



# **? FLORIDA STATE PLAN ON AGING**

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**FFY 2001 - 2004**

UNDER TITLES III & VII  
OLDER AMERICANS ACT, AS AMENDED - 2000

## **FLORIDA DEPARTMENT OF ELDER AFFAIRS**

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**REVISED DECEMBER 2002**

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## VERIFICATION OF INTENT

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The State Plan on Aging, FFY 2001-2004, December 2002 revision, is hereby submitted for the State of Florida for the period of October 1, 2000, through September 30, 2004. It includes amendments to incorporate Title III E services and conform with the Older Americans Act, as Amended - 2000. It also includes all assurances updated to the Older Americans Act, as Amended - 2000 and plans to be implemented by the State of Florida, Department of Elder Affairs under the provisions of the Act during the period identified. The state agency named above has been given the authority to develop and administer the State Plan on Aging in accordance with all requirements of the Act. This plan will govern the development of support services, including multipurpose senior centers, the provision of in-home, nutrition and disease prevention services for frail older individuals, and effective and visible advocate for the elderly in the state.

The State Plan on Aging herewith submitted has been developed in accordance with all federal statutory and regulatory requirements.

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(date)

Terry F. White  
Secretary  
Florida Department of Elder Affairs

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## TABLE OF CONTENTS

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Our Vision, Mission and Values .....	1
Introduction .....	2
Florida's Golden Choices .....	5
Endnotes .....	14
Goals, Objectives and Performance Measures .....	15
Appendices .....	17
Administrative Structure .....	19
Florida's Older Americans Act Programs .....	27
Financial Plan .....	28
Assurances .....	41

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# OUR MISSION, VISION AND VALUES

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## Mission Statement

? To create an environment that provides choices, promotes independence and enables older Floridians to remain in their communities for a lifetime

## Vision: Golden Choices

? To lead the nation in assisting elders to age in place, with dignity, purpose, security, and in an elder-friendly community

## Values

- ? Compassion
- ? Accountability
- ? Caregiver Support
- ? Quality
- ? Intergenerational
- ? Partnerships
- ? Diversity



## INTRODUCTION

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As the baby-boomer generation gets older, America faces a demographic future characterized by an increasingly aging population. In Florida, that future has already arrived. The Sunshine State ranks number two in the nation in the number of residents age 60 and older, and number one in the nation in the percentage of its citizens age 60 and older. The number of Floridians age 60+ exceeds the overall population of each of 22 states. The number of Floridians age 60+ in Broward, Miami-Dade, and Palm Beach counties alone exceeds the overall population of each of seven states. Over 3,500 Florida citizens are 100 years of age or older. At 40 percent, Charlotte County leads the nation's counties in the percentage of residents age 60 and older.

Because Florida sets the leading edge of the "Graying of America," the state faces both unique challenges and opportunities in addressing the needs of its aging population. As the agency with primary responsibility for serving older Floridians, the Department of Elder Affairs is a leader in the national effort to create innovative and appropriate services which serve and empower elders and their caregivers.

The Florida Department of Elder Affairs was created in 1991 as a result of a 1988 constitutional amendment and its later statutory enactment in the "Department of Elderly Affairs Act" (Chapter 430, F.S.).

The Department is charged with the following functions (Ch. 430.04, F.S.):

- (1) Administer human services and long-term care programs ensuring that the elderly of this state receive the best services possible;
- (2) Assist functionally impaired elderly persons in living dignified and reasonably independent lives in their own homes or in the homes of relatives or caregivers through the development, expansion, reorganization, and coordination of various community-based services;
- (3) Serve as an information clearinghouse at the state level, and assist local-level information and referral resources as a repository and means for dissemination of information regarding all federal, state, and local resources for assistance to the elderly in among other areas: health, social welfare, long-term care, protective services, consumer protection, education and training, housing, employment, recreation, and transportation;





(4) Provide the lead and coordinate and review the roles and plans for state agencies that provide services for the aging;

(5) Develop a comprehensive volunteer program that includes an intergenerational component and draws on the strengths and skills of the state's older population and, to the extent possible, implements the volunteer service credit program;

(6) Combat ageism and create public awareness and understanding of the potentials and needs of elderly persons.

The vision, values, and mission of the Department (see page 1 above) define its policy and drive its goals in serving older Floridians. These goals are consistent with Florida's Golden Choices, the state's blueprint for services to elders, and can be classified into five integral themes: aging in place, aging with dignity, aging with security, aging with purpose, and aging in an elder-friendly environment.

For example, in the area of elder care, Florida's Golden Choices bridge the range of elder needs from self-care to institutional long-term care. In particular, the Department recognizes that home- and community-based services offer greater quality of life for elders and cost significantly less than institutional care. Many Florida elders who are at high risk of placement in institutional long-term care settings can, with appropriate support, safely remain in their homes and communities. Similarly, elders in need of institutional long-term care who are candidates for nursing homes may benefit from alternative options, such as assisted living facilities, within the continuum of elder care. The Department's overall goal is to offer a variety of innovative, individualized options for elder care that allow elders to live and age in the least restrictive, safest alternative possible.

A crucial service of the Department is to provide education, training and support of caregivers who provide the majority of care to Florida's frail elders. Support of caregivers sustains a vast resource that relieves the burden on the long-term care service system and enables frail elders to remain in their homes under the fewest restrictions possible. The National Family Caregiver Support Program (NFCSP), a new program included in the year 2000 reauthorization of the Older Americans Act, is enabling the Department to expand services and serve more caregivers in Florida.

The Florida State Plan on Aging identifies the major activities of the Department of Elder Affairs and Florida's aging network of service providers directed toward serving the needs of the state's large and diversified elder population. The plan is submitted to the Assistant Secretary on Aging of the



U.S. Department of Health and Human Services to enable the Department to receive grants from its allotments under the Older Americans Act.

The Florida State Plan on Aging for Federal Fiscal Years 2001 - 2004, revised December 2002, includes assurances that the Florida Department of Elder Affairs, as the State Unit on Aging, will administer the aging programs funded by Titles III and VII of the Older Americans Act in accordance with its statutory and regulatory mandates. The plan also contains information about the organization of the Department of Elder Affairs, the planning and service areas within the state, and the area agencies on aging which are responsible for administering, through a network of service provider agencies, the Title III and VII aging programs.

The program plan portion of the Florida State Plan on Aging describes the activities carried out under Older Americans Act funding. The financial plan portion of this document describes the allocation process for Title III and VII funds and indicates the estimated amounts to be available for administration, support, and nutrition services at the sub-state level.

Program implementation is largely a function of the area plans prepared and administered by the area agencies on aging. The aim of the aging program in Florida is to provide a comprehensive and coordinated service system for older people. The state plan is designed on the principle of providing the broad policy guidance essential for program effectiveness, while allowing wide flexibility to the area agencies on aging to adapt their programs to local needs, priorities, and concerns.



# FLORIDA'S GOLDEN CHOICES

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## Priority Setting Framework

The Department's five broad policy goals are based on Governor Bush's Golden Choices blueprint for Florida's elders to build a better life in Florida for persons of all ages; a plan to create communities for a lifetime. The Department has developed objectives for each of the five Golden Choices. These objectives also serve the broader purpose of improving the life of Floridians of all ages through such efforts as the Communities for a Lifetime initiative.

### The Golden Choices blueprint consists of the following goals:

**1. Aging in Place:**

The right of Floridians to age in the communities of their choice in the least restrictive environment.

**2. Aging with Security:**

The right to live without fear of abuse, neglect, or any other crimes.

**3. Aging with Purpose:**

The right to contribute talent, experience, and other personal assets to the community at large.

**4. Aging with Dignity:**

The right to live with dignity and respect.

**5. Aging in an Elder Friendly Environment:**

The right to participate in a community that fosters elders' quality of life, safety and independence both at home and throughout the community.

These goals can only be achieved through a coordinated, fiscally sustainable and customer-oriented service delivery system that supports the diverse needs of Florida's elders.

**Organizational Planning Values:** The Department's operational priorities were determined through a comprehensive Strength, Weakness, Opportunity and Threat (SWOT) Analysis. This analysis is founded in the Department's organizational values.

In assessing programs and policies, the Department keeps consumer choice and autonomy, service quality, fiscal sustainability, and the strengthening of



the elder services network as its organizational values.

**Consumer centered service:** Consumer choice and autonomy will remain a top priority as the Department works to innovate and expand programs that give older Floridians and their families the freedom to choose to remain in their communities enjoying the best possible lifestyle that their health will allow.

**Partnering:** A core value of the Department is the strengthening of the Elder Services Network. The Department will continue to function as one of the most highly privatized agencies of state government. This can only be achieved by delivering services through a network of highly committed for profit and non-profit providers and contractors, who are committed to the Department's customer centered Golden Choices philosophy.

**Fiscal Sustainability:** To remain viable, the Department's programs and initiatives have to be fiscally sound. Programs for elders can only be sustained over the long run if they generate value for all Floridians. Department programs have to show that they are efficient and effective.

## **? AGING IN PLACE**

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Simply defined, aging in place means that older Floridians are able to obtain the right services in the right setting at the right time. Older Floridians should be able to spend their lives in their homes and communities whenever possible. If frail elders are unable to continue living in their homes, they should be able to reside in the least restrictive environment possible.

In the period 2000 to 2015, Florida's population age 60 and older is expected to increase by 53 percent to 5.4 million residents.<sup>1</sup> Over the same period, Florida's 85 and older population is expected to grow by 66 percent to more than 540,000 residents. The growth of the oldest population is important because with advanced age there is an increased likelihood of having functional impairments. The Department's ongoing goal is to partner with other public entities, not-for-profit organizations, and private for-profit businesses to supplement resources needed to meet the growing demand posed by the needs of frail elders. Another ongoing goal is to design more innovative, cost-effective approaches for frail elders and their caregivers to receive the level of support needed to help them remain in their own communities and maintain their quality of life, thus preventing or delaying nursing home placement.



The Department's preventive intervention strategies are an increasingly-important means of maintaining the health and overall quality of life for more elder Floridians as they age, reducing the incidence of disability in later life and reducing the costs of long-term care. Nutrition, exercise, risk factors for diseases, and medication management are among the topics in the Department's educational campaign to help elders take charge of their own lives in staying healthier longer. In particular, health promotion efforts emphasize prevention and management of chronic, disabling diseases of aging to keep individuals functioning at their maximum level. The statewide osteoporosis education program, for example, focuses on prevention, early detection, and strategies to control the disease and minimize further decline. The Adult Florida Injury Prevention for Seniors (FLIPS) program provides a variety of information and other services to reduce elder injuries from falls and to promote safety in the home and community.

To lower the rate of premature nursing-home placements, the Department has enhanced its CARES (Comprehensive Assessment and Review for Long-Term Care Services) program. Through an initiative called upstreaming, Department CARES staff outstationed at hospitals assess elder patients early in the long-term care decision-making process. This early intervention has proven successful in diverting elders from nursing homes to alternative forms of community care, such as home-based services.

Another important component of aging in place is the education, training and support of caregivers who provide the majority of care to Florida's frail elders. Support of caregivers relieves the overburdened long-term care service system, enabling frail elders to continue living in their homes. It is estimated that there are 1,427,899 caregivers in Florida providing \$11.2 billion worth of care.<sup>2</sup>

Research suggests that informal care plays a significant role in preventing or delaying the need for a disabled elder to go into a nursing home.<sup>3</sup> The Department's mission statement acknowledges the important role of caregiving in keeping families together. The Department encourages Florida's business community to offer employee assistance programs with elder care options which allow workers with caregiving responsibilities to purchase services from existing community-based providers. The Department's Consumer Directed Care Medicaid Waiver research project offers caregivers the option of replacing formal care providers with family or neighbors. This pilot project has potentially important consequences due to Florida's current severe shortage of nursing assistants and home health aides, because it opens an untapped resource of health-care workers not previously considered. As a result of the success of the pilot project and its importance



for elder care, the Florida Legislature has passed legislation expanding this effort into a statewide program.

The concept of aging in place is closely allied with the Department's Communities for a Lifetime initiative, promoting structural modifications and improved resources which permit elders to continue residing in their homes and to more easily access needed services in their communities.

## **? *AGING WITH SECURITY***

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Aging with security means providing Florida elders with a peace of mind. Elders with peace of mind feel secure in the knowledge that they are safe in their homes (both in the community and in supervised care), the health care and other services they need are available and accessible to them, and needed health care will not compromise their financial resources.

Peace of mind about health care includes having the confidence that one's physician is knowledgeable about geriatric medicine. With only 400 geriatrics-trained physicians available to Florida's 3.5 million elders,<sup>4</sup> the Department advocates statewide strategies that will increase the availability of medical care appropriate to the special health needs of Florida's older citizens. To this end, the Department supports the Florida State University Medical School in its plan to train doctors in rural and geriatric medicine. The Department also supported the establishment of a pilot nursing home teaching program to strengthen professional geriatric care, which is administered by the Agency for Health Care Administration.

Elders are particularly susceptible to victimization as a result of abuse, exploitation, neglect, fraud, and other crimes by unscrupulous individuals who prey on their increased vulnerability. At a time of increased victimization of the elderly, the Department offers a variety of education and awareness programs to create a safer Florida for its elders, whether in the home, community, or an institution.

Department programs to protect the safety of frail and disabled elders include training police officers to communicate with victims of Alzheimer's Disease and a program that provides identification bracelets for victims of dementia who, due to their condition, may leave undetected from their care facilities.

Among elder security initiatives supported by the Department is the pursuit of state, federal, and other housing grant funding for home repair and home



accessibility, allowing low-income and disabled elders to continue residing in their dwellings. The Department currently operates an AmeriCorps grant that recruits program members and volunteers for this purpose. Another initiative is the modification of zoning codes where needed to assist elders with their housing arrangements that increase their sense of security in their communities. One example is modifying zoning codes to permit elders to live with their adult children in mother-in-law apartments.

Accommodating the transportation needs of elders as pedestrians, drivers, and users of public transit will enable them to maintain their independence and move more securely throughout their communities. For elders who continue to operate motor vehicles, the Department advocates increased implementation of affordable safety enhancements such as collision warning/avoidance systems or in-vehicle signing that warns the driver in advance when caution, speed change, and other warning signs will be encountered. In addition, the Department recommends statewide adoption of programs such as the “Getting in Gear” project in St. Petersburg. “Getting in Gear” involves assessing an older driver’s driving skills and knowledge, making recommendations to assist elders who exhibit driving impairments or require refresher training, or assisting the driver in making the transition to alternate forms of transportation.

Elders who lack personal transportation or who can no longer operate a motor vehicle need access to affordable and elder-friendly public transportation to remain active in their communities. Among desired transportation outcomes are plentiful mass-transit stops in convenient and safe areas, and convenient mass-transit schedules that include ample weekend service, and sidewalks should be in good repair for safe walking.

Pedestrian safety is a critical transportation need for all elders. The Department supports such community initiatives as construction of additional pedestrian crossings, longer elder-responsive lights at pedestrian crossings, widespread sidewalk construction with non-slip curb ramps, aggressive maintenance and repair of existing sidewalks, brighter street lighting, and larger well-illuminated signs.

Financial security is a major concern and goal for elders. The Department offers a variety of employment, insurance counseling, and other programs that assist older Floridians in achieving and maintaining their financial independence. The Department has working relationships with Florida’s workforce system and private industry to expand employment and training opportunities for older workers, to increase their employability in the state’s skilled job market. The Department’s Senior Community Service





Employment Program provides paid work experience for low-income elders who wish to enter the job market but lack the skills and confidence to do so.

The Department has taken numerous measures to improve the security of frail elders in long-term care facilities, such as proposing stronger enforcement measures governing assisted living facilities. The Department supports the Gold Seal Program that promotes excellence in long-term care facilities. The Long-Term Care Ombudsman Program, investigating complaints by, or on behalf of, residents of long-term care facilities has added a toll-free telephone number to increase program accessibility to long-term care facility residents and the public. The program is also aggressively recruiting bi-lingual volunteers, using a three-pronged approach, to enhance strengthen advocacy efforts with the Hispanic and Haitian-Creole populations: 1) a statewide advertising campaign on both television and radio using public service announcements and paid advertising; 2) a public relations initiative using a contracted public relations firm to conduct media outreach to reporters and editors letting them know about the Ombudsman program; and 3) a grass roots volunteer recruitment campaign using existing volunteers.

An additional program to help ensure safety of Florida's elders is the Statewide Office of Public Guardianship, established in 1999, that assists vulnerable or incapacitated elders in need of guardianship services in order to protect their personal and property rights.

## **? AGING WITH PURPOSE**

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Aging with purpose means the opportunity for elders to remain active and productive, pursuing and achieving their personal goals while contributing their knowledge, skills and experience as workers and volunteers to the betterment of the community.

Elders, recognized as "our state's greatest untapped resource" by the Bush-Brogan administration, enrich Florida's culture and quality of life with their knowledge, skills, talents and experience. Elders are a largely unrecognized asset for improving the quality of life of Florida communities.

Aging with purpose includes elders who remain in the workforce, enter the workforce for the first time, or resume work after retirement out of personal preference or economic need. Through 2005, Florida's population aged 65 and over will make a significant contribution to the projected growth in the state's labor force.<sup>5</sup> Older workers will be a critical resource in attracting new businesses to Florida and encouraging existing businesses to expand. A





state economy that does not take the training and employment of older workers into consideration will lack the labor force required by these businesses, and Florida's economic health will suffer accordingly. Elders have much to offer to the business community. Florida employers are becoming increasingly aware of the knowledge, experience, maturity and work values that older workers bring to the workplace.

Aging with purpose also includes elder volunteers who donate their time and expertise in performing critical services that strengthen Florida communities and benefit residents of all ages. In one year alone (2001), elders were among the 52,890 volunteers who provided more than 2.6 million hours of service to over 100,000 elders, with an estimated value of \$41.5 million, in support of programs administered by the Department and its partner agencies.<sup>6</sup> These elder volunteers, for example, act as resident advocates for people in nursing homes and assisted living facilities, serve as senior companions to frail elders, provide health insurance counseling to their fellow elders in the SHINE (Serving the Health Insurance Needs of Elders) program, mentor at-risk children as part of the Department's intergenerational initiatives, and provide information to the public in support of the Department's self-care and positive aging campaigns.

## **? AGING WITH DIGNITY**

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Aging with dignity can be defined as elders retaining control over their own lives through information, choices, and opportunities. In particular, frail or disabled elders have the right to live their lives with dignity, and they require competent, compassionate, and respectful care to safeguard this right. To this end, the Department is developing consumer-driven programs which empower elders to make decisions about their own care, selecting appropriate providers, services, and agencies. These programs deliver information and services that are culturally sensitive, consumer-driven, and community-based.

A major Department program emphasis is educating communities about Florida's aging population, to help people of all ages better understand the needs of their elder relatives, friends, neighbors, and coworkers. Through increased public understanding, it is hoped that Department information and education programs will bring about positive changes in attitudes and behaviors of the Florida public toward older individuals.

As another means to promote aging with dignity, the Department fosters intergenerational projects, such as elder mentoring of high-risk children, which promote mutual understanding, respect, and caring across the generations. AARP refers to intergenerational programs as the "purposeful



bringing together of different generations in ongoing and mutually beneficial planned activities designed to achieve specified goals. Through intergenerational programs, young and old share their talents and resources, supporting each other in relationships that benefit both the individuals and the community.”

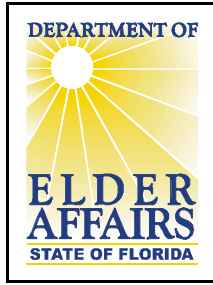
Aging with dignity is as important during the last phase of life as it is during any other time of life. Quality end-of-life care respects the unique needs and preferences of the dying person, within health-care cost constraints. Hospice offers one of several models for end-of-life care which provide appropriate and compassionate care in a cost-efficient manner. Appropriate end-of-life care involves planning and education about choices long before the moment a terminal diagnosis is given. The Department supports the right of terminally-ill elders to receive medical information about their prognosis to prepare themselves and their families for death; a choice of medical setting that best meets their needs and the needs of their family; and legal information in order to make informed choices about advance directives, living wills, health-care surrogates, and durable powers of attorney.

The Department supports the following quality end-of-life issues concerning elders receiving appropriate treatment at the end of life:

- treatment by medical professionals who have been educated to provide technically competent and compassionate end-of-life care;
- adequate treatment for pain;
- acknowledgment of the spiritual aspect of dying;
- spiritual assistance consistent with elders’ experience of the sacred;
- support of family relationships rather than allowing the complexities of medical care to act as a barrier between professional and family caregivers; and
- having families receive the skilled support necessary to enable them to care for their dying elders and experience the benefits which flow from providing that care.

The Department also supports and promotes the following measures with respect to informing the business and education communities, as well as all Florida citizens, about aging with dignity and its relationship to end-of-life issues:

- increase the public’s knowledge about end-of-life options and palliative care;
- integrate palliative care into the training and licensing of health care professionals;



- educate insurance companies about the financial benefits of palliative care; and
- eliminate provider incentives to use costly curative interventions when unwarranted.

A collaborative effort between the Department and the Florida Partnership for End-of-Life Care, the public education booklet *Making Choices - Beginning to Plan for End-of-Life Care* is a compilation of articles of hospices, palliative care, ethics, and other topics to assist individuals and families in coping with end-of-life issues. The Department also conducts surveys and workshops with respect to these issues, and promulgates rules for hospice.

## ***? AGING IN AN ELDER-FRIENDLY ENVIRONMENT***

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Aging in an elder-friendly environment means support of older residents by communities through structural and design modifications to housing, businesses, transportation, and related lifestyle issues. The Department works with communities participating in the Communities for a Lifetime initiative, sharing a common recognition of the need to prepare for the increased rate of growth of older Floridians throughout the state. This initiative encourages communities to conduct self-assessments of existing facilities and services, and to make appropriate accommodations to its aging residents, permitting them to live as independently as possible. Over 50 communities currently participate in the Communities for a Lifetime initiative.

The Communities for a Lifetime initiative relies on a cooperative effort among all major components of the community such as city and regional planners, builders, architects, and environmentalists. Through this effort, the community grows in a thoughtful and planned way to accommodate emerging needs. For example, safety and traffic concerns can be addressed while planning senior housing options with health care, shopping, and other services in close proximity. Businesses can also play a key role in the planning process. With older Floridians comprising a significant and growing proportion of buying power in the state, it makes good business sense to focus on the needs of the elder market. For example, increased lighting, wider/clearer aisles, wider/easy-to-maneuver doorways, and similar structural modifications make a business more responsive to the needs of elders while also better serving families with young children and residents with disabilities. Delivery service or transportation assistance by businesses can increase elder access to shopping and provide a critical service for frail elders.



## END NOTES

1. State of Florida Population Data, Office of Economic and Demographic Research, The Florida Legislature, September, 2002.
2. Extrapolation by the Department of Elder Affairs Planning and Evaluation Unit from the 1996 National Family Caregiver Survey.
3. U.S. Department of Health and Human Services, "Informal Caregiving: Compassion in Action," Office of the Assistant Secretary for Planning and Evaluation, Administration on Aging.
4. Alliance for Aging Research, "Will You Still Treat Me When I'm 65?," Report of the Alliance for Aging Research, Washington, DC, 1996; 13-15.
5. Florida Department of Labor and Employment Security, "Florida's Workforce 2005."
6. Florida Department of Elder Affairs, volunteer data from the Office of Volunteers and Community Service, 2002.

## GOALS, OBJECTIVES AND PERFORMANCE MEASURES



Goal 1: Age in Place	
Objective	Performance Measures*
1a: To help elders to remain in the least restrictive, most appropriate and safe setting	Percent of elders CARES determined to be eligible for nursing home placement who are diverted <i>Output Measure:</i> Total number of CARES assessments
1b: To prevent/delay premature nursing home placement	Percent of most frail elders who remain at home in the community instead of going into a nursing home
1c: To use long-term care resources in the most efficient and effective way	Average monthly savings per consumer for home care versus nursing home care compared to comparable consumer groups
1d: To leverage a variety of non-state resources whenever possible	Percent of CCE clients defined as "probable Medicaid eligibles" who remain in state-funded programs
1e: To efficiently manage and maximize financial resources	Percent of agency/program administration and support positions compared to total agency/program positions
Goal 2: Age with Security	
2a: To provide prompt and appropriate services to elders who are at risk of nursing home placement	Percent of CARES imminent referrals served
2b: To provide prompt and appropriate services to elders referred from Adult Protective Services who meet frailty level criteria	Percent of Adult Protective Services (APS) referrals in need of immediate services to prevent further abuse are served within 72 hours
2c: To improve the nutritional status of elders	Percent of new service recipients with high-risk nutritional status whose nutritional status improved <i>Output Measure:</i> Number of congregate meals served

2d: To train Assisted Living Facility and Adult Family Care Home administrators and staff on the requirements for operating a quality facility	Percent of Assisted Living Facility and Adult Family Care Home participants passing the competency test <i>Output Measure:</i> Number of Assisted Living facilities and Adult Family Care Home proprietors and staff trained
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Goal 2: Age with Security (continued)	
2e: To ensure the security of vulnerable elders residing in long-term care facilities through annual facility reviews and complaint investigation	Percent of complaint investigations initiated within working days [applies to LTCOC] <i>Output Measure:</i> Number of complaint investigations completed
2f: To ensure that consumers needing guardianship services are provided that protection	Percent of service activities on behalf of frail or elders initiated by public guardianship within 5 receipt of request <i>Output Measure:</i> Number of judicially approved guardianship plans (applies to Public Guardianship)
Goal 3: Age with Dignity	
3a: To assist elders to maintain their independence and choices in their home as long as possible	Percent of new service recipients whose ADL score has been maintained or improved
3b: To assist elders to maintain their independence and choices in their communities as long as possible	Percent of new service recipients whose IADL score has been maintained or improved
Goal 4: Age with Purpose	
4a: To provide caregivers with assistance/respite to help them to be able to continue providing care	Percent of family and family-assisted caregiver report they are very likely to provide care
Goal 5: Age in an Elder-Friendly Environment	
5a: To help elders to have home environments that are as safe as possible	Percent of elders assessed with high or moderate risk environments who improved their environments
Other Department Output Measures	
Number of people served	

\* Under Florida's Government Performance and Accountability Act, all state agencies are required to develop and demonstrate accountability in the expenditure of tax dollars. For the state fiscal year 2000-01, the table lists measures that have been adopted for the Department of Elder Affairs.

\*\* Unduplicated client count in the automated Client Information Registration and Tracking System (CIRTS) performance-based program budgeting. This does not include all clients served by the Older Americans Resource Survey (OARS).



## APPENDICES

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### TABLE OF CONTENTS

Administrative Structure .....	19
Directory of Planning and Service Areas (PSAs) .....	22
Map of Planning and Service Areas (PSAs) .....	25
Organizational Structure .....	26
Florida's Older Americans Act Programs .....	27
Financial Plan .....	28
Florida's Allotments under the Older Americans Act of 1965, as Amended .....	28
Titles III/VII 2001/2002 Allocation .....	35
State Agency Allocation by PSAs .....	36
State Program Allocations by PSAs .....	38
USDA: Donation of Cash and Commodities .....	39
Rural Considerations .....	39
Florida's 60+ Minority Population Near Poverty Level .....	40
Assurances .....	41



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## ADMINISTRATIVE STRUCTURE

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### ? *STATE LEVEL ORGANIZATION*

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The Florida Department of Elder Affairs is designated as the state agency on aging under authority of Chapter 430, Florida Statutes. Chapter 58A-1, Florida Administrative Code, contains the administrative rules governing the Florida aging program.

The Department of Elder Affairs is a single-purpose human services agency. The programs administered by the agency include the Older Americans Act, Community Care for the Elderly, Home Care for the Elderly, Alzheimer's Disease Initiative, CARES (nursing home pre-admission screening program), Emergency Home Energy Assistance for the Elderly Program (EHEAEP), Aged and Disabled Adult Medicaid Home and Community-based Services Waiver, Assisted Living for the Elderly Medicaid Waiver, SHINE (Serving Health Insurance Needs of Elders), RELIEF (Respite for Elders Living in Everyday Families), Managed Long-Term Care Programs, Consumer Directed Care Research and Demonstration, and the Adult Care Food Program.

The Department prepares and promulgates policy concerning all programs and long term care services within its roles and responsibilities. As the state agency on aging, it has developed standards of administrative practice in order to assure proper and efficient administration of the Florida State Plan on Aging. These practices are delineated in administrative rules, program manuals, and other policy memoranda.

Most program goals and implementation methodologies are provided in written program manuals. The Department's Home and Community-Based Services Handbook, which consolidated all program policy and procedures in one document, is in the final phases of rule promulgation. The purpose of this manual is to bring uniformity to policy across all aging programs administered by the state unit on aging.

Program assistance and consultation services are provided by staff of the Department of Elder Affairs in matters concerning the aging program policies and procedures. The Department conducts programmatic and administrative monitoring of the area agencies on aging according to a schedule prepared at the beginning of each year to ensure compliance with state and federal guidelines.



The Department has been refining the monitoring process over the last two years to become more effective and efficient. Changes being implemented this year build on the earlier revised process. A single score, based on all the elements (weighted according to importance) of the monitoring process, will be calculated to indicate the performance achievement of each area agency. The calculation is performed by the Department's Planning and Evaluation unit to ensure objectivity. Subsequent monitoring visits will take from one to four days, depending on their score, thereby building in incentives for areas to perform well. Another change in the monitoring process is that the final report will include the response of the area agency on aging to the initial report. The first monitoring trip produced very good results with greater efficiency and immediate feedback to the area agency.

The Department of Elder Affairs coordinates with other state agencies as a representative of older persons. Formal agreements have been executed with several governmental entities to better coordinate aging program issues and services. In particular, there is inter-agency coordination with the Department of Children and Family Services (formerly Department of Health and Rehabilitative Services) which administers the state's Adult Protective Investigations, Protective Supervision, Eligibility Determination Services, Developmental Services, and Substance Abuse and Mental Health Programs. The department also coordinates efforts with the Agency for Health Care Administration which houses the state Medicaid program, facility licensure, and health care planning programs and the Department of Health on preventing falls in elders.

### **? *SUB-STATE LEVEL***

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The Department of Elder Affairs contracts with 11 Area Agencies on Aging to administer most aging programs. Each area agency on aging is responsible for planning local aging services, selecting service providers, administering contracts and monitoring and evaluating service provider performance in the provision of services to elders. The area agency on aging prepares a multi-year area plan on aging which details goals and objectives to be accomplished and specific services to be provided in the planning and service area. This plan is part of the annual contract with the Department of Elder Affairs.

The State operates the Elder Helpline, a toll free information and referral service. Calls are automatically forwarded to the Helpline local to the caller. In an effort to ensure consumers receive the most complete and accurate information and referrals possible from professional level staff, all 11 area agencies provide this service. Additionally, eight area agencies expanded their information and referral role by also offering screening and assessment. As



part of their administrative role, area agencies also provide public education, training and outreach.

In keeping with the Older Americans Act, as Amended - 2000, the department prepares a State Senior Employment Services Coordination Plan for the Community Service Employment for Older Americans (Title V) Program. The plan includes coordination with Title IIIB to increase the likelihood that eligible individuals in need will receive services.

## ***? LONG-TERM CARE OMBUDSMAN PROGRAM***

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The purpose of the Long-Term Care Ombudsman Program is to protect the health, safety and welfare of Florida's long-term care facility residents. Statutory authority for the ombudsmen to conduct their responsibilities is found in Part 1, Chapter 400, Florida Statutes, and Section 712 of the Older Americans Act.

The Department of Elder Affairs administers the Ombudsman Program in accordance with state and federal guidelines. Ombudsmen in Florida investigate complaints in nursing homes, assisted living facilities and adult family care homes. Currently the program operates 17 local district ombudsman councils with 15 to 40 members per council.



## **? *DIRECTORY OF PLANNING AND SERVICE AREAS***

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### **PLANNING AND SERVICE AREA 1**

Northwest Florida Area Agency on Aging, Inc.  
3300 North Pace Boulevard, Suite 200  
Pensacola, Florida 32505  
(850) 595-5420/ phone; (850) 595-5427/fax  
**COUNTIES:** Escambia, Santa Rosa, Okaloosa, Walton

### **PLANNING AND SERVICE AREA 2**

Area Agency on Aging for North Florida, Inc.  
2639 N. Monroe St., Suite 145B  
Tallahassee, FL 32303  
(850) 488-0055/phone; (850) 922-2420/fax  
**COUNTIES:** Washington, Holmes, Bay, Jackson, Calhoun, Gadsden, Gulf, Leon, Liberty, Franklin, Wakulla, Jefferson, Madison, Taylor

### **PLANNING AND SERVICE AREA 3**

Mid-Florida Area Agency on Aging, Inc.  
5700 S.W. 34<sup>th</sup> Street, Suite 222  
Gainesville, Florida 32608  
(352) 378-6649/phone; (352) 378-1256/fax  
**COUNTIES:** Hamilton, Suwannee, Lafayette, Dixie, Columbia, Gilchrist, Lake, Levy, Union, Bradford, Alachua, Putnam, Citrus, Marion, Sumter, Hernando

### **PLANNING AND SERVICE AREA 4**

Northeast Florida Area Agency on Aging, Inc.  
4401 Wesconnett Boulevard, 2<sup>nd</sup> Floor  
Jacksonville, FL 32210-7387  
(904) 777-2106/phone; (904) 777-2128/fax  
**COUNTIES:** Baker, Nassau, Duval, Clay, St. Johns, Flagler, Volusia



#### **PLANNING AND SERVICE AREA 5**

Area Agency on Aging of Pasco-Pinellas, Inc.  
9455 Koger Boulevard  
St. Petersburg, FL 33702  
(727) 570-9696/phone; (727) 570-5098/fax  
**COUNTIES:** Pasco, Pinellas

Effective Feb. 1, 2003, the new address will be:  
9887 4th Street North  
St. Petersburg, Fla. 33702

#### **PLANNING AND SERVICE AREA 6**

West Central Florida Area Agency on Aging, Inc.  
5911 Breckenridge Parkway, Suite B  
Tampa, Florida 33610  
(813) 740-3888/phone; (813) 623-1342/fax  
**COUNTIES:** Hillsborough, Manatee, Polk, Highlands, Hardee

#### **PLANNING AND SERVICE AREA 7**

Senior Resource Alliance  
988 Woodcock Road, Suite 200  
Orlando, FL 32803  
(407) 228-1800/phone; (407) 228-1835/fax  
**COUNTIES:** Seminole, Orange, Osceola, Brevard

#### **PLANNING AND SERVICE AREA 8**

Senior Solutions for Southwest Florida, Inc.  
2285 First Street  
Fort Myers, FL 33901  
(941) 332-4233/phone; (941) 332-3596/fax  
**COUNTIES:** Desoto, Charlotte, Lee, Glades, Hendry, Sarasota, Collier

#### **PLANNING AND SERVICE AREA 9**

Area Agency on Aging of Palm Beach/Treasure Coast, Inc.  
1764 N. Congress Avenue, Suite 201  
W. Palm Beach, FL 33409  
(561) 684-5885/phone; (561) 697-7250/fax  
**COUNTIES:** Indian River, Martin, Okeechobee, St. Lucie, Palm Beach



### **PLANNING AND SERVICE AREA 10**

Area Agency on Aging of Broward County, Inc.  
5345 N.W. 35<sup>th</sup> Avenue  
Fort Lauderdale, FL 33309  
(954) 714-3456/phone; (954) 497-1586/fax  
**COUNTIES:** Broward

### **PLANNING AND SERVICE AREA 11**

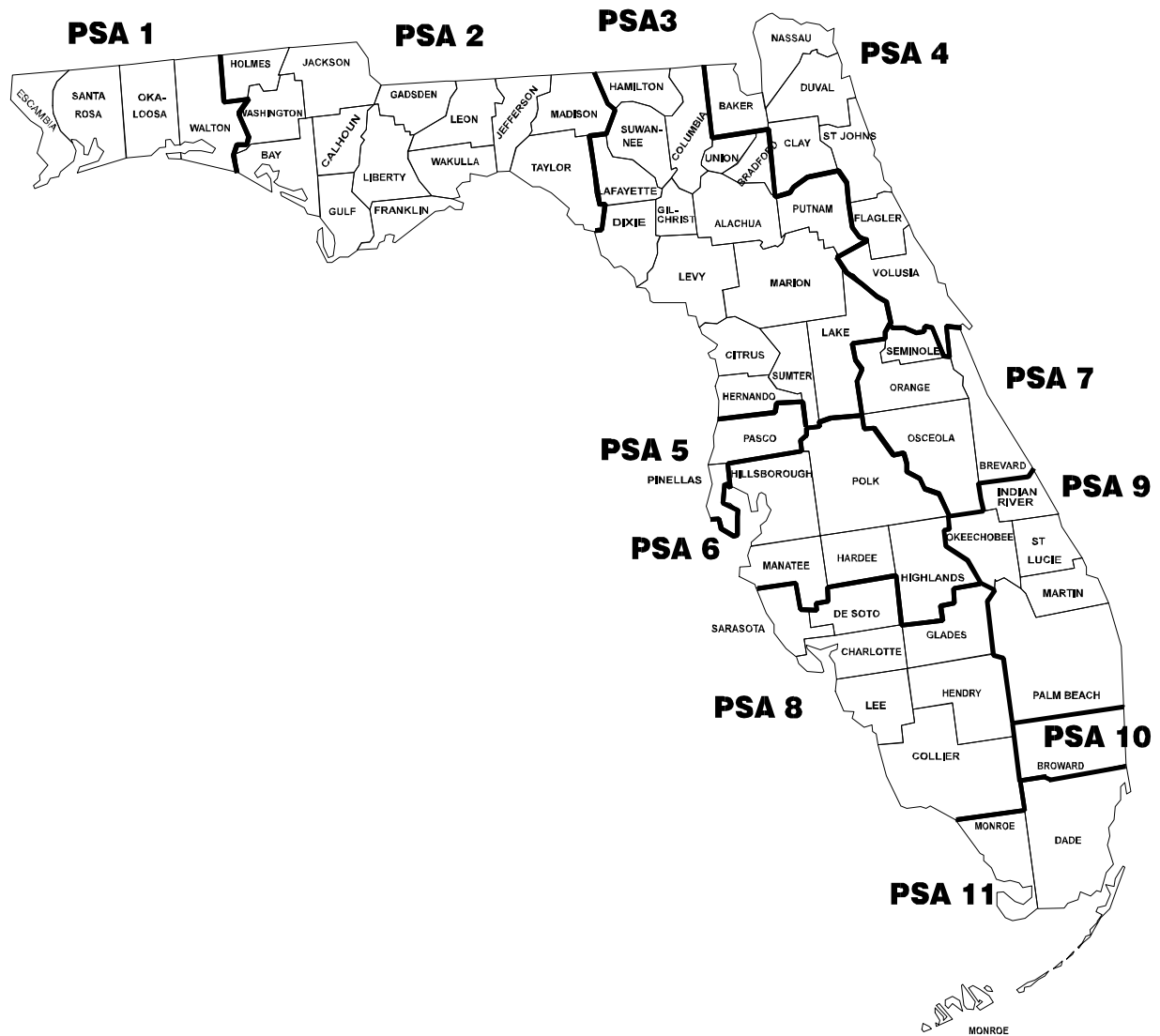
Alliance for Aging, Inc.  
9500 South Dadeland Blvd., Suite 400  
Miami, FL 33156  
(305) 670-6500/phone; (305) 670-6516/fax  
**COUNTIES:** Dade, Monroe

### **STATE UNIT ON AGING**

**Terry F. White, Secretary**  
Department of Elder Affairs  
4040 Esplanade Way  
Tallahassee, FL 32399-7000  
(850) 414-2000/phone; (850) 414-2004/fax

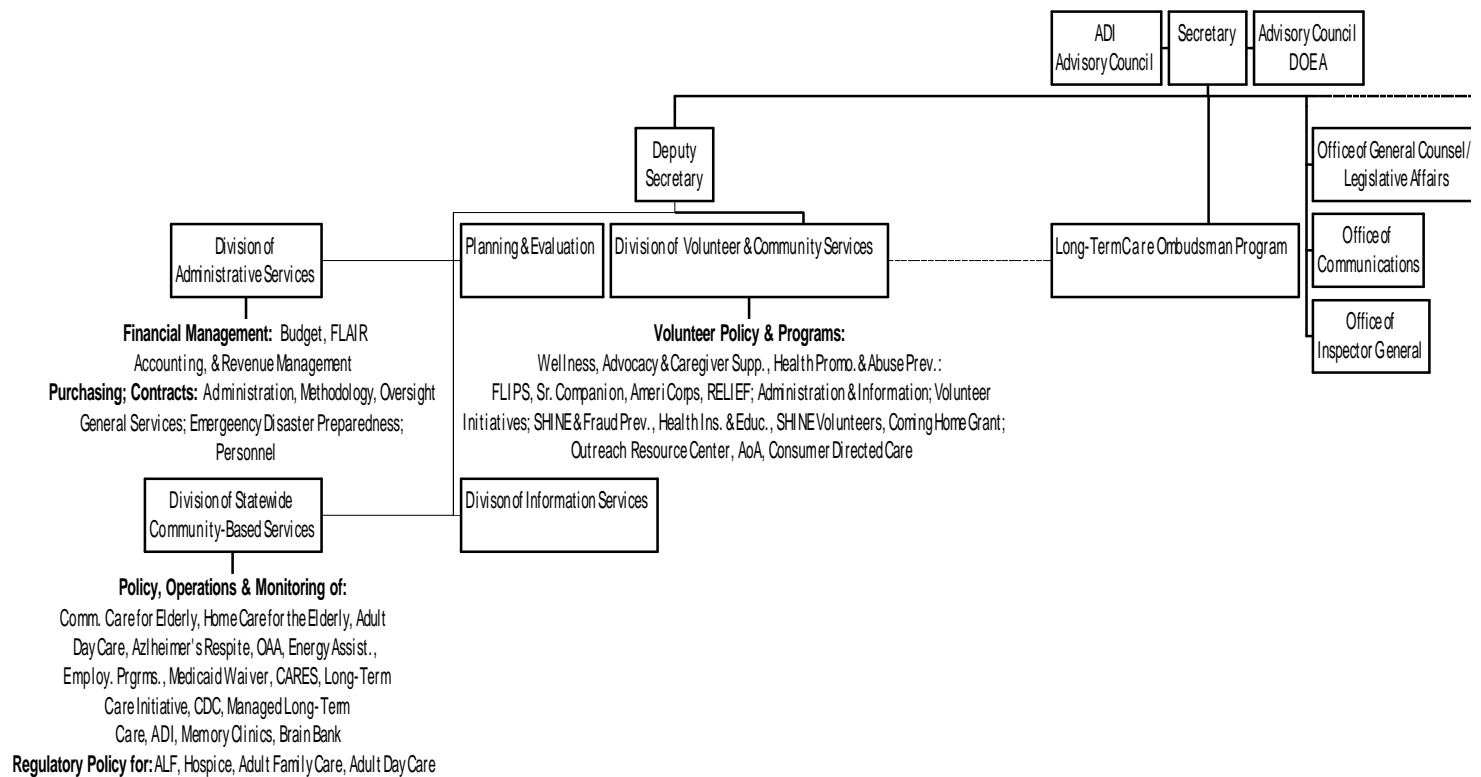
## ? MAP OF PLANNING AND SERVICE AREAS

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# Organizational Structure of the Department of Elder Affairs





## FLORIDA'S OLDER AMERICANS ACT, TITLE III PROGRAMS

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The following is a brief description of the community-based programs funded by the Older Americans Act and administered by the Florida Department of Elder Affairs. As the designated state unit on aging, the Florida Department of Elder Affairs receives an annual allotment of funds under Title III of the Older Americans Act, as Amended - 2000, from the Administration on Aging in the U.S. Department of Health and Human Services.

In Florida, these funds are allocated to 11 Area Agencies on Aging based on an approved intrastate funding formula. The Area Agencies on Aging plan for, develop, and implement a system of services for older individuals age 60 and above in each of the 11 Planning and Service Areas of the state. This comprehensive and coordinated system of services is described in the area plans. The area agencies contract with provider agencies to obtain supportive, in-home, and nutrition services for frail older individuals. They also oversee multi-purpose senior center activities.

Services are to be targeted to those in greatest social or economic need with particular emphasis on culturally and racially diversified minority elderly with low incomes and older individuals residing in rural areas. Older Americans Act programs administered include:

Title III-B Supportive Services/In-Home  
Title III-C Nutrition Services  
Title III-D Disease Prevention and Health Promotion  
Title III-E National Family Caregiver  
Long-Term Care Facility Ombudsman Program (LTCOC)  
Elder Abuse Prevention

The federally funded Older Americans Act provides a variety of supportive in-home and community-based services. Many service options are available through Titles III-B, III-C, III-D and III-E. The following partial listing represents some of the services offered under the Act:

! Case Management	! Adult Day Care	! Personal Care
! Respite Care	! Housing Improvement	! Counseling
! Injury Prevention	! Homemaker	! Transportation
! Congregate Meals	! Home Delivered Meals	! Chore
! Nutrition Education	! Volunteer Health Coordinators	



## FLORIDA'S ALLOTMENTS UNDER THE OLDER AMERICANS ACT, AS AMENDED - 2000

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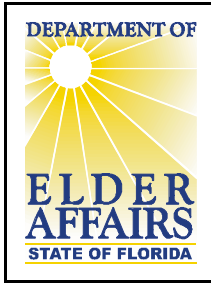
The amounts made available to Florida under Title III of the Older Americans Act (OAA), as amended - 2000, are to be distributed within the state based on a formula which must be published for review and comment. A requirement of the OAA is to give preference to people of greatest economic or social needs, with particular attention to minority individuals with low-incomes and older individuals residing in rural areas. One of the methods of achieving that goal is to design the Intrastate Funding Formula to incorporate factors of economic and social need and low-income minority status based on statistical and demographic data.

The formula for distribution of Federal Title III, OAA funds to the Planning and Service Areas (PSAs) is in four parts: The first describes the methodology for establishing the amounts to be made available to support services and multi-purpose senior centers (Title III-B), congregate nutrition (Title III-C1), home-delivered nutrition (Title III-C2) and national family caregiver (Title III-E) in each PSA. The second indicates the methodology for apportioning the amounts to be made available for area agency on aging administration in each area. The third describes the methodology for amounts to be made available for disease prevention and health promotion (Title III-D) and elder abuse prevention (part of Title VII). The fourth describes the minimum funding for "rural areas" as required by the Older Americans Act.

### **DISEASE PREVENTION AND HEALTH PROMOTION (III-D) AND ELDER ABUSE PREVENTION (VII):**

The Department administers a variety of community-based health promotion, wellness, and abuse prevention initiatives throughout the state. These programs are coordinated by the Department, the area agencies on aging and local service providers. The Department features information on wellness and abuse prevention in its monthly publication, *Elder Update*, which is circulated to approximately 100,000 elders across Florida.

Elder abuse prevention efforts are developed and coordinated for the prevention and treatment of elder abuse, neglect and exploitation. Public education and outreach to help identify and prevent elder abuse, neglect and exploitation are conducted at the state, regional and local levels. The Department coordinates with and actively seeks input and advice from many agencies, programs and



organizations to identify and assist vulnerable elders. Some of these entities include area agencies on aging, adult protective services programs, the State Long-Term Care Ombudsman program, facility and long-term care provider licensure programs, Medicaid fraud and abuse services, victim assistance programs, consumer protection and state and local law enforcement programs, as well as other state and local programs and services that identify and assist vulnerable older individuals. Each year the funds are allotted according to the identified statewide concerns and initiatives developed through research and planning efforts.

#### **NATIONAL FAMILY CAREGIVER SUPPORT (III-E):**

To expedite initiation of services under this new program, the Department allocated funds to the 11 area agencies on aging using the approved intrastate funding formula. The department encouraged each planning and service area to initiate and promote innovative programming for caregivers of elders and grandchildren. Many of the traditional services, such as respite and caregiver education, were expanded to serve more caregivers, plus a variety of new approaches have emerged. The table below shows that the most common services include respite, counseling, caregiver forums, caregiver training/support, public education, screening and assessment, and outreach.

The National Family Caregiver Support program funding has been an impetus for change in the local areas. Some area agencies now have staff devoted to caregiver information and assistance needs. Other areas now offer ancillary services such as day care and transportation to augment support groups, addressing caregivers' access barriers. Other enhancements include offering night and weekend respite and later hours daycare. One area created a caregiver advisory council to be responsive to caregivers' changing needs.

The funding also helped many areas to increase their publicity/marketing, such as using billboards and radio spots, to help make caregivers aware of available services. In addition, the funding helped stimulate caregiver community coalition building. Many additional improvements have been made possible with the new funding.

Support services for grandparents and other older individuals who are relative caregivers of children under the age of 18 are available in each planning and service area. The Department has also added a provision for direct reimbursement to caregivers for services authorized within this program. This provision will expand services to rural areas where traditional providers are not available and create flexibility for meeting the needs of all caregivers.



Title III E Service Plan		
Service	Funding	Projected # of Caregivers Served - FFY 2001-2002
Adult Day Care/ Adult Day Health Care*	\$671,188	
Caregiver Forum	\$324,049	1,620
Caregiver Training/Support	\$996,933	977
Chore	\$87,166	30
Counseling	\$943,891	781
Day Care*	\$22,654	
Education/Training	\$49,000	
Housing Improvement	\$557,910	50
Industrial Cleaning	\$9,687	
Information	\$57,789	300
Legal	\$169,228	
Other Services	\$1,118,438	
Outreach	\$546,814	2,459
Physical Fitness Program	\$26,163	
Public Education	\$693,610	8,930
Referral	\$113,154	1,000
Respite	\$3,798,548	1,550
Respite - in facility	\$11,803	50
Screening and Assessment	\$26,228	2,447
Sitter	\$25,441	50
Supplies and Services-Medical	\$115,198	750
Supplies/Services	\$160,912	
Support Group	\$26,314	200
Transportation	\$37,188	820
<b>Total</b>	<b>\$10,490,605</b>	<b>22,014</b>

\* The clients served are not the caregivers, so the units do not show where

The caregivers served are reflected in the other counts

Not based on beds (other than for the residential care) indicated that is

not available on a per person basis. This may be due to the nature of the contract. For example, a contract may be for preparation of a manual or training guide, rather than for training a certain number of people.



Objectives specifically for the National Family Caregiver Support Program include:

1. Prevent caregiver failure and improve caregiver quality of life
  - 1.1 Caregiver mental health will improve  
*Services to Address the Objective:* caregiver counseling, respite
  - 1.2 Caregiver financial well-being will improve  
*Services to Address the Objective:* Home Care for the Elderly program, information and referral/assistance
  - 1.3 Caregiver physical health will be maintained or improve  
*Services to Address the Objective:* Information and referral/assistance, training, respite, transportation
  - 1.4 Caregiver quality of life will improve  
*Services to Address the Objective:* all services
2. Improve the following caregiver outcomes:
  - 2.1 Percent of family and family assisted caregivers whose ability to provide care is maintained or improved after service intervention
  - 2.2 Percent of caregivers who think that home and community-based services help them “a lot” to be better caregivers
  - 2.3 Percent of caregivers who think that home and community-based services enable them to provide care for a longer period of time

#### **LONG TERM CARE OMBUDSMAN:**

The Ombudsman Program is a statewide system of councils which receive, investigate, and resolve complaints made by, or on behalf of, individuals living in nursing homes, assisted living facilities or adult family care homes. Each Planning and Service Area has paid staff who coordinate the work of trained volunteers who investigate and resolve the complaints.

The Ombudsman Program is administered by the Department of Elder Affairs in accordance with Older Americans Act and state guidelines. The program is responsible to the department Secretary and is operationally located within the Division of Volunteer and Community Services. The State Long-Term Care Ombudsman is appointed by the Secretary of the Department of Elder Affairs. In addition to the federally required complaint investigations, Florida statute requires the ombudsmen to conduct annual administrative inspections of long-term care facilities.



## ? ALLOCATION OF FUNDS FOR SERVICES

The allocation formula is used to distribute federal funds appropriately under Title III. These funds represent not more than 85 percent of the costs of providing services to older people for III-B and C and 75 percent for Title III-E. The funding amount is matched through the Community Care for the Elderly (CCE) program at 5 percent for III-B, C1 and C2 and through the Alzheimer's Respite at 15 percent for III-E.

The goals of Florida's funding formulas are equity and fairness in the distribution of resources. In order to achieve these goals, specific factors have been included in the formulas. The factors selected and weights assigned to each are reasonably related to the uses of the funds and the purposes intended. The formulas were revised during 1988-89 in response to a federal district court ruling and were developed in consultation with all Area Agencies on Aging and three expert consultants.

FACTORS	WEIGHTS	DATA SOURCES
60+ Population	35%	From Florida Consensus Estimating Conference
60+ Population Below Poverty Level	35%	U.S. Census percentages applied to Florida Consensus Estimating Conference 60+ population data
60+ Minority Population at 125% of Poverty	15%	U.S. Census percentages applied to Florida Consensus Estimating Conference 60+ population data
Disability Frequencies	15%	People 60 and over having two or more mobility and self care limitations (1990 census of population and housing special tabulation on aging) applied to Florida Consensus Estimating Conference 60+ population data



**ASSUMPTIONS:** The assumptions contained in the Intrastate Funding Formula for Older Americans Act Title III-B, III-C, III-E and area agency on aging administration are that:

1. The state agency will use the most recent satisfactory data available to determine the numerical values for the formula factors.
2. The Florida Consensus Estimating Conference population data will be the primary source of population statistics.

**DEFINITIONS:**

1. The term "greatest economic need" is defined as the need resulting from an income level below the poverty threshold established by the Bureau of the Census.
2. The term "greatest social need" is defined as the need caused by non-economic factors which include physical and mental disabilities, language barriers, and cultural or social isolation including that caused by racial or ethnic status which restrict an individual's ability to perform normal daily tasks or which threatens his or her capacity to live independently.
3. The term "low-income" shall mean an income at or below 125 percent the poverty threshold established by the U.S. Census Bureau.

## **? AREA AGENCIES ON AGING ADMINISTRATION**

The Older Americans Act Title III funds designated for area agency on aging administrative costs are also allocated according to a formula. After allocation of a base amount equal to seven percent of the Planning and Service Area's Title III service funds or \$230,000, whichever is greater, the remainder is allocated based on three factors:

- ! 60+ Population @ 50 percent
- ! Number of Counties in PSA @ 25 percent
- ! Community Care for the Elderly Service Funding @ 25 percent.



# ***FLORIDA'S ALLOTMENTS UNDER THE OLDER AMERICANS ACT OF 1965, AS AMENDED***

## **Awards: Title III - 2002/7, Title VII - 2002/8**

<b>Allotment/ Modification</b>	<b>Total Amount III/VII</b>	<b>III-B Supportive Services</b>	<b>III-C1 Congregate Meals</b>	<b>III-C2 Home Delivered Meals</b>	<b>III-D Preventive Health</b>	<b>III-E Nat'l Family Caregiver</b>	<b>VII Ombuds- man Activity</b>	<b>VII Elder Abuse Prevention</b>
Florida 2001 Allotments - (Please see Note A)	\$78,088,904	\$25,986,733	\$26,317,912	\$12,980,649	\$1,547,751	\$912,178	\$677,688	\$383,366
State Agency Administration	\$3,889,699	\$1,299,377	\$1,315,886	\$946,532	\$77,388	\$600,516	\$0	\$0
Statewide Service Allocations								
• Long Term Care Ombudsman	\$1,316,888	\$404,660					\$912,178	
• III-D Preventive Health - (Please see Note B)	\$1,470,363				\$1,470,363			
• Elder Abuse Prevention - (Please see Note C)	\$383,366							\$383,366
AAAs Balanced the Gert	\$71,078,688	\$24,282,736	\$25,002,016	\$12,284,117	\$0	\$939,799	\$0	\$0
• AAA Administration	\$6,827,888	\$2,791,134	\$1,623,283	\$1,462,471		\$800,980		
• AAA Service Allocation	\$64,250,800	\$21,491,602	\$23,378,733	\$10,821,646	\$1,470,363	\$8,588,819	\$0	\$187,000

**Notes:**

- A.) Allotment is prior to transfers between title and award of additional amount (\$812,341) in 9/2002.  
 B.) The amount was allocated to AAAs. The allocation by PSA is included on page 37.  
 C.) Of this amount, \$187,000 (\$17,000 each) was allocated to the AAAs; the balance was allocated for other projects and headquarters costs. Title III-D and VII are combined in a contract with each of the AAAs.

## **? TITLE III/VII 2001/2002 ALLOCATION**

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<b>Program Title</b>	<b>2001 Allocation</b>	<b>2002 Allocation</b>	<b>Difference</b>	<b>% Change</b>
<b>Supportive Services (111-B)</b>	<b>\$22,027,242</b>	<b>\$25,986,733</b>	<b>\$3,959,491</b>	<b>17.98%</b>
<b>Congregate Meals (III-C1)</b>	<b>\$23,373,108</b>	<b>\$26,317,912</b>	<b>\$2,944,804</b>	<b>12.60%</b>
<b>Home Delivered Meals (III-C2)</b>	<b>\$10,560,890</b>	<b>\$12,930,649</b>	<b>\$2,369,759</b>	<b>22.44%</b>
<b>Preventive Health (III-D)</b>	<b>\$1,522,680</b>	<b>\$1,547,751</b>	<b>\$25,071</b>	<b>1.65%</b>
<b>Nat'l Family Caregiver (III-E)</b>	<b>\$8,721,584</b>	<b>\$10,010,315</b>	<b>\$1,288,731</b>	<b>14.78%</b>
<b>Ombudsman Activity (VII)</b>	<b>\$677,698</b>	<b>\$912,178</b>	<b>\$234,480</b>	<b>34.60%</b>
<b>Elder Abuse Prevention (VII)</b>	<b>\$344,252</b>	<b>\$383,366</b>	<b>\$39,114</b>	<b>11.36%</b>
<b>Total (Title III and VII)</b>	<b>\$67,227,454</b>	<b>\$78,088,904</b>	<b>\$10,861,450</b>	<b>16.16%</b>

## **? STATE AGENCY ALLOCATION BY PLANNING AND SERVICE AREAS (PSAs)**

### **OAA 2002 Grant Award, Title IIIB, C, E Contracts**

<b>PSA</b>	<b>Area Agency Admin (III)</b>	<b>III-B Supportive Services</b>	<b>III-C1 Congregate Meals</b>	<b>III-C2 Home Del Meals</b>	<b>III-E Nat'l Family Caregiver</b>	<b>Total IIIB/C/E</b>	<b>Florida's Gen Rev AAA Admin</b>	<b>Total</b>
1	\$323,558	\$709,252	\$730,261	\$358,796	\$277,763	\$2,399,630	\$15,796	\$2,415,426
2	\$417,936	\$820,185	\$844,480	\$414,914	\$321,207	\$2,818,722	\$20,403	\$2,839,125
3	\$767,411	\$2,141,647	\$2,205,085	\$1,083,413	\$838,729	\$7,036,285	\$37,464	\$7,073,749
4	\$622,288	\$1,904,363	\$1,960,772	\$963,376	\$745,802	\$6,196,601	\$30,379	\$6,226,980
5	\$592,695	\$1,764,390	\$1,816,653	\$892,567	\$690,985	\$5,757,290	\$28,935	\$5,786,225
6	\$751,525	\$2,453,845	\$2,526,531	\$1,241,348	\$960,995	\$7,934,244	\$36,689	\$7,970,933
7	\$568,906	\$1,812,617	\$1,866,308	\$916,964	\$709,871	\$5,874,666	\$27,773	\$5,902,439
8	\$652,461	\$1,863,005	\$1,918,190	\$942,455	\$729,605	\$6,105,716	\$31,852	\$6,137,568
9	\$719,470	\$2,247,684	\$2,314,263	\$1,137,055	\$880,256	\$7,298,728	\$35,124	\$7,333,852
10	\$582,041	\$1,848,158	\$1,902,902	\$934,943	\$723,790	\$5,991,834	\$28,415	\$6,020,249
11	\$1,109,577	\$4,289,316	\$4,416,369	\$2,169,874	\$1,679,816	\$13,664,952	\$54,168	\$13,719,120
<b>Total</b>	<b>\$7,107,868</b>	<b>\$21,854,462</b>	<b>\$22,501,814</b>	<b>\$11,055,705</b>	<b>\$8,558,819</b>	<b>\$71,078,668</b>	<b>\$346,998</b>	<b>\$71,425,666</b>

Note: Allocation before transfer between Titles.

## **? STATE AGENCY ALLOCATION BY PLANNING AND SERVICE AREAS (PSAs)**

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### **OAA 2002 Grant Award, Title IIID**

<b>OAA 2002 Grant Award Allocations for IIID</b>			
<b>PSA</b>	<b>Preventive Health IIID</b>		
	<b>Health &amp; Wellness</b>	<b>Med. Mgmt.</b>	<b>Total IIID</b>
<b>1</b>	<b>\$63,927</b>	<b>\$21,501</b>	<b>\$85,428</b>
<b>2</b>	<b>\$55,866</b>	<b>\$18,790</b>	<b>\$74,656</b>
<b>3</b>	<b>\$176,058</b>	<b>\$59,215</b>	<b>\$235,273</b>
<b>4</b>	<b>\$86,162</b>	<b>\$28,979</b>	<b>\$115,141</b>
<b>5</b>	<b>\$103,012</b>	<b>\$34,646</b>	<b>\$137,658</b>
<b>6</b>	<b>\$95,059</b>	<b>\$31,971</b>	<b>\$127,030</b>
<b>7</b>	<b>\$136,718</b>	<b>\$45,983</b>	<b>\$182,701</b>
<b>8</b>	<b>\$62,213</b>	<b>\$20,924</b>	<b>\$83,137</b>
<b>9</b>	<b>\$70,867</b>	<b>\$23,835</b>	<b>\$94,702</b>
<b>10</b>	<b>\$84,790</b>	<b>\$28,518</b>	<b>\$113,308</b>
<b>11</b>	<b>\$165,624</b>	<b>\$55,705</b>	<b>\$221,329</b>
<b>Other Projects &amp; HQ Costs</b>			
<b>Total</b>	<b>\$1,100,296</b>	<b>\$370,067</b>	<b>\$1,470,363</b>

**Note: Above allocation does not include the \$73,123 increase in IIID which was received September 2002.**

Title IIID funds are distributed by first allocating all funding based on a formula of 50 percent medically underserved and 50 percent population below poverty age 60 and older, and then applying a hold harmless principle to previous year's total funding; enabling each area to receive at least the funding they had in the prior year.

## **? STATE PROGRAM ALLOCATIONS BY PLANNING AND SERVICE AREAS (PSAs)**

### **Florida General Revenue/Tobacco Settlement Trust Fund and Waiver\* Funding State Fiscal Year 2002-2003**

<b>PSA</b>	<b>Community Care for the Elderly Admin</b>	<b>Community Care for the Elderly Services</b>	<b>Alzheimer's/ Disease Projects/ Respite</b>	<b>Home Care for the Elderly</b>	<b>Home and Community Based Waiver* Program</b>	<b>Assisted Living Facilities Waiver*</b>	<b>Total</b>
<b>1</b>	\$50,000	\$1,270,736	\$364,084	\$483,627	\$2,429,867	\$1,237,231	\$5,835,545
<b>2</b>	\$35,000	\$1,575,272	\$454,179	\$756,841	\$4,323,007	\$1,098,590	\$8,242,889
<b>3</b>	\$35,000	\$3,749,410	\$852,992	\$874,462	\$6,039,822	\$2,875,066	\$14,426,752
<b>4</b>	\$70,000	\$3,988,358	\$599,084	\$683,998	\$5,907,779	\$2,726,609	\$13,975,828
<b>5</b>	\$35,000	\$5,959,354	\$805,574	\$873,897	\$6,353,434	\$3,155,970	\$17,183,229
<b>6</b>	\$35,000	\$4,329,536	\$850,391	\$1,011,832	\$8,638,364	\$3,108,929	\$17,974,052
<b>7</b>	\$35,000	\$3,182,592	\$633,597	\$600,799	\$8,218,048	\$2,493,454	\$15,163,490
<b>8</b>	\$70,000	\$3,914,198	\$641,647	\$610,168	\$4,009,713	\$2,728,125	\$11,973,851
<b>9</b>	\$35,000	\$3,619,625	\$846,647	\$732,557	\$9,142,900	\$2,271,589	\$16,648,318
<b>10</b>	\$35,000	\$5,586,876	\$1,826,612	\$789,623	\$5,354,307	\$2,153,126	\$15,745,544
<b>11</b>	\$70,000	\$4,683,413	\$822,081	\$2,111,657	\$25,036,020	\$5,371,596	\$38,094,767
<b>Total</b>	<b>\$505,000</b>	<b>\$41,859,370</b>	<b>\$8,696,888</b>	<b>\$9,529,461</b>	<b>\$85,453,261</b>	<b>\$29,220,285</b>	<b>\$175,264,265</b>

\*Waiver programs contain approximately 55% Federal Medicaid Funding



## **? U.S. DEPARTMENT OF AGRICULTURE: DONATION OF CASH AND COMMODITIES**

Both congregate and home-delivered meals providers are eligible for USDA commodities or cash-in-lieu of commodities. This support is available if meals served meet the criteria in the federal regulations governing the Title III-C nutrition program (Reference 45 CFR 1321). The value of cash-in-lieu of commodities is presented below.

	FFY 2002
Commodities	0.00
Cash-in-lieu of Commodities	\$6,659,871.00
Total Amount Provided by USDA for Title III-C Nutrition Program	\$6,659,871.00
Benefit Per Meal	.54

## **? RURAL CONSIDERATIONS <sup>1</sup>**

Section 307(a)(3)(B), the Older Americans Act, as amended - 2000, requires the state to spend in each fiscal year, for services to older individuals residing in rural areas of the state, an amount not less than the amount expended for such services in federal fiscal year 2000.

Since the Older Americans Act allows states to establish their own definition of "rural" for the purpose of meeting this requirement, the Florida State Plan on Aging, FFY 2000 - 2004, identifies the following 33 counties as rural areas: Baker, Bradford, Calhoun, Columbia, DeSoto, Dixie, Franklin, Gadsden, Gilchrist, Glades, Gulf, Hamilton, Hardee, Hendry, Highlands, Holmes, Jackson, Jefferson, Lafayette, Levy, Liberty, Madison, Nassau, Okeechobee, Putnam, Santa Rosa, Sumter, Suwannee, Taylor, Union, Wakulla, Walton, and Washington.

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<sup>1</sup> The definition of rural area, per the Public Health section of Chapter 381.0406, Section 2(a), Florida Statutes, is an area with a population density of less than 100 individuals per square mile or an area defined by the most recent U.S. Census as rural .



## **? FLORIDA'S 60+ MINORITY POPULATION NEAR POVERTY LEVEL - 2000**

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Planning and Service Area	60+ Minority Population Near Poverty Level
1	5,565
2	10,807
3	15,581
4	18,501
5	6,108
6	24,107
7	13,276
8	9,008
9	14,125
10	11,827
11	84,267
Total	213,172

Source: 1990 Census of Population and Housing, Special Tabulation for the Administration on Aging from the Florida Consensus Estimating Conference, January 2000.



## ASSURANCES

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The State Unit on Aging makes the following assurances, which it must be able to substantiate:

### GENERAL ADMINISTRATION:

1. **Compliance with Requirements:** The state agency agrees to administer the program in accordance with the Act, the state plan and all applicable regulations, policies, and procedures established by the commissioner or the secretary.
2. **Efficient Administration:** The state agency utilizes such methods of administration as are necessary for the proper and efficient administration of the plan.
3. **General Administrative and Fiscal Requirements:** The state agency's uniform administrative requirements and cost principles are in compliance with the relevant provisions of 45 CFR, Parts 74 and 92, except where these provisions are superseded by statute or program regulations.
4. **Training of Staff:** The state agency provides a program of appropriate training for all classes of positions and volunteers, if applicable.
5. **Management of Funds:** The state agency maintains sufficient financial control and accounting procedures to assure proper disbursement of and accounting for federal funds under the plan.
6. **Safeguarding Confidential Information:** The state agency has implemented such regulations, standards, and procedures as are necessary to meet the requirements on safeguarding confidential information under relevant program regulations.
7. **Reporting Requirements:** The state agency agrees to furnish such reports and evaluations to the secretary or the commissioner as may be specified.
8. **Standards for Service Providers:** All providers of services under this plan operate fully in conformance with all applicable federal, state, and local fire, health, safety, and sanitation and other standards prescribed in law or regulations. The State Agency provides that where





the state or local public jurisdictions require licenses for the provision of services, agencies providing such services shall be licensed.

9. **State Plan Amendments:** State plan amendments will be made in conformance with applicable program regulations.
10. **Senior Center Inventory:** The State Agency will maintain an inventory of senior centers that have been funded by Federal monies, and will develop and maintain adequate procedures to handle the sale and disposition of real property, including notifying all parties of the Federal Government's interest in the property in the event that liens are placed on the property.

#### **EQUAL EMPLOYMENT OPPORTUNITY AND CIVIL RIGHTS:**

1. **Equal Employment Opportunity:** The state agency has an equal employment opportunity policy, implemented through an affirmative action plan for all aspects of personnel administration as specified in 45 CFR, Part 74.
2. **Non-Discrimination on the Basis of Handicap:** All recipients of funds from the state agency are required to operate each program activity so that, when viewed in its entirety, the program or activity is readily accessible to and useable by handicapped persons. Where structural changes are required, these changes shall be made as quickly as possible, in keeping with 45 CFR 84.
3. **Civil Rights Compliance:** The state agency has developed and is implementing a system to ensure that benefits and services available under the state plan are provided in a non-discriminatory manner as required by Title VI of the Civil Rights Act of 1964, as amended.

#### **PROVISION OF SERVICES:**

1. **Priorities:** The state agency has a reasonable and objective method of establishing priorities for service and such method is in compliance with the applicable statute.
2. **Eligibility:** The activities covered by this state plan serve only those individuals and groups eligible under the provision of the applicable statute.



3. **Residency:** No requirements as to the duration of residence or citizenship will be imposed as a condition of participation in the state's program for the provision of services.
4. **Coordination and Maximum Utilization of Services:** The state agency to the maximum extent coordinates and utilizes the services and resources of other appropriate public and private agencies and organizations.

## **PROGRAM-SPECIFIC ASSURANCES AND PROVISIONS:**

### **Sec. 305, ORGANIZATION**

Section 305 (a)(2)(A) The State agency, except as provided in subsection (b)(5), designates for each such area (planning and service area) after consideration of the views offered by the unit or units of general purpose local government in such area, a public or private nonprofit agency or organization as the area agency on aging for such area.

Section 305 (a)(2)(B) The State agency provides assurances, satisfactory to the Assistant Secretary, that the State agency will take into account, in connection with matters of general policy arising in the development and administration of the State plan for any fiscal year, the views of recipients of supportive services or nutrition services, or individuals using multipurpose senior centers provided under such plan.

Section 305 (a)(2)(E) The State agency provides assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, with particular attention to low-income minority individuals and older individuals residing in rural areas and include proposed methods of carrying out the preference in the State plan.

The methods used to satisfy the service needs of such individuals include:

- 4.) Inclusion of such requirements in the uniform area plan format and the service provider application package.
- 5.) Monitoring of performance of the area agencies and service providers.
- 6.) Provision of technical assistance and training to area agencies on aging and service providers.

Section 305(a)(2)(F) The State agency provides assurances that the State agency will require use of outreach efforts described in section 307(a)(16).



Section 305 (a)(2)(G,H) The State agency provides assurance that the State agency will undertake specific program development, advocacy, and outreach efforts focused on the needs of low-income minority older individuals and older individuals residing in rural areas.

Section 305(c)(5) In the case of a State specified in subsection (b)(5), the State agency and area agencies provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

### **Sec. 306, AREA PLANS**

Section 306(a)(2) Each area agency on aging shall provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services

(A) services associated with access to services (transportation, outreach, information and assistance, and case management services);

(B) in home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance; and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

Section 306(a)(4)(A)(i) Each area agency on aging shall provide assurances that the area agency on aging will set specific objectives for providing services to older individuals with greatest economic need and older individuals with greatest social need, include specific objectives for providing services to low income minority individuals and older individuals residing in rural areas, and include proposed methods of carrying out the preference in the area plan.

Section 306(a)(4)(A)(ii) Each area agency on aging shall provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will

(A) specify how the provider intends to satisfy the service needs of low income minority individuals and older individuals residing in rural areas in the area served by the provider;



(B) to the maximum extent feasible, provide services to low income minority individuals and older individuals residing in rural areas in accordance with their need for such services; and

(C) meet specific objectives established by the area agency on aging, for providing services to low income minority individuals and older individuals residing in rural areas within the planning and service area.

Section 306(a)(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each area agency on aging shall

(A) identify the number of low income minority older individuals and older individuals residing in rural areas in the planning and service area;

(B) describe the methods used to satisfy the service needs of such minority older individuals; and

(C) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

Section 306(a)(4)(B) Each area agency on aging shall provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on --

(A) older individuals residing in rural areas;

(B) older individuals with greatest economic need (with particular attention to low income minority individuals and older individuals residing in rural areas);

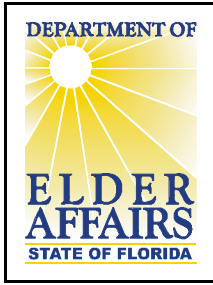
(C) older individuals with greatest social need (with particular attention to low income minority individuals and older individuals residing in rural areas);

(D) older individuals with severe disabilities;

(E) older individuals with limited English speaking ability; and

(F) older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals);

Section 306(a)(4)(C) Each area agency on agency shall provide assurance that the area agency on aging will ensure that each activity undertaken by the agency,



including planning, advocacy, and systems development, will include a focus on the needs of low income minority older individuals and older individuals residing in rural areas.

Section 306(a)(5) Each area agency on aging shall provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, with agencies that develop or provide services for individuals with disabilities.

Section 306(a)(9) Each area agency on aging shall provide assurances that the area agency on aging, in carrying out the State Long Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

Section 306(a)(11) Each area agency on aging shall provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including n

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to

increase access of those older Native Americans to programs and benefits provided under this title;

(B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) 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 planning and service area, to older Native Americans.

Section 306(a)(13)(A) Each area agency on aging shall provide assurances that the area agency on aging will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

Section 306(a)(13)(B) Each area agency on aging shall provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State agency -



- (A) the identity of each non governmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
- (B) the nature of such contract or such relationship.

Section 306(a)(13)(C) Each area agency on aging shall provide assurances that the area agency will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non governmental contracts or such commercial relationships.

Section 306(a)(13)(D) Each area agency on aging shall provide assurances that the area agency will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non governmental contracts or commercial relationships.

Section 306(a)(13)(E) Each area agency on aging shall provide assurances that the area agency will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

Section 306(a)(14) Each area agency on aging shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

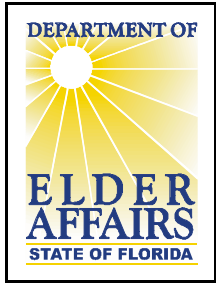
Section 306(a)(15) Each area agency on aging shall provide assurances that preference in receiving services under this title will not be given by the area agency on aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title.

## **Sec. 307, STATE PLANS**

Section 307(a)(1) The state plan --

(A) requires each area agency on aging designated under section 305(a)(2)(A) to develop and submit to the State agency for approval, in accordance with a uniform format developed by the State agency, an area plan meeting the requirements of section 306; and

(B) is based on such area plans.



Section 307(a)(2) The plan provides assurance that the State agency will--

- (A) evaluate, using uniform procedures described in section 202(a)(29), the need for supportive services (including legal assistance pursuant to 307(a)(11), information and assistance, and transportation services), nutrition services, and multipurpose senior centers within the State;
- (B) develop a standardized process to determine the extent to which public or private programs and resources (including volunteers and programs and services of voluntary organizations) that have the capacity and actually meet such need; and
- (C) specify a minimum proportion of the funds received by each area agency on aging in the State to carry out part B that will be expended (in the absence of a waiver under section 306(b) or 316) by such area agency on aging to provide each of the categories of services specified in section 306(a)(2). Currently, the minimum percentages are 20 percent for access services, 8 percent for in-home services and 1 percent for legal services.

Section 307(a)(3) The state plan –

- (A) includes (and may not be approved unless the Assistant Secretary approves) the statement and demonstration required by paragraphs (2) and (4) of section 305(d) (concerning intrastate distribution of funds); and
- (B) with respect to service of or older individuals residing in rural areas–
  - (i) provides assurances that the State agency will spend of each fiscal year, not less than the amount expended for such services for fiscal year 2000;
  - (ii) identifies, for each fiscal year to which the plan applies, the projected costs of providing such services (including the cost of providing access to such services); and
  - (iii) describes the methods used to meet the needs for such services in the fiscal year preceding the first year to which the plan applies.

The methods used to satisfy service needs of older individuals who reside in rural areas include:

- 1) Inclusion of such requirements in the uniform area plan format and the service provider application package.
- 2) Monitoring of performance of the area agencies and service providers.





- 3) Provision of technical assistance and training to area agencies on aging and service providers.

The department determined the amount spent in the counties identified as rural in the State Plan on Aging for FFY 1999-2000. The department then identifies the cost of providing services by reviewing the services planned for the rural counties in each planning and service area. The statewide average unit cost for each type of service is used to estimate the overall spending for the rural areas.

Section 307(a)(4) The plan provides assurance that the State agency will conduct periodic evaluations of, and public hearings on, activities and projects carried out in the State under this title and title VII, including evaluations of the effectiveness of services provided to individuals with greatest economic need, greatest social need, or disabilities, with particular attention to low-income minority individuals and older individuals residing in rural areas.

Section 307(a)(5) The plan provides assurance that the State agency will—

(A) afford an opportunity for a public hearing upon request, in accordance with published procedures, to any area agency on aging submitting a plan under this title, to any provider of (or applicant to provide) services;

(B) issue guidelines applicable to grievance procedures required by section 306(a)(10); and

(C) afford an opportunity for a public hearing, upon request, by an area agency on aging, by a provider of (or applicant to provide) services, or by any recipient of services under this title regarding any waiver request, including those under 316.

Section 307(a)(6): The state agency will make reports to the Administration on Aging as required.

Section 307(a)(7)(A) The plan provides satisfactory assurance that such fiscal control and fund accounting procedures will be adopted as may be necessary to assure proper disbursement of, and accounting for, Federal funds paid under this title to the State, including any such funds paid to the recipients of a grant or contract.

Section 307(a)(7)(B) The plan provides assurances that --

(A) no individual (appointed or otherwise) involved in the designation of the State agency or an area agency on aging, or in the designation of the head





of any subdivision of the State agency or of an area agency on aging, is subject to a conflict of interest prohibited under this Act;

(B) no officer, employee, or other representative of the State agency or an area agency on aging is subject to a conflict of interest prohibited under this Act; and

(C) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

Section 307(a)(8)(A) The plan provides that no supportive services, nutrition services or in-home services will be directly provided by the State agency or an area agency on aging in the state, unless, in the judgment of the State agency—

(i) provision of such services by the State agency or the area agency on aging is necessary to assure and adequate supply of such services;

(ii) such services are directly related to such State agency's or area agency on aging's administrative functions; or

(iii) such services can be provided more economically, and with comparable quality, by such State agency or area agency on aging.

Section 307(a)(9) The plan provides assurances that the State agency will carry out, through the Office of the State Long Term Care Ombudsman, a State Long Term Care Ombudsman program in accordance with section 712 and this title, and will expend for such purpose an amount that is not less than an amount expended by the State agency with funds received under this title for fiscal year 2000, and an amount that is not less than the amount expended by the State agency with funds received under title VII for fiscal year 2000.

Section 307(a)(10) The plan provides assurance that the special needs of older individuals residing in rural areas will be taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

The methods used to satisfy the service needs of such individuals include:

- 1) Inclusion of such requirements in the uniform area plan format and the service provider application package.
- 2) Monitoring of performance of the area agencies and service providers.
- 3) Provision of technical assistance and training to area agencies on aging and service providers.

The description of how the funds have been allocated to meet the needs are described on pages 29-38 of this plan.



Section 307(a)(11)(A) The plan provides assurances that area agencies on aging will--

(A) enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance;

(B) include in any such contract provisions to assure that any recipient of funds under division (A) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and

(C) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

Section 307(a)(11)(B) The plan assures that no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the area agency on aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

Section 307(a)(11)(D) The plan assures, to the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals.

Section 307(a)(11)(E) The plan assures that area agencies on aging will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

Section 307(a)(12) The plan provides, whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals, the plan assures that any area agency on aging carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for n-



(A) public education to identify and prevent abuse of older individuals;

(B) receipt of reports of abuse of older individuals;

(C) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and

(D) referral of complaints to law enforcement or public protective service agencies where appropriate.

Section 307(a)(13) The plan provides assurances that the State will assign personnel (one of whom shall be known as a legal assistance developer) to provide State leadership in developing legal assistance programs for older individuals throughout the State.

Section 307(a)(14) The plan provides assurances that, if a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the area agency on aging for each such planning and service area—

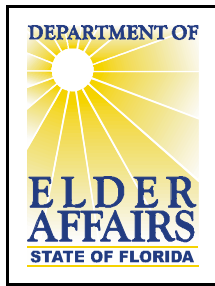
(A) to utilize in the delivery of outreach services under section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability; and

(B) to 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.

Section 307(a)(16) The plan provides assurances that the State agency will require outreach efforts that will identify individuals eligible for assistance under



this Act, with special emphasis on --

- (A) older individuals residing in rural areas;
- (B) older individuals with greatest economic need (with particular attention to low income minority individuals and older individuals residing in rural areas);
- (C) older individuals with greatest social need (with particular attention to low income minority individuals and older individuals residing in rural areas);
- (D) older individuals with severe disabilities;
- (E) older individuals with limited English-speaking ability; and
- (F) older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and inform the older individuals referred to in clauses (A) through (F) and the caretakers of such individuals, of the availability of such assistance.

Section 307(a)(17) The plan provides, with respect to the needs of older individuals with severe disabilities, assurances that the State will coordinate planning, identification, assessment of needs, and service for older individuals with disabilities with particular attention to individuals with severe disabilities with the State agencies with primary responsibility for individuals with disabilities, including severe disabilities, to enhance services and develop collaborative programs, where appropriate, to meet the needs of older individuals with disabilities.

Section 307(a)(18) The plan provides assurances that area agencies on aging will conduct efforts to facilitate the coordination of community-based, long-term care services, pursuant to section 306(a)(7), for older individuals who-

- (A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;
- (B) are patients in hospitals and are at risk of prolonged institutionalization; or
- (C) are patients in long-term care facilities, but who can return to their homes if community-based services are provided to them.

Section 307(a)(19) The plan includes the assurances and description required by



section 705(a).

Section 307(a)(20) The plan provides assurances that special efforts will be made to provide technical assistance to minority providers of services.

Section 307(a)(21) The plan n

(A) provides assurance that the State agency will coordinate programs under this title and programs under title VI, if applicable; and

(B) provides assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title, if applicable, and specify the ways in which the State agency intends to implement the activities.

The methods used to satisfy the service needs of such individuals include:

- 1) Inclusion of such requirements in the uniform area plan format and the service provider application package.
- 2) Monitoring of performance of the area agencies and service providers.
- 3) Provision of technical assistance and training to area agencies on aging and service providers.

Section 307(a)(22) If case management services are offered to provide access to supportive services, the plan provides that the State agency ensures compliance with the requirements specified in section 306(a)(8).

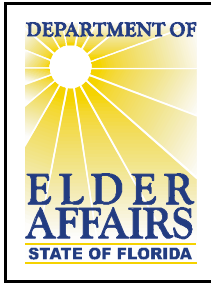
Section 307(a)(23) The plan provides assurances that demonstrable efforts will be made-

(A) to coordinate services provided under this Act with other State services that benefit older individuals; and

(B) to provide multigenerational activities, such as opportunities for older individuals to serve as mentors or advisers in child care, youth day care, educational assistance, at-risk youth intervention, juvenile delinquency treatment, and family support programs.

Section 307(a)(24) The plan provides assurances that the State will coordinate public services within the State to assist older individuals to obtain transportation services associated with access to services provided under this title, to services under title VI, to comprehensive counseling services, and to legal assistance.

Section 307(a)(25) The plan includes assurances that the State has in effect a



mechanism to provide for quality in the provision of in-home services under this title.

Section 307(a)(26) The plan provides assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the State agency or an area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

## **Sec. 308, PLANNING, COORDINATION, EVALUATION, AND ADMINISTRATION OF STATE PLANS**

Section 308(b)(3)(E) No application by a State under subparagraph (b)(3)(A) shall be approved unless it contains assurances that no amounts received by the State under this paragraph will be used to hire any individual to fill a job opening created by the action of the State in laying off or terminating the employment of any regular employee not supported under this Act in anticipation of filling the vacancy so created by hiring an employee to be supported through use of amounts received under this paragraph.

## **Sec. 705, ADDITIONAL STATE PLAN REQUIREMENTS (as numbered in statute)**

Section 705(a)(1) The State plan provides assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter.

Section 705(a)(2) The State plan provides assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle.

Section 705(a)(3) The State plan provides assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights.

Section 705(a)(4) The State plan provides assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter.

Section 705(a)(5) The State plan provide assurance that the State will place no



restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5).

Section 705(a)(6) The State plan provides assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3 —

(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for

(i) public education to identify and prevent elder abuse;

(ii) receipt of reports of elder abuse;

(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent;

(iv) referral of complaints to law enforcement or public protective service agencies if appropriate;

(B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and

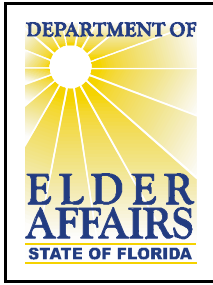
(C) all information gathered in the course of receiving reports and making referrals shall remain confidential except

(i) if all parties to such complaint consent in writing to the release of such information;

(ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or

(iii) upon court order.

Section 705(a)(7) a description of the manner in which the state agency will carry out this title in accordance with the assurances described in paragraphs (1) through (6).



The state agency will comply with any and all requirements of the Older Americans Act and any guidance from the Administration on Aging that may have inadvertently been omitted from the State plan.



***? FOR MORE INFORMATION, CONTACT:***

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