in order to increase their utilization of the site.	July 2009 through June 2012		Continued

(3) Explore innovative ways to increase participation at senior centers.	July 2010 through June 2012	No	Continued
Objective 4:	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>Create programs/projects to support the development of a continuum of care for Long-Term Care Services.</p> <p>(1) The Community-Based Continuum of Care Committee will develop a tutorial on in-home care services to be available on the Network of Care website.</p> <p>(2) Continue collaboration with Behavioral Health and Recovery Services (BHRS), Health Plan of San Mateo, Aging and Adult Services, and Burlingame Long-Term Care to create improved efficiency in placement and eventual return to the community.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p>	<p>PD</p>	<p>Continued</p> <p>Completed</p> <p>Continued</p>

Goal 4

Sustain Critical Services in a Tight Economic and Budgetary Environment

Rationale:

San Mateo County is projected to experience increases in the aging population similar to the rest of the State. The current downturn of the economy has created increased unemployment, home loss due to foreclosure and overall economic insecurity throughout San Mateo County. By increasing collaboration and communication county-wide efforts will be made to sustain critical services as well as ensure the availability of services directed towards target populations.

Objective 1:	Projected Start and End Dates	Title III B Funded PD or C	Status
Collaborate as a network to identify core services and to anticipate future needs.	July 2009 through June 2012	C	Continued
Objective 2:	Projected Start and End Dates	Title III B Funded PD or C	Status
Collaborate as a network to identify and recommend clear and transparent criteria for allocating limited funding.	July 2009 through December 2011	C	Continued
(1) Coordinate with the County Manager's Office in their efforts to plan for and implement emergency services such as food and shelter to ensure the needs of seniors and persons with disabilities are included.	July 2009 through December 2011		Completed
(2) Review current contract language and relevant regulations, policies and procedures to determine possible contract changes for increasing the flexibility of contractors to provide services for older adults and adults with disabilities.	Nov 2009 through June 2011		Completed
(3) Review current initiatives, such as Long-Term Care Integration (LTCI), to explore potential new revenue streams to expand services for seniors and persons with disabilities.	Feb 2011 through June 2012		New

Objective 3:	Projected Start and End Dates	Title III B Funded PD or C	Status
Support collaboration in seeking funding for services and sharing resources.	July 2009 through June 2012	No	Continued
Objective 4:	Projected Start and End Dates	Title III B Funded PD or C	Status
Advocate for program and policy changes to ensure that seniors and persons with disabilities are able to live/remain in San Mateo County.	July 2009 through June 2012	No	Cont.
(1) Participate in Silicon Valley Community Foundation's collaborative efforts to address the availability of food and shelter in San Mateo County.	July 2009 through June 2012		Completed
(2) Collaborate with HPSM and other County agencies to incorporate policy changes, such as LTCL, in new County projects and initiatives.	February 2011 through June 2012		New

Goal 5

Improve Physical and Programmatic Access to Service and Supports for Adults with Disabilities

Rationale:

Despite San Mateo County's wide array of services and supports, many San Mateo County residents have difficulty accessing the services they need. A significant portion of San Mateo County's population has physical impairments that can make it difficult to prevent them from using services. The inability to access programs and services could result in reduced quality of life, premature institutionalization or death.

Objective 1:	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>Investigate programmatic barriers for people with mental health conditions and physical disabilities and improve access to community services and supports.</p> <p>(1) ADA Compliance Committee will collaborate with the County's Web Advocate to improve the ADA accessibility of the County's website, including captioning of Board of Supervisors meetings and videos.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p>	<p>C</p>	<p>Continued</p> <p>Continued</p>
Objective 2:	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>Advocate for the reduction of physical barriers for people with mental health conditions and physical disabilities and improve access to community services and supports.</p> <p>(1) ADA Compliance Committee to work with the Department of Public Works to review and update the County's ADA transition Plan of county-owned or leased facilities.</p> <p>(2) ADA Compliance Committee to collaborate with the County Parks Department in order to improve access for people with disabilities.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p>	<p>C</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p>

Objective 3:	Projected Start and End Dates	Title III B Funded PD or C	Status
Promote disability awareness and advocate for the rights of people with disabilities to full participation in the community and employment.	July 2009 through June 2012	C	Continued
(1) Organize and facilitate an annual Art Showcase of Artists with Disabilities as part of Disabilities Awareness Month.	July 2009 through June 2012		Continued
(2) Peninsula Family Service (formerly Family Service Agency) will provide access to employment through the Senior Employment Program for seniors and adults with disabilities.	July 2009 through June 2012		Continued
(3) Plan and hold an event to celebrate the ADA's 20 th Anniversary.	Jan 2010 through August 2010		Completed
(4) Plan and hold an event(s) to promote disabilities awareness and to celebrate the Commission on Disabilities' 20 th Anniversary.	February 2011 through September 2012		New

Goal 6

Support Options for Adults to Live as Independently and Safely as Possible

Rationale:

The high cost of housing in San Mateo County has created a demand for affordable and accessible housing that far exceeds the supply. Limitations in the County's current transportation system inhibit seniors and adults with disabilities who live independently in the community from accessing a wide variety of resources. Housing and transportation are two of the major issues that are consistently identified in needs assessments and will become increasingly problematic as the number of seniors (especially those who are older) increases. Essential to supporting adults living independently is to provide support for emergency and disaster aid. In addition, fall prevention education and resources are instrumental to maintaining the health, safety and independence of older adults.

Objective 1:	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>Advocate for increased availability of affordable, accessible and safe housing.</p> <p>(1) Commission on Aging (CoA) and Commission on Disabilities (CoD) liaisons will participate in city housing meetings within the county.</p> <p>(2) The Health System will work on the creation of affordable assisted living in San Mateo County.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p>	<p>No</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p>
Objective 2:	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>Collaborate within the aging and disabilities networks to improve the availability and awareness of safe, accessible transportation options.</p> <p>(1) Collaborate with SamTrans to coordinate a vehicle sharing demonstration program to better serve the transportation needs of the clients of the public, private, and non-profit partners, resulting in possible cost savings or revenue generation for partners.</p> <p>(2) Collaborate with SamTrans to create a Mobility Ambassador Program to assist seniors and people with disabilities with public transportation.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p>	<p>C</p>	<p>Continued</p> <p>Continued</p> <p>Completed</p>

<p>(3) Collaborate with SamTrans on the Countywide Transportation Plan for Low-Income Populations to develop strategies to increase the affordability and accessibility of transportation for low-income residents of the county.</p>	<p>January 2011 through June 2012</p>		<p>New</p>
<p>Objective 3:</p>	<p>Projected Start and End Dates</p>	<p>Title III B Funded PD or C</p>	<p>Status</p>
<p>Improve the ability of agencies and individuals to respond to emergencies and disasters.</p> <p>(1) Coordinate with local coalitions, such as the San Mateo Get Ready Network (County Office of Emergency Services, the CoD's Ad-Hoc Committee on Emergency Preparedness and Response, and THRIVE/The Alliance of Non-profits for San Mateo County), Coastside Emergency Action Plan and other local coalitions involved in emergency preparation.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p>	<p>C</p>	<p>Continued</p> <p>Continued</p>
<p>Objective 4:</p>	<p>Projected Start and End Dates</p>	<p>Title III B Funded PD or C</p>	<p>Status</p>
<p>Protect vulnerable older adults and adults with disabilities who may wander and place themselves in unsafe situations.</p> <p>(1) Coordinate activities to incorporate the "Silver Alert" program into the County's SMC Alert System (similar to the "Amber Alert" program for missing children).</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p>	<p>C</p>	<p>Continued</p> <p>Continued</p>
<p>Objective 5:</p>	<p>Projected Start and End Dates</p>	<p>Title III B Funded PD or C</p>	<p>Status</p>
<p>Reduce fall risk by providing fall prevention information and resources to maintain the health and independence of older adults.</p> <p>(1) The Fall Prevention Task Force will provide San Mateo County residents, who are over the age of 60, community education and advocacy related to fall prevention in a manner that is sensitive to the diverse cultural and ethnic needs of the entire County (formerly #6 under Objective 7 in Area Plan).</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p>	<p>No</p>	<p>Continued</p> <p>Continued</p>

Goal 7

Promote Physical and Mental/Behavioral Health among Older Adults, People with Disabilities and Caregivers

Rationale:

Physical and both mental/behavioral health issues disproportionately affect older adults, people with disabilities, and caregivers. Promoting physical and mental/behavioral health requires a system of promoting quality of living and wellness (e.g., environmental and behavioral change through policies, programs, and education), early detection of disease (e.g., self/provider/community-based health screening), and accessible health services that honor and uphold cultural values.

Objective 1: (formerly Objective #3)	Projected Start and End Dates	Title III B Funded PD or C	Status
Promote wellness by implementing environmental, social, and behavioral change through policies, programs, and education.	July 2009 through June 2012	C	Continued
(1) Support policies and programs that promote healthy environments for older adults, people with disabilities, and caregivers that ensures a quality of life in the community.	July 2009 through June 2012		Continued
(2) Participate in planning of "Active Communities Together" to promote physical activities and social connection among older adults throughout the county	July 2009 through June 2012		Continued
(3) The City of Daly City will conduct monthly health education programs for monolingual older adults (formerly #3 under Objective 3 in Area Plan).	July 2009 through June 2012		Continued
(4) The Older Adult Mental Health Committee will hold a public forum that will focus on medication and substance use issues for older adults as it pertains to mental/physical health and overall well-being for this population.	December 2009 through June 2010		Completed
(5) Aging and Adult Services staff will collaborate with the Fall Prevention Task Force (FPTF) in order to address the fall prevention needs of older adults through implementation of the FPTF Strategic Plan for 2008-2011.	July 2011 through June 2012		New

Objective 2: (formerly Objective #1)	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>Increase early detection of disease through health screenings to identify physical and mental health and substance use conditions to improve the likelihood of prevention and successful treatment</p> <p>(1) The City of Daly City will provide health screenings at community sites for hard to reach and underserved seniors residing in Daly City (formerly #2 under Objective 3 in Area Plan).</p> <p>(2) Mills-Peninsula Wise and Well will provide clients with counseling and health screenings at sites serving targeted populations in San Mateo County, including available family members and caregivers.</p> <p>(3) Sequoia Hospital Wellness Center will provide clients with counseling and health screenings at sites serving targeted populations in South San Mateo County on a monthly basis.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2009 Through June 2012</p>	<p>No</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p> <p>New</p>
Objective 3: (formerly Objective #2)	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>To improve access to appropriate physical and integrated behavioral health care services for evaluation and treatment by connecting community members to healthcare services.</p> <p>(1) Mills-Peninsula Medication Management will provide clients and available family members and caregivers with medication management information at sites serving targeted populations in San Mateo County (formerly #3 under Objective 1 in Area Plan).</p> <p>(2) The Senior Peer Counseling Program will provide senior peer counseling for LGBT older adults and older adults that speak Spanish, Tagalog, Cantonese and Mandarin.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p>	<p>PD</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p>

<p>(3) AAS will collaborate with the HPSM and BHRS on improving the quality, cost and outcomes for the high utilizers group (HUG) of the San Mateo County Health System.</p>	<p>July 2009 through June 2012</p>		<p>Continued</p>
<p>Objective 4:</p>	<p>Projected Start and End Dates</p>	<p>Title III B Funded PD or C</p>	<p>Status</p>
<p>To increase the collaboration between providers serving the aging, disabilities, and behavioral health communities</p> <p>(1) Promote Aging and Adult Services, Behavioral Health & Recovery Services (BHRS), and other Health System programs at health fairs, community centers, primary care clinics, libraries, and benefits organizations throughout the county.</p> <p>(2) Participate in Mental Health Services Act meetings, BHRS ' Health Equity Initiatives and Collaboratives (including the Spirituality and PRIDE Initiatives) and the Mental Health and Substance Abuse Recovery Commission's Older Adults Committee to promote and collaborate on effective strategies and services for older adults, people with disabilities, and their families and caregivers – with a focus on racial, ethnic, and other unserved and underserved populations.</p> <p>(3) Collaborate with Behavioral Health and Recovery Services (BHRS) to train IHSS providers on working with clients with mental health conditions and substance abuse issues.</p> <p>(4) Increase coordination and collaboration between health service providers, impacted community members, and providers that serve older adults through trainings, outreach efforts, and stakeholder partnerships.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2011 through June 2012</p>	<p>C</p>	<p>New</p> <p>Continued</p> <p>Continued</p> <p>Continued</p> <p>New</p>

Goal 8

Educate and Increase Awareness to Prevent Violence, Abuse and Neglect

Rationale:

In FY 2007-08, San Mateo County AAS, the County's Adult Protective Services Agency, received 1,022 reports of suspected abuse of seniors 65 years of age and older and dependent adults. Ombudsman Services of San Mateo County, Inc., which receives reports of abuse in long-term care facilities, received 297 reports of suspected abuse. Experts estimate that only one in six cases are actually reported, making the incidence of abuse substantially greater than the figures reported. For the safety of older adults and those with disabilities, our network of providers are committed to responding to and reducing the incidence of violence, abuse, and neglect in San Mateo County.

Objective 1:	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>Improve access to supportive and protective services, including legal assistance.</p> <p>(1) In order to maintain a solid volunteer base of the Ombudsman Program, the Ombudsman Program will conduct two trainings annually for new volunteer ombudsman recruits. Efforts will be made to recruit and train 10 new ombudsman each time a training is held.</p>	<p>September 2009 through March 2012</p> <p>September 2009 through March 2012</p>	<p>No</p>	<p>Continued</p> <p>Continued</p>
Objective 2:	Projected Start and End Dates	Title III B Funded PD or C	Status
<p>Increase education, public and professional awareness and promote reporting of elder and dependent adult abuse.</p> <p>(1) The Adult Abuse Prevention Collaborative (AAPC) will coordinate with the San Mateo County Events Center staff to increase the number of community exhibitors, plan comprehensive programs and workshops and to distribute information about elder and dependent adult abuse to all older adults who attend this year's Senior Day at the County Fair.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through August 2009</p>	<p>C</p>	<p>Continued</p> <p>Completed</p>

<p>(2) AAPC, in collaboration with the Health Plan of San Mateo, will continue to coordinate with the San Mateo Events Center staff on the planning of Senior Day at the County Fair.</p> <p>(3) Explore the possibility of forming a Triad (a partnership with law enforcement, older adults, and community groups) or Senior and Law Enforcement Together (SALT) to promote better understanding between older adults and law enforcement.</p> <p>(4) AAS/Adult Protective Services will collaborate with the Hoarding Task Force, Adult Abuse Prevention Collaborative, and BHRS in order to increase awareness about issues associated with hoarding.</p>	<p>August 2009 through June 2012</p> <p>October 2009 through June 2012</p> <p>July 2010 through June 2012</p>		<p>Continued</p> <p>Continued</p> <p>New</p>
<p>Objective 3:</p>	<p>Projected Start and End Dates</p>	<p>Title III B Funded PD or C</p>	<p>Status</p>
<p>Target interventions to educate on abuse and neglect prevention.</p> <p>(1) AAPC will coordinate with local community affairs television and radio programs to feature programming on elder and dependent abuse.</p> <p>(2) AAPC will explore options to improve an existing elder abuse prevention video and determine most effective venues for distribution.</p>	<p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p> <p>July 2009 through June 2012</p>	<p>PD</p>	<p>Continued</p> <p>Continued</p> <p>Continued</p>

SECTION 9: PUBLIC HEARINGS

PSA #8

PUBLIC HEARINGS

Conducted for the 2009-2012 Planning Period

CCR Title 22, Article 3, Section 7302(a)(10) and Section 7308; OAA 2006 306(a)

Fiscal Year	Date	Location	Number of Attendees	Presented in languages other than English?¹ Yes or No	Was hearing held at a Long-Term Care Facility?² Yes or No
2009-10	1) 12/08/08	225 37 th Avenue, Room 100, San Mateo, CA 94403	1) 35	No	No
	2) 4/13/09		2) 28		
2010-11	1) 3/08/10	225 37 th Avenue, Room 100, San Mateo, CA 94403	1) 35 2)	No	No
2011-12					

Below items must be discussed at each planning cycle's Public Hearings

1. Discuss outreach efforts used in seeking input into the Area Plan from institutionalized, homebound, and/or disabled older individuals.

A public notice appeared in the local paper. In addition, notices were sent to skilled nursing facilities, local hospitals, senior centers, hospice agencies, the local Ombudsman Program, meals on wheels providers, adult day care and Alzheimer's programs, the local independent living center, the Department of Veterans Affairs, the Department of Rehabilitation, and a variety of human service agencies providing services to adults with disabilities and to caregivers.

2. Proposed expenditures for Program Development (PD) and Coordination (C) must be discussed at a public hearing. Did the AAA discuss PD and C activities at a public hearing?

Yes Not Applicable if PD and C funds are not used

No, Explain:

² A translator is not required unless the AAA determines a significant number of attendees require translation services.

³ AAAs are encouraged to include individuals in LTC facilities in the planning process, but hearings are not required to be held in LTC facilities.

3. Summarize the comments received concerning proposed expenditures for PD and C, if applicable.

No comments were received for proposed expenditures for PD and C.

4. Were all interested parties in the PSA notified of the public hearing and provided the opportunity to testify regarding setting of minimum percentages of Title III B program funds to meet the adequate proportion funding for Priority Services?

Yes

No, Explain:

5. Summarize the comments received concerning minimum percentages of Title III B funds to meet the adequate proportion funding for priority services.

No comments were received for proposed expenditures for PD and C.

6. Summarize other major issues discussed or raised at the public hearings.

An issue raised was regarding if the ability to shift the allocation for Congregate Nutrition to other programs in need since attendance is decreasing at Congregate sites.

7. List major changes in the Area Plan resulting from input by attendees at the hearings.

Given the lack of comments by attendees regarding the Plan, no major changes were made following the hearing.

SECTION 13. FOCAL POINTS

PSA # 8

2009-2012 Three-Year Planning Cycle

COMMUNITY FOCAL POINTS LIST

CCR Title 22, Article 3, Section 7302(a)(14), 45 CFR Section 1321.53(c), OAA
2006 306(a)

Provide an updated list of designated community focal points and their addresses. This information must match the National Aging Program Information System (NAPIS) SPR 106.

San Mateo County

Total Number of Focal Points Designated Under Section 306 of the OAA in Operation in the Past Year (40)

- **Total Number of Focal Points Designated that were Senior Centers – 20 (marked with an asterisk)**
 - **Total Number of Senior Centers in the PSA in the Past Year- 20 (marked with an asterisk)**
 - **Total Number of Senior Centers in PSA in the past year that received OAA funding- 13 (in italics)**
1. Alzheimer's Association of Northern California & Nevada
1060 La Avenida St.
Mountain View, CA 94043
 2. Catholic Charities CYO San Carlos Adult Day
180 787 Walnut Street
San Carlos, CA 94070
 3. Center for the Independence of the Disabled
1515 S. El Camino Real, Suite 400
San Mateo, CA 94402
 4. *City of Belmont Senior Center**
20 Twin Pines Lane
Belmont, CA 04402

SECTION 13. FOCAL POINTS (page 2)

5. City of Burlingame*
850 Burlingame Avenue
Burlingame, CA 94010
6. *City of Daly City **
Doelger Senior Center
101 Lake Merced Blvd.
Daly City, CA 94015
7. *City of Daly City**
Lincoln Community Center
901 Brunswick Street
Daly City, CA 94014
8. *City of East Palo Alto**
2277 University Avenue
East Palo Alto, CA 94303
9. *City of Menlo Park Senior Center**
110 Terminal Avenue
Menlo Park, CA 94015
10. City of Millbrae*
477 Lincoln Circle
Millbrae, CA 94303
11. *City of Pacifica Senior Center**
540 Crespi Ddrive
Pacifica, CA 94044
12. *City of San Bruno Senior Center**
1555 Crystal Springs Road
San Bruno, CA 94066
13. City of San Mateo Senior Center*
2645 Alameda de las Pulgas
San Mateo, CA 94403
14. *City of San Mateo Martin Luther King Center**
725 Mount Diablo
San Mateo, CA 94401
15. City of South San Francisco Adult Day*
601 Grand Avenue
South San Francisco, CA 94080
16. *City of South San Francisco Magnolia Senior Center**
601 Grand Avenue
South San Francisco, CA 94080

SECTION 13. FOCAL POINTS (page 3)

17. City of South San Francisco El Camino Center*
33 Arroyo Drive
South San Francisco, CA 94080
18. Coastside Adult Day Health Center
645 Correas Street
Half Moon Bay, 94019
19. Edgewood Center for Children and Families
957B Industrial Road
San Carlos, CA 94070
20. Family Caregiver Alliance (San Francisco)
180 Montgomery Street, Ste. 100
San Francisco, CA 94014
21. Peninsula Family Service Agency
Senior Employment Program
24-2nd Avenue
San Mateo, CA 94401
22. *Fair Oaks Intergenerational Center**
2600 Middlefield Road
Redwood City, CA 94063
23. Foster City Senior Center*
650 Shell Blvd.
Foster City, CA 94014
24. Legal Aid Society of San Mateo County
Senior Legal Assistance
521 E. 5th Avenue
San Mateo, CA 94402
25. Mills-Peninsula Senior Focus
Adult Day/ADCRC
1720 El Camino Real, Suite 10
Burlingame, CA 94010
26. Ombudsman Services of San Mateo County, Inc.
711 Nevada Street
Redwood City, CA 94061
27. Peninsula Volunteers, Inc. Rosener House
500 Arbor Road
Menlo Park, CA 94025

SECTION 13. FOCAL POINTS (page 4)

28. Peninsula Volunteers, Inc.
Little House
800 Middle Avenue
Menlo Park, CA 94025
29. Ron Robinson Senior Care Center
San Mateo Medical Center
222 39th Avenue
San Mateo, CA 94403
30. San Carlos Senior Center*
601 Chestnut Street
San Carlos, CA 94070
31. San Mateo County Aging and Adult Services
225 37th Avenue
San Mateo, CA 94403
32. Second Harvest Food Bank
Brown Bag Program
1051 Bing Street
San Carlos, CA 94070
33. *Self Help for the Elderly**
San Mateo
50 East 5th Avenue
San Mateo, CA 94401
34. Self Help for the Elderly
HICAP
50 East 5th Avenue
San Mateo, CA 94401
35. *Senior Coastsiders**
535 Kelly Avenue
Half Moon Bay, CA 94019
36. Sequoia Hospital Health and Wellness Services/Senior Services
170 Alameda de las Pulgas
Redwood City, CA 94062
37. Seton Senior Services
1900 Sullivan Avenue
Daly City, CA 94015

SECTION 13. FOCAL POINTS (page 5)

38. Veteran's Memorial Senior Center*
1455 Madison Avenue
Redwood City, CA 94061

SECTION 17. GOVERNING BOARD

PSA # 8

2009-2012 Three-Year Area Plan Cycle

CCR Article 3, Section 7302(a)(11)

Number of Members on Board 5

Names/Titles of Officers:

Term in Office Expires

The Honorable Carole Groom, President

January 2015

The Honorable Adrienne Tissier, Vice President

January 2013

Names/Titles of All Members:

Term on Board Expires

1st District- Vacant

January 2013

The Honorable Rose Jacobs Gibson, Supervisor 4th District

January 2013

The Honorable Don Horsley, Supervisor, 3rd District

January 2015

The Honorable Carole Groom, Supervisor 2nd District

January 2015

The Honorable Adrienne Tissier, Supervisor 5th District

January 2013

SECTION 18. ADVISORY COUNCIL

PSA # 8

**ADVISORY COUNCIL MEMBERSHIP
2009-2012 Three-Year Planning Cycle**

45 CFR, Section 1321.57

CCR Article 3, Section 7302(a)(12)

Total Council Membership (including vacancies) 21 (5 vacancies)

Number of Council Members 60+ 16

% of PSA's % on Advisory
60+ Population Council

Race/Ethic Composition

White	63.1%	<u>56%</u>
Hispanic	10.7%	<u>0%</u>
Black	3.1%	<u>13%</u>
Asian/Pacific Islander	19.9%	<u>31%</u>
Native American/Alaskan Native	0.2%	<u>0%</u>
Other	3.0%	<u>0%</u>

Attach a copy of the current advisory council membership roster that includes:

- Names/title of officers and date term expires
Please see page 3 in section 18
- Names/titles of other Advisory Council members and date term expires
Please see page 4 in section 18

SECTION 18. ADVISORY COUNCIL (page 4)

Names/Titles of other Advisory Council members and date term expires

Full Commission on Aging	
Name	Term Expires
Aurea Cruz	6-30-11
Megan DePuy	6-30-13
Katie Eiseman	6-30-13
Patricia Firenze	6-30-13
Nathanial Fripp	6-30-13
Patricia Georges	6-30-13
David Gilson	6-30-13
Sandra Lang	6-30-12
Melodie Lew	6-30-13
May Nichols	6-30-12
Denis O'Sullivan	6-30-13
Mary C. Pappas	6-30-12
Annie Sadler	6-30-13
Evelyn Tom	6-30-13
Apollonia Dee Uhila	6-30-13
Kevin Worth	6-30-11

SECTION 18. ADVISORY COUNCIL (page 2)

Indicate which member(s) represent each of the “Other Representation” categories listed below.

	<u>Yes</u>	<u>No</u>
Low Income Representative	X	<input type="checkbox"/>
Disabled Representative	X	<input type="checkbox"/>
Supportive Services Provider Representative	X	<input type="checkbox"/>
Health Care Provider Representative	X	<input type="checkbox"/>
Family Caregiver	X	<input type="checkbox"/>
Local Elected Officials	X	<input type="checkbox"/>
Individuals with Leadership Experience in the Private and Voluntary Sectors	X	<input type="checkbox"/>

Explain any “No” answer:

N/A

Briefly describe the process designated by the local governing board to appoint Advisory Council members.

- All 21 members of the Commission on Aging are appointed by the San Mateo County Board of Supervisors.

SECTION 18. ADVISORY COUNCIL (page 3)

Commission on Aging

Names/Titles of officers and date term expires

Commission on Aging Executive Committee	
Names	Term Expires
David Gilson/Co-Chair	6-30-13
Patricia Georges	6-30-13
Sandra Lang	6-13-12
May Nichols	6-30-12
Denis O'Sullivan/Chair	6-30-10
Evelyn Tom	6-30-13