

State of Louisiana



BOBBY JINDAL
GOVERNOR

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OFFICE OF THE GOVERNOR

January 9, 2015

Kathy Greenlee, Administrator
Administration for Community Living
Administration on Aging
One Massachusetts Avenue NW
Washington, DC 20001

Dear Ms. Greenlee:

I hereby designate the following signatory to sign and submit the 2015-2019 Louisiana State Plan on Aging:

Karen J. Ryder
Deputy Assistant Secretary
Governor's Office of Elderly Affairs

Ms. Ryder can be contacted at the following: KJRyder@goea.la.gov or 225-342-7100.

Thank you for your assistance in this matter.

Sincerely,

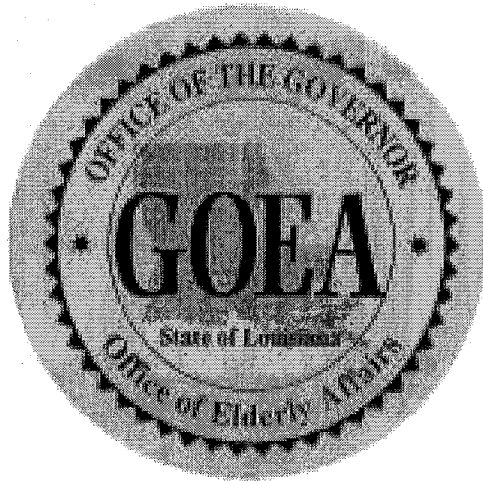
A handwritten signature in black ink, appearing to be "Bobby Jindal".

Governor Bobby Jindal
State of Louisiana

Louisiana State Plan on Aging

For the Period

October 1, 2015 through September 30, 2019



Bobby Jindal
Governor

Office of the Governor
Office of Elderly Affairs

Verification of Intent

The State Plan on Aging is hereby submitted for the State of Louisiana for the period of October 1, 2015 through September 30, 2019. It includes all assurances as well as plans to be implemented by the Office of Elderly Affairs under provisions of the Older Americans Act, as amended, during the period identified. The Governor's Office of Elderly Affairs has been given the authority to develop and administer the State plan on Aging in accordance with all requirements of the Act, and is primarily responsible for the coordination of all State activities related to the purpose of the Act, i.e., the development of comprehensive coordinated systems for the delivery of nutrition, in-home and supportive services, and to serve as the effective and visible advocate for the elderly in the State.

This plan is hereby approved by the Governor's designee and constitutes authorization to proceed with activities under the plan upon approval by the Administrator & Assistant Secretary for Aging

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

I hereby approve this State Plan on Aging and submit it to Administrator & Assistant Secretary for Aging. This constitutes authorization to proceed with activities under the Plan upon approval by the Assistant Secretary on Aging.

6-24-15
(Date)

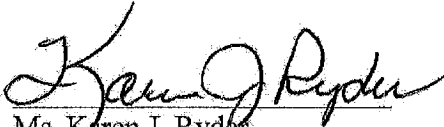

Ms. Karen J. Ryder
Deputy Assistant Secretary 2
Office of the Governor
Office of Elderly Affairs

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Executive Summary

The Louisiana Governor's Office of Elderly Affairs, as the State Unit on Aging for Louisiana prepares the State Plan every four years as required by the Administration for Community Living (ACL) which is under the U.S. Department of Health and Human Services. The Louisiana State Plan for FY 2016-2019 provides a directive to the Louisiana State Unit on Aging and complies with the guidance and instructions provided by ACL (ACL/AOA-PI 14-01). Louisiana has 36 area agencies on aging to serve the older citizens of the state. Of these 36 area agencies on aging, there are 4 multi-parish (County) area agencies and 32 single parish (County) area agencies. According to the US 2013 Census, there are 877,547 persons over age 60 in the state of Louisiana. Census projections reflect an increase in population for persons over age 60 to exceed 1 million persons over age 60 in Louisiana by year 2020.

In order for Louisiana to continue to plan and serve the ongoing and future needs of Louisiana's older adults and their caregivers, and to meet the requirements of Section 307 of the Older Americans Act (OAA), the Governor's Office of Elderly Affairs (GOEA) will use this document as a guide to deliver services to the state's aging population. GOEA will work collaboratively with older citizens, their caregivers, the aging network of state and community agencies who provide supportive services and all other stakeholders within Louisiana. GOEA will promote the aging needs and services along with our federal and state government partners so that all may move forward collaboratively to serve effectively and efficiently. Sustainability of services as the elderly population increases and reduction of available state and federal funding will be a key challenge over the next four year plan period.

There are many challenges in meeting the needs of the aging population and their caregivers, but we must strive to address and overcome as many challenges as possible to continue to move forward in our service to the elderly of the state of Louisiana. Louisiana's fiscal budget crisis is challenging us to find new ways to meet the needs of our increasing population with budget and staff reductions. The increase in the unit cost to provide services (transportation, salaries, utilities, raw food costs, insurance, etc) will continue to challenge and will increase the number of elderly residents of Louisiana to be placed on waiting lists for essential services. In an effort to meet these challenges and continue meeting the needs of the elderly in the state, GOEA will continue to strengthen partnerships and collaborate with other agencies who provide service delivery to elderly and disabled citizens of Louisiana. Collaborative partnerships have been established with the Louisiana Department of Health and Hospitals, Disability Affairs, Department of Insurance-Senior Health Insurance Information Program (SHIIP), Inter-tribal Council on American Indians and quasi governmental agencies to serve the aging and disabled population in an effort to meet the growing needs of Louisiana. These collaborative partnerships will work for the aging and disabled network to increase access by older adults and provide additional resources to the older individuals, caregivers and disabled citizens of Louisiana. Title III and Title VI programs will be coordinated to ensure that all populations are reached efficiently and service delivery is efficient and effective. These efforts will strengthen the capacity of our aging network in Louisiana. GOEA will seek additional funding sources as the state unit on aging and for our partner agencies through grant opportunities to enhance funding for service sustainability and enhancement.

Louisiana aging network strengths, the capacity to provide access to local information and resources are provided by the Area Agencies on Aging, Councils on Aging and the nine (9) regional Aging and Disability Resources Centers (ADRC) and SenioRx Programs. The ADRCs in Louisiana provide full range resources for long term care needs, provide information, access to long term care options, counseling, prescription assistance and local resources to meet the needs of the older and disabled individuals who may be at any age. The ADRCs work collaboratively with the area agencies on aging, councils on aging and other community agencies to ensure the resources are available to meet the client's needs. This tool is valuable to allow our older and disabled individuals to remain in their homes as long as possible.

In an effort to ensure the agencies have the most up to date needs of the older individuals in their Planning and Service Area (PSA) and their communities, Louisiana's 36 area agencies on aging (AAA) must submit area plans. These area plans are to include strategies to facilitate the development of services to meet the needs identified through the individual and community needs assessment process, to collaborate in the ADRC's with options counseling, to assure and improve the quality of services provided and to provide evidence-based health promotion and disease prevention programs using the III-D funds. Community meetings and public hearings to advise the public of the needs assessment results and receive comments were held to confirm needs addressed in the area agency area plans across the state. Comments and public input are documented and were reviewed in the plan approval process. As a component of the 36 AAA area plans, each AAA reviews the agency's Emergency/Disaster Plan annually for modifications and changes. If modifications or changes are made to AAA Emergency/Disaster Plan, the new plan is submitted to GOEA for approval. The Emergency/Disaster Plan once approved becomes a component of the Area Plan.

While it is imperative to assess the needs of individuals to afford the opportunity for the older individual to remain in their homes independently for as long as possible, the residents of long term care facilities rights must be sustained. The Louisiana State Long Term Ombudsman educates and promotes the rights of these long term care facility residents. The Ombudsman will work to sustain those rights and that protocols are in place so that the resident who is eligible for transitioning back into their home and/or community setting have the ability to do so.

Louisiana continues to educate and collaborate with other agencies to increase awareness of Elder Rights. Effective statutes have been passed into law to protect older adults from abuse, neglect and exploitation. Elderly protective services program was moved from GOEA on June 30, 2012 to the Louisiana Department of Health and Hospitals/Office of Aging and Adult Services (DHH/OAAS). GOEA continues to work with DHH/OAAS to maintain the rights of the elderly citizens are sustained in accordance with the Older Americans Act, as amended in 2006. All contract agencies to GOEA are provided education sessions which include topics such as what is abuse, which statutes protect older adults and citizens, and who/where to call if abuse is detected. The aging network (AAAs, COAs and ADRCs) are encouraged to collaborate with the local Senior & Law Enforcement Together (SALT) coalitions and Law Enforcement, Senior Citizens and Community Groups (TRIAD) to enhance the community awareness of elder abuse signs and symptoms.

It is GOEA's *Vision* that Louisiana will be a desirable and satisfying place to age. The *Mission* in Louisiana is to serve as the focal point for the development, implementation and administration of the public policy for the State of Louisiana, and address the needs of the state's

elderly citizens. GOEA as the State Unit on Aging as directed by the Governor of Louisiana and the State Legislature is committed to the following *Philosophy*:

Advocating for the needs and rights of all older Louisianans. **Improving** the quality of life of our older citizens by encouraging and providing the means to achieve active, healthy, independent lives. **Building** partnerships with communities, organizations, agencies, families, and individuals to ensure the availability and accessibility of a continuum of services for all older Louisianans. **Promoting** public awareness and education about the aging process, trends in the aging of current older population, and projections for future generations of older persons. **Supporting** intergenerational activities, which foster mutual understanding and support, shared values, and personal responsibility. **Providing** intervention in the exploitation and abuse of elderly Louisianans.

To ensure that the Vision, Mission and Philosophy of Louisiana are met, the State Plan for FY 2016-2019 will serve as a guide with the following Goals:

- **Goal 1- Information:** GOEA will provide information regarding the interests of older persons in Louisiana.
- **Goal 2 - Protect Rights and Prevent Abuse:** GOEA will work collaboratively with Elder Rights agencies to enhance the rights of older individuals and to prevent abuse, neglect and exploitation.
- **Goal 3 – Long Term Services and Supports:** GOEA will enable older individuals and individuals with disabilities to live in their communities through the availability and access to long term services and supports, including supports for families and their caregivers.
- **Goal 4 – Empowerment and Self Determination & Control:** Provide education and resources to empower elderly individuals and their families to make informed decisions about their health, independence and well-being.

Context

The Louisiana State Plan on Aging 2016-2019 provides strategic direction to the Louisiana State Unit on Aging (SUA) and complies with the guidance provided by the Administration for Community Living (ACL) Administration on Aging (AoA) in the program instructions AOA-PI-14-01. This State plan is a contract with ACL/AOA and allows Louisiana to receive funds under Title III and Title VII of the Older Americans Act.

Vision: Louisiana will be a desirable and satisfying place to age.

The State Plan has been prepared by utilizing data collected in the Needs Assessment component of the AAA Area Plans. The AAA (36) Assessments/Surveys were conducted in conjunction with the preparation of the Area Plans for Title III funding from the State Unit on Aging (GOEA). Surveys were distributed to individuals who receive services from the AAA, Community partners, local and parish governmental officials, staff, faith-based organizations and other stakeholders in the communities of each Public Service Area (PSA) for each AAA within the state of Louisiana. The needs assessment survey data suggests that the services that are considered highest priority are as follows:

- Information and Assistance/Access to services and resources
- Meals (Congregate and Home Delivered Meals)
- Transportation

Other services listed as a priority were Personal Care, Safety/Elder Rights, Utility Assistance, Insurance/Medicare Information, Prescription Medication Assistance, Wellness, Recreation and Exercise, Dental/Hearing/Vision Assistance, Senior Centers (closer to the older person's home), Sitter Service, Affordable Housing, Health Screenings, Falls Prevention, Homemaker services and Minor Home Repairs. Services listed above are currently being provided in the designated PSAs, but the AAAs may have waiting lists due to funding shortfalls. Outreach for the target population is conducted by the AAAs to reach older adults throughout Louisiana and provide information and access to resources for services to assist the older person in making informed decisions and exercise self determination and control about their life and well-being, thus allowing older individuals to remain in their communities for as long as possible. Target population is defined as older individuals who are age 60 or above who are economically and socially needy, which may include individuals who are of minority race, individuals who reside in rural areas, individuals who are of Native American heritage and individuals who may have limited English speaking abilities.

Mission: To serve as the focal point for the development, implementation, and administration of the public policy for the State of Louisiana, and address the needs of the state's elderly citizens..

Since inception of the Louisiana Commission on Aging in 1956 by the Louisiana Legislature, The Office Elderly Affairs in the Office of the Governor was renamed and created in Louisiana

R.S.36.259(g) in 1979. Governor Bobby Jindal issued Executive Order BJ 2008-34 re-establishing The Office of Community Programs in the executive department. The Office of

Philosophy: The Governor's Office of Elderly Affairs as the sole state agency as directed by the Governor and the Louisiana Legislature is committed to:

Advocating for the needs and rights of all older Louisianans. Improving the quality of life of our older citizens by encouraging and providing the means to achieve active, healthy, and independent lives. Building partnerships with communities, organizations, agencies, families and individuals to ensure the availability and accessibility of a continuum of services for all older Louisianans. Promoting public awareness and education about the aging process, trends in the aging of current older population, and projections for future generations of older persons. Supporting intergenerational activities, which foster mutual understanding and support, shared values, and personal responsibility. Providing intervention in the exploitation and abuse of elderly Louisianans.

Elderly Affairs is part of Community Programs. The Governor's Office of Elderly Affairs is designated as the official state unit on aging. The Louisiana Executive Board on Aging (LEBA) is an organized board that consists of appointed members from the Governor and the Louisiana Legislature. The LEBA board functions as an entity to advise, report and recommend matters of relevance to the elderly of Louisiana. The LEBA board member appointments and duties are outlined in the GOEA Policy and Procedures Manual in subchapter A, §1103.

As required by the Older American's Act, the State Plan for Louisiana will be utilized as planning document to address activities and programs so that the state will be in a posture to better meet the needs of the older persons of Louisiana. In addition to the funds received from the Older American's Act, GOEA receives state general funds and other funding streams through grants to meet the mission of the agency to serve the older persons in the state of Louisiana. Older persons are defined by those who have reached the age of 60 or are older. Many of the services and programs for which GOEA has oversight are made available through GOEA and the service providers. These programs and services are available to our older persons and vulnerable adults so that they may remain independent by being empowered to make informed decisions regarding their life, health and wellness. The majority of the services and programs funded through the Older Americans Act and other federal and state funds are provided through contracts with the Area Agencies on Aging. The Louisiana Elderly and Disabled Medicaid Waivers (EDA) and Elderly Protective Services are administered by the Louisiana Department of Health and Hospitals. The Senior Health Insurance Information Program (SHIIP) is administered by the Louisiana Department of Insurance. GOEA and the aging network work collaboratively with all service providers within Louisiana for service delivery to the elderly in Louisiana. The area agencies and councils on aging in Louisiana both receive and give referrals to and from the Department of Health and Hospitals, the Louisiana Office of the Attorney General and the Louisiana Department of Insurance.

As the state unit on aging, GOEA is responsible for the administration of the Older American's Act funds and related Home and Community Based Services programs. GOEA will review special studies regarding the health, employment, economic status and wellness of the older persons in Louisiana. GOEA will collect data, statistics and facts so that GOEA is versed on all conditions and trends affecting the older persons residing in Louisiana. Through the collection and assimilation of the data, statistics and facts, GOEA is better equipped to provide guidance,

and report trends to the public and private entities so that policies and programs can be maintained and enhanced to better serve Louisiana's older residents.

As the SUA, GOEA has input and provides support as a standing member to committees, councils and coalitions that have been developed or formed from other federal or state agencies to serve individuals who may be elderly or disabled. Primary functions of GOEA, the state unit on aging as an oversight agency to provide services such homemaker, home repair and maintenance services, employment and training services for the older worker, recreational and transportation services, counseling, information and referral services, protective services, nutritional services and other health related services. For service delivery, GOEA contracts Older American's Act funds utilizing a disbursement of funds using an approved intrastate formula.

Louisiana has 64 Parishes (counties) with a Council on Aging in each parish. There are thirty-six planning and service areas (AAAs). Thirty-two of the parish councils on aging are designated as Area Agencies on Aging (AAAs) with the remaining Thirty-two are divided into four planning and service areas. The primary role of the AAAs is to serve as the key planning and development agencies within the state of Louisiana on a local community level. Each AAA submits an area plan that will be the planning document for a four year planning cycle. These area plans provide the characteristics, needs, and demographics for the older persons in the planning and service areas. GOEA's approval process for the AAA's area plans has been established to ensure that the AAAs plan meets the federal requirements for Older American's Act funds. Included in each AAA Area Plan is a Disaster/Emergency Plan that is reviewed annually. If modifications are made to the approved Disaster/Emergency Plan, the agency's board of directors must approve the modifications and/or changes to the Disaster/Emergency Plan. All 36 AAAs currently have approved Disaster/Emergency Plans. Many AAAs receive additional funding from other state programs, parish government, municipal support, private corporations and private donations. Services may be delivered by utilizing federal, state, local funds as well as in-kind (volunteer) acts. Like many other states, Louisiana is challenged with budget reductions while the number of older persons needing the services increases. Because the needs of the older persons is greater than the funds allocated for service delivery, many of our service providers maintain waiting lists and a priority system is in place so that the older adults in greatest social and economic need and are at a greater risk of institutionalization are classified as a higher priority. GOEA and all aging service providers continue to outreach older persons in Louisiana to provide access to information and services in the economically challenged, rural areas and areas of the state for which Native Americans reside. These efforts will continue to be enhanced through partnerships and coordination of efforts for all older persons utilizing Title III and Title VI funds.

Although Louisiana is experiencing growth in the population of individuals over age 60 at a slower rate than other states, Louisiana is still challenged with budget shortfalls to fund the needs of our elderly. Louisiana will research cost sharing. Though the population is very diverse and both rural and urban, GOEA continues to support the development of a No Wrong Door for information and access for all aging services. There are nine regional Aging and Disability Resource Centers (ADRC) which have territories for statewide coverage. The nine regional ADRCs serve as a No Wrong Door for services and resources which include the Title III, Title VI, state and local services.

In addition to the ADRCs, information and access to services is provided locally by the Councils on Aging (COA). Each COA is chartered by the Louisiana Secretary of State as a private, non-profit entity. These COA's and aging network partners advertise and market their services locally through radio announcements, flyers, news media, cable network publications, door-to-door service delivery, partnership development, public education and other local partners. The COAs host an annual membership drive and annual membership meeting to elect members for the agency's board of directors. Membership is encouraged to all those in the community who are 18 years of age and above who have an interest or serve as a stakeholder in the concerns and wellbeing of the older persons in that community. Membership is free of charge. Aging news, services and concerns are addressed at each annual membership meeting for the councils on aging and public comments are welcomed.

In Louisiana for FY 2014, data compilation from NAPAS for FY 2014 shows 71,383 persons received 5,675,985 units of Title III registered services. Of those persons served, 39% had income below poverty, 67% were female and 33% were male. With an increasing need for persons receiving services having 24% of the population are over age 85. Many of the state's senior centers are under the COAs functional service delivery. There were 139 state funded senior centers in FY 2014. The state funded senior center must have or provide access to nutrition services, transportation, information and assistance, education, enrichment and wellness. Opening new senior center facilities in the more rural areas of the state where services are vastly needed will be a challenge due to the budget constraints. Opening senior centers is a need addressed in the AAA Needs Assessments, other alternative measures and/or partnerships will need to be established so that these needs are addressed locally. To ensure that our older population and service delivery is prioritized to serve the most needy (defined as economically challenged, low income, isolated with little or no other support system), the following steps will be taken:

- Encourage and promote inclusion of the most needy, economically challenged individuals are representatives of advisory councils at all levels (local, regional and state)
- Continue the establishment of community focal points and/or service locations that provide easy access to services and health care options for the elderly and disabled individuals who may reside in rural areas, individuals of Native American descent and those with limited English speaking abilities.
- Assure sensitivity of the state unit on aging staff to the special service needs of the economically and socially needy older persons in Louisiana
- Provide technical assistance and training to all aging service providers for increased business acumen (AAA's, COA's, ADRC's. etc)
- Enhance through extended outreach efforts for Title VI and the Native American communities within Louisiana to include state and nationally recognized tribal residents
- Coordinate Title III and Title VI services for all eligible Louisiana citizens
- Provide special needs orientation to service staff and volunteers regarding the economically and socially needy older persons in Louisiana
- Continue and enhance partnerships with other state agencies and service providers to ensure information, resources and services reach the target populations
- Monitor and assess the AAA's in how they respond to the needs of the economically and socially needy older persons of the state which may include individuals who reside in rural areas, individuals of Native American descent and those with limited English speaking abilities.

The state plan will set the following goals for the course of the next 4 year period.

- **Goal 1- Information:** GOEA will provide information regarding the interests of older persons in Louisiana.
- **Goal 2 - Protect Rights and Prevent Abuse:** GOEA will work collaboratively with Elder Rights agencies to enhance the rights of older individuals and to prevent abuse, neglect and exploitation.
- **Goal 3 – Long Term Services and Supports:** GOEA will enable older individuals and individuals with access to long term care services and supports, including supports for families and their caregivers.
- **Goal 4 – Empowerment and Self Determination & Control:** Provide education and resources to empower elderly individuals and their families to make informed decisions about their health, independence and well-being.

Focus areas of the state plan will be in accordance with the Older American’s Act as amended in 2006, Section 307 (a)(2)(c):

Access Services –	30%
In Home Services –	15%
Legal Services -	05%

This requirement is outlined in the GOEA Policy and Procedures Manual, Subchapter B: Area Agency on Aging §1141 which specifies that a minimum percentage of the AAA Title III-B allotment of funding is spent in each of the above priority service categories.

Focus Area I: Older Americans Act (OAA) Core Programs (HCBS)

Home and community based services administered by GOEA are listed in the following categories: Older American’s Act Core Programs and State Funded programs. These programs work with the Department of Health and Hospitals (DHH) Medicaid Waiver programs and other state-funded programs to ensure appropriate service delivery without duplication. Although Medicaid and Elderly Protective services are provided by the Department of Health and Hospitals, GOEA supports DHH with partnerships, service on councils, coalitions and committees. Older American’s Act funds provide the funding foundation for services that enable older individuals to be safe and empowered to make life decisions which will help them remain active, and healthy in their own homes and communities. Additional funding for services includes Federal Nutrition Services Incentive Program funds, State funds, required match for funds, program income, and local funds.

GOEA contracts with the Area Agencies on Aging (AAA) for provision of service delivery. Providers are required to give priority for services using the targeting factors of rural, greatest economic need (low income), greatest social need, minority, severely disabled and at risk for institutional placement. GOEA utilizes Harmony, Social Assistance Management System

(SAMS) for reporting and statistical data. SAMS is web based, consumer centered tracking, accountability program that documents all aging services.

Louisiana will strive to serve all citizens who are over age 60 utilizing Title III funding without distinction of race or ethnicity. Preference for Title III services is given to individuals who have the greatest economic or social need with particular attention to low-income minority individuals those elderly individuals who reside in rural areas, who have greatest economic and social need, who have severe disabilities, who have limited English speaking abilities, who have Alzheimer's disease or related disorders to Alzheimer's disease, the caretakers of the elderly and disabled and those who are of Native American heritage.

Title III provides funding for all older citizens for state and community programs on aging and Title VI provides for federally recognized Native American tribal aging programs. GOEA encourages all partners and contracting entities to pursue activities that increase access by the Native Americans to all aging programs and benefits, Title III Section 307(a)(21). Whereas the overall population of Native Americans in Louisiana is less than 1% of the total population, coordination of Title III and Title VI services is cultivated through collaboration with local Native American Tribes who are part of the Louisiana Intertribal Council.

Service provider for the older population in Louisiana target potential clients within their planning and service areas and encourage participation in the nutrition programs and other supportive programs offered. Even though the Native American population is small, several of the Area Agencies on Aging (AAAs) have individuals serving on the agency's board of directors and have Native American heritage. Louisiana has 4 federally recognized tribes and 10 state recognized tribes. Terrebonne AAA has the largest Native American population in their service area. This Native American tribe is not federally recognized so Title VI funds are not received for services to these Native Americans. The Terrebonne AAA does not distinguish between ethnicity to provide information and access to services.

Nutrition Services Program: This program provides home delivered meals, congregate meals, and nutrition education. Meals provide the required minimum of one-third of the recommended daily allowance as required by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Science. In addition to providing needed health benefits, meals at the community congregate meal sites provide older adults with socialization. This is a critical service for frail, isolated older individuals. Nutrition counseling is provided by a licensed registered dietitian for an older individual who is receiving services and is at nutritional risk; and nutrition education related to the improvement of health and nutritional well-being. Each AAA is required to employ a licensed dietitian to plan meals, monitor meal sites and conduct quality control assessments.

Non-Medical Home and Community Based Services: This program provides In-Home Supportive Services which include Personal Care, Respite Care, Chore, Homemaker, Telephone Assurances, Home Repair/Modifications, Support Services, and Home Delivered Meals. Accessible services include transportation, outreach, and information and assistance/referral. Due to the extensive rural areas of Louisiana, transportation and the cost to provide transportation continues to be a challenge with budgetary constraints. In the AAA Needs Assessment, transportation was listed as one of the priority services across Louisiana. The Louisiana Department of Transportation and Development (DOTD) provides state funding to coordinate accessible transportation services for older adults and disabled individuals through the

local governments and/or community service providers such as the councils on aging. Transportation services are an essential component that provides access to other needed services which allow older individuals to remain independent in their communities. The Department of Health and Hospitals, Office of Aging and Adult Services (DHH/OAAS) administers the state Medicaid Home and Community Based Services. These services support older adults to remain in the community and in their homes for as long as possible. The Elderly and Disabled Waiver Program, Adult Day Care Health Waiver, Long Term Care Personal Care Service, and Program for All-Inclusive Care for the Elderly (PACE) are programs that are funded by Medicaid in Louisiana. GOEA and their contractors partner and collaborate services so that there are no duplication of service delivery, while utilizing all Federal, State and local funding to the extent possible to meet the needs of the elderly population of Louisiana.

Disease Prevention and Health Promotion Services: This program is an evidence based program which provides activities designed to support and/or improve the individual's well-being. Evidence based programs offered in Louisiana are Chronic Disease Self-Management, Zumba, Zumba Gold, Tai Chi, Matter of Balance, Walk With Ease, Best Practice Intervention, Fall Prevention, Diabetes Self-Management, Fundamentals of Reducing Acute Care Hospitalization/Improving Oral Medications and Body Vive Exercise.

Senior Community Service Employment Program (SCSEP): This program is designed to assist individuals who are 55 years of age and older with securing job training and job search assistance. These activities will also include civic engagement opportunities for low income persons who have poor employment prospects. The goal of SCSEP is to provide training and economic self-sufficiency through placement in unsubsidized employment in both the public and private sector. The SCSEP prepares and follows a 4 year state plan which will end June 30, 2016. GOEA coordinates three sub grantees, Jefferson Council on Aging, St. James Area Agency on Aging, and Catholic Diocese of Baton Rouge with Senior Community Employment Programs. GOEA staff will collaborate and serve on various boards and/or committees to stay abreast of trends, partnership opportunities and new initiatives that may benefit the SCSEP program participants.

Family Caregiver Support Program: This program provides services to family caregivers of adults over 60 or a person of any age who may need assistance or information regarding taking care of someone who cannot stay alone. This program also includes grandparents/relatives (not parents) who are caregivers of children or relatives not more than 59 years of age who are disabled. Service agencies give preference to qualifying individuals who have been diagnosed with Alzheimer's disease or other dementia related disorders. Louisiana does not currently have an Alzheimer's grant for services. Services provided to the caregiver includes: 1.) Information to caregiver about available services; 2.) Assistance to caregivers in gaining access to supportive services; 3.) Individual counseling, organization of support groups, and caregiver training to assist the caregiver in making decisions and solving problems relating to their roles as the caregiver; 4.) Respite care to enable caregivers to be relieved temporarily; and 5.) Supplemental services to compliment the care provided by the caregivers. Many Louisiana aging partners have established support groups and educational sessions for caregivers to support and educate so that the caregiver can make informed decisions regarding the care of their loved ones.

GOEA's webpage is www.goea.louisiana.gov, which provides information regarding services, programs and resources available to older adults, disabled individuals and their family members.

In addition access to services and resources, the website is host to training modules for SAMS, Moodle (Ombudsmen), Elderly Protective Services, Legal Self Help, Area Plan Process, Service Procurement Process and Disaster Planning. Training modules are added as requested and/or needed. For the Moodle training site, the trainee must have a log-in which is managed by GOEA. Links to other Aging Network sites are readily available from the GOEA Home page.

Focus Area II: ACL/AOA Discretionary Grants

The Governor's Office of Elderly Affairs (GOEA) has obtained grant funding and fostered collaborative partnerships with other state agencies for new innovative programs to ensure a more efficient and effective array of comprehensive services to the elderly citizens and their families. The Louisiana State Plan will reflect our efforts to implement and/or enhance activities and programs to ensure that the programs that emanate from the Older American's Act and the Choices for Independence amendments. Flexibility and innovative programs with collaboration of all service providers (Federal, State and Local) will be essential in maintaining programs and services for our growing elderly population.

The **Senior Rx Program** is a statewide funded program to assist individuals with the application to pharmaceutical companies for medication needs not covered on their prescription medication program. The Senior Rx program also assists individuals with Medicare Part D enrollment and de-enrollment. In state FY 2014, the SenioRx program total savings on prescription medication was \$13,906,611.

The **Aging and Disability Resource Center (ADRC)** program in Louisiana was one of the first programs awarded to a state by a federal grant. The goal of the ADRC is to provide access to resources and medication for seniors and disabled individuals. In 2003, Louisiana piloted the program through the Cajun Area Agency on Aging and the service area was the AAA's PSA. The pilot program targeted individuals aged 60 plus and older adults with disabilities. The ADRC pilot project offered a single point of entry (SPOE) for accessing public and/or private long term care options by phone or by face-to-face contact. The pilot project incorporated an interactive consumer-focused website and a nationwide toll-free number. In 2006, AOA provided additional funding to expand the ADRC project to 9 locations making the ADRC project statewide. Partnerships with community providers are key to the success of the ADRC projects. Per contractual obligation, the ADRCs must develop at least one new partnership from community agencies for each parish in the ADRC service area. The statewide total of new partners should be equal to or exceed 128 new partners in a contract year. In addition, each ADRC must participate in the MIPPA grant activities and develop additional community partners above and beyond the basic ADRC activities. Each new community partner to the ADRC is provided training and resources.

The ADRCs serve as a clearinghouse for support services, resources and options counseling in long term care. The ADRCs provide education to consumers so that access to information, resources and services can be obtained and clients along with their caregivers can make informed decisions in their health and life. Although Louisiana currently receives no direct funding for the ADRC program, Louisiana House Bill 528 (2007), ACT 40, R.S. 40:1300.211-1300.216 does allow for state funding support and integration of ADRC functions with Louisiana Senior Rx programs and other core programs and services. GOEA has incorporated the ADRC in the

existing Senior Rx program which is funded by state funds. This has allowed the program to sustain at the current levels of funding.

One of the major concerns and difficulties is for older adults, individuals with disabilities and/or their caregiver is the navigation of the many fragmented systems for which to access services. Access to service was one of the priority needs found in the Needs Assessment. With the ADRC program, ADRC staff are certified with AIRS certification and (Senior Health Insurance Program) SHIP counseling certification. Individuals may also access resource information by accessing the website at www.louisianaanswers.com. This program is a person-centered approach which provides the following main functions:

- Information and Assistance through public education and information on long term support options
- Streamlined access to all long term services and support which includes those services supported by the state Medicaid program
- Access through pre-eligibility screening for public pay services, comprehensive assessment and access to private pay services.

The ADRC's work statewide in Louisiana's Aging Network to assist and to provide access to long term care options and needed preventative health care services. The ADRC's collaborate with the Department of Health and Hospitals/Office of Public Health and local parish units to provide education and awareness in promoting the importance of vaccinations for influenza, H1N1, pneumonia and shingles. The ADRC's also educate consumers on the Medicare programs such as Low Income Subsidy, Medicare Part D, Medicare Savings Plan and the Medicare Wellness and Preventative Services. All partnerships in the Louisiana Aging Network strive to provide awareness to the elderly consumers as well as the family caregivers so that the consumer may make better choices for his/her health and life.

In 2010, Louisiana Department of Health and Hospitals (DHH) received the **2010 Respite Grant**. GOEA, in support of DHH served on the Respite Coalition which was a derivative from the Respite Grant. The Coalition meets quarterly and is made of the following additional agencies: Amyotrophic Lateral Sclerosis (ALS), Multi-Sclerosis Society (MSS), Alzheimer's Association, American Association of Retired Persons (AARP), Sunrise Senior Living (Assisted Living Facility), People's Health (Health Insurance), Homecare Association of LA (Helanet), Development Disabilities Council, National Alliance on Mental Illness (NAMI) and Capital Area Agency on Aging. Currently the group is exploring funding from the Baton Rouge Area Foundation to implement a voucher program for those who are in need of respite services and have exhausted all available resources.

In 2009, 2010, 2013 and 2014, Louisiana received the **Medicare Improvements for Patients and Providers Act (MIPPA)** grant funds. The MIPPA grant primary goal was to assist Medicare eligible individuals with the application assistance for the Low Income Subsidy Program and the Medicare Savings Plan. The MIPPA grant provided funding to assist the Aging and Disability Resource Centers in Medicare Part D Counseling, Medicare Part D Enrollment and Partnership Development. MIPPA funds were and are continuing to be used to Outreach, Educate and Assist all Medicare eligible individuals with programs that may reduce the Medicare recipient's monthly expenses as well as to educate the Medicare recipient on the Medicare Wellness and Preventative Services. The target population for the MIPPA program are

Medicare eligible individuals who may be economically challenged (Low Income), Rural and/or isolated and Medicare eligible individuals who are of Native American decent. For the current MIPPA Grant (2014), this grant is a 3 year grant for which GOEA is in year 1.

Priority 3-ADRC component of the MIPPA program is charged with Community Partnership Development. These newly developed partners will be trained based upon the partnership agreement. Partners may be “enrollment” partners or “referral” partners. The Enrollment Partners will be trained to provide enrollment assistance for Medicare programs (ie:Low Income Subsidy, Medicare Savings Plan, Medicare Part D). The Referral partners will be trained on basic Medicare information but mostly the duties and activities of the ADRC so that the Referral Partner may make referrals back to the ADRC when asked about Medicare. Louisiana has 9 ADRC/SenioRx regions and in each region, there is a SHIP trained counselor to address any Medicare issue or question. All MIPPA program activities are above and beyond the Title III and SHIP basic grant activities.

MIPPA 2014 grant funds are administered by GOEA which includes Priority 1 – SHIP funds. SHIP is administered by Louisiana Department of Insurance and chose not to apply for Priority 1 but provided a letter of support for GOEA to apply for this portion of the grant.

In state FY 2014 (July 1, 2013-June 30, 2014, the Louisiana MIPPA grant reached 25,925 individuals thru hosting and participation at community events for which education on Medicare programs and benefits were provided. Enrollment assistance was provided to 2270 individuals for applications to the Low Income Subsidy Program (LIS) and Medicare Savings Plan (MSP). Follow-up was conducted on enrollment assistance and data from the follow-up activities reflect that 58% of enrollment assistance units were found to be eligible for LIS and 56% of enrollment assistance units were found to be eligible for MSP. This is a potential savings to the Medicare individuals of over \$7,245,845.

In 2009, GOEA was part of a study group which developed into a work group, Louisiana Fall Prevention Coalition. This Coalition promoted safe practices to help prevent or reduce the number of falls. From this Coalition, GOEA partnered with the Department of Health and Hospitals, Office of Public Health, and Injury Research and Prevention Program to promote the **Matter of Balance** program. The Injury Research and Prevention Program received a grant from the Center for Disease Control (CDC) to develop a plan regarding injuries from falls. Even though the grant has ended, the Matter of Balance program is sustained by AAA’s in Louisiana as a component of the Title III-D program.

In March 2010, GOEA received a two-year Evidence-Based Prevention Program grant from the Administration on Aging. Under this grant, Louisiana implemented the Chronic Disease Self-Management Program (CDSMP), known as **Your Life, Your Health**. The CDSMP was developed at Stanford University and is an accountability program that empowers individuals with a chronic disease to take control of their own health. Through Your Life, Your Health, classes are taught how to improve their health through exercise, nutrition and improved self-management of their disease. Although this grant program has ended, Capital Area Agency on Aging and CENLA Area Agency on Aging are the two lead AAAs who have sustained this program. These agencies continue to teach Lay Leaders so that other partners may continue the Your Life, Your Health program. Several of the AAAs in Louisiana are using their Title III-D

funds to sub-contract with Capital AAA and CENLA AAA to provide this evidenced based program in their PSAs.

Senior Medicare Patrol (SMP) grants were awarded to the eQ Health Solutions, Inc. GOEA and the aging network serve as partners to provide a statewide effort to fight fraud and abuse in the Medicare and Medicaid healthcare systems. SMP, through community outreach events, classroom presentations and one-on-one counseling, empowers and educates seniors who receive Medicare benefits. Thru SMP's and the partners' efforts, seniors may identify and report potential fraudulent activities to the proper authorities. The target population for this program is Medicare and/or Medicaid eligible elders who may be at greatest risk, isolated (rural) and the homebound frail elderly.

Focus Area III: Participant-Directed/Person-Centered Planning

GOEA along with the Louisiana Aging Network has a variety of comprehensive services to the aging and disabled population and their families. Some of these services and programs are provided in a collaborative effort. These supportive programs are developed and delivered to provide more consumer choice and control.

In 2010, GOEA was invited to participate with **Louisiana Oral Health Coalition**. The Oral Health Coalition was established to address the growing need for Oral Healthcare across Louisiana. The coalition meets quarterly to discuss the Oral Health State Plan, Federal and state policies, community oral health programs, access and oral health workforce issues. This coalition has established a 4 year state plan. The priority focus areas are Access to care, Education on care, Disease prevention, Surveillance/Evaluation and Workforce. Membership to the Oral Health Coalition consists of providers of Oral Health care, Louisiana Dental Association, State Agencies, Community partners and concerned individuals on the Oral Health of Louisiana. The Oral Health in the Elderly Committee (which was derived from the work plan of the coalition) has developed an educational tool for Senior Center Site Managers to use to educate the participants on the importance of good oral health care. This tool is easily accessed on the GOEA website and the Department of Health and Hospitals website. The Coalition has developed a webinar training tool for long term care facility staff. This webinar training tool is used to train facility staff on resident oral health. This webinar training tool was provided to the Long Term Care facilities by the Louisiana Nursing Home Association, which is a coalition member. Currently, there are no funds provided to the Louisiana Oral Health Coalition. All action measures are completed on a volunteer basis by members of the coalition. The Department of Health and Hospitals/Office of Public Health has received funding from the CDC for fluoridation and Oral Health programs but funds specific for the coalition are not available at this time.

Veterans Directed Home and community Services (VDHCS) program is a program for veterans of all ages who need home and community based services. This project is currently being done by the Caddo Council on Aging/Area Agency on Aging. This project serves as a model to other agencies to work with the Veteran's Hospital within their service area. The Community Living Grant served as a catalyst to bring Home and Community Based Services and Veterans Administration together to initiate this project. GOEA will continue to support the efforts of this project by marketing its availability on the agency's and the ADRCs' webpages.

Money Follows the Person (MFP) Program is a grant program received by Louisiana Department of Health and Hospitals (DHH). This program is structured to assist Medicaid eligible individuals who reside in a long term care facility or individuals who have a developmental disability and reside in an intermediate care facility, to transition from residing in the facility to their homes or community settings. Coordination of services and resources to support the individual in the community setting is provided by the MFP program. Services are accessed through DHH and the Louisiana Aging Network. The shared goal of all partners is to deliver quality services to keep individuals independent and in the least restrictive environment. The Ombudsmen work with the DHH MFP program and assists with the follow-up on their applications. The New Orleans program is commonly called “My Place Louisiana”. The original award for the MFP program was in 2007. The prevalent challenge faced by this program in successfully transitioning a resident from a facility to the community is to identify affordable housing. Affordable housing is a priority need in Louisiana as noted in the Needs Assessments conducted by the AAAs in their respective Planning and Service Areas.

The **No Wrong Door (NWD)** planning grant was received in 2014 to work with Department of Health and Hospitals and Veterans Affairs in public outreach to stakeholders regarding the current system in place. Stakeholder meetings were held throughout the state with agencies, individuals receiving assistance and individuals on a waiting list. This planning period developed a consumer advisory group and identified who were the major contact points to apply for services. The screening tool which was developed through the Balancing Incentive Program was used as a starting point on the basic information which could be used by everyone. The stakeholder meetings address the need for a system that could electronically interface with state agencies and/or providers to provide exchange of referrals. The plan will address the protecting confidential information as well as the information that would be needed for quality monitoring and performance accountability. The Mission statement for this grant: Louisiana will develop a person-centered No Wrong Door System (NWDS) for people of all ages, abilities and income levels to access the services and supports they require to live the highest quality of life as defined by the consumer or advocate.

The **Louisiana Aging Network Association (LANA)** is host to an annual training conference for members and generally hosts in coordination with the association’s annual meeting. In 2014, the LANA annual training conference was held in Monroe, Louisiana with over 125 members in attendance. Training topics were Administration, Senior Center Activities, Emergency Management and Legal Services. In 2015, LANA hosted a training conference in Baton Rouge, Louisiana with 85 members in attendance. Training topics were Contract Development, Accounting Guides, ADRCs, Senior Centers, Area Plan, Service Procurement, Alzheimer’s Association and a Legal presentation on Life’s End Decisions. Networking with other service providers across the state gives the members the opportunity to share ideas in regards to recreational activities, fundraising, policies, fitness and administrative functions. GOEA, DHH, Department of Transportation and Development (DOTD), and Department of Insurance (SHIP) staff was available to discuss current activities and projects and potential funding opportunities with the LANA members.

Focus Area IV: Elder Justice

The **National Elder Abuse Incidence Study** mandated by Congress in 1996 estimated that 449,924 persons aged 60 and older were abused, neglected, or exploited in their domestic settings. The report also noted that for each elder abuse incident that is reported, another four or five incidents typically go unreported. Older adults have the right to reside in their community without fear of being abused, neglected, or exploited. Personal safety and security is as essential to the well-being of older adults as it is for individuals of all ages to remain independently in their communities. In the AAA Needs Assessment, safety was considered a priority for the communities and older individuals in the state of Louisiana.

The Louisiana **Legal Service Developer** has collaborated with the Louisiana Legal Service Corporations and has conducted Legal “**Boot Camps**” across Louisiana. These “Boot Camps” are presentations made by experts in areas such as Interdiction, Wills, Usufruct, Community Property, Advance Directives, Debtor/Creditor Rights, Social Security, Guardianship, Veteran’s benefits, Reverse Mortgages, Grandparent’s Rights, Powers of Attorney, Louisiana Medicaid, Predatory Lending, Investment Scams and other legal issues that have common requests for service by the Legal Service Corporations. The Boot Camps are free to the public and activity evaluations are done at the end of the presentation/workshop. These “Boot Camps” have been well attended drawing seniors who have not participated in activities through the COAs.

Elder Law Task Force is coordinated through the Legal Service Developer and the Louisiana State Bar Association Access to Justice Program. The Elder Law Task Force was established to address legal issues, brief bank for new and pro bono attorneys, discuss and establish policies concerns regarding Elder Law and to develop training for clients, providers and the general public. A **Financial Exploitation Task force** was created from the Elder Law Task Force to increase the awareness about elder financial exploitation, identify barriers to prosecuting exploitation cases, develop a relationship between investigators and the Louisiana’s financial institutions, and make recommendations to implement stronger elder financial exploitation legislation. The Legal Service Developer organized the Elder Law Task Force, Financial Exploitation Task Force, and Legal Service Task Force to improve the quality of services available to older adults in the state. One of the products developed by the Legal Service Task Force is the reporting tool for the Title III-B Legal Contractors to provide meaningful data in their reports to the AAA without compromise of the client confidentiality.

For individuals who may not be able to reside in their community independently, Long Term Care facilities may be an option. The **Louisiana Long Term Ombudsmen program** assists individuals and their family members in making educated decisions on the care facility that would be best suited for the potential resident. The term “Long Term Care Facility” is defined as facilities that include nursing homes, assisted living facilities and personal care homes that serve individuals. For those individuals who reside in long term care facilities, the Louisiana Long Term Ombudsmen program serves the resident with trained individuals who can respond to the problems and needs of the resident. The Ombudsmen work to protect and promote the rights of the resident and advocate the resident’s rights per the requirements of **Title VII, Chapter 2** of the Older American’s Act. The Ombudsmen will advocate, conduct study analysis, monitor issues and/or policies that relate to the residents and their rights. In the scope of the Ombudsmen program, the Ombudsmen will train volunteers to work with the ombudsmen to visit the

residents, listen to the residents, work with the resident, administration and/or family members to resolve problems, bring change, and improve the residents' care and quality of life.

Louisiana Long Term Ombudsmen program began in 1988 and is funded with State, Title III-B and Title VII funds. GOEA and the Long Term Care Ombudsmen Program adheres to the regulations of Section 712 of the Older American's Act and will expend no less funds than that of fiscal year 2000 for the Title VII program. GOEA has one full-time State Long Term Care Ombudsman and a part-time Administrative Specialist. The State Long Term Care Ombudsman contracts services for regional Long Term Care Ombudsmen as well as having trained volunteers to ensure statewide service delivery. All Ombudsmen (Paid or Volunteer) are certified by going through a multi-step extensive training process and complete 15 in service education courses annually. GOEA's website (Moodle) is host to components of the Ombudsmen certification training allowing each ombudsman to refresh their learning experience. .

In the state fiscal year 2014, the Ombudsmen received 837 complaints and resolved 827 complaints or 98% to the satisfaction of the resident. In addition to contracting with six Area Agencies on Aging, Louisiana has a contract with the Louisiana State University to provide statewide coverage of the Louisiana Long Term Care Ombudsmen Program. Programmatic monitoring and data collection for this program is done by utilizing encrypted software. Data collected is reviewed monthly and submitted annually to the National Ombudsmen Reporting System (NORS).

The Louisiana Long Term Care Ombudsmen Program will work collaboratively with the Louisiana Department of Health and Hospitals which administers the **Money Follows the Person** "My Place, Louisiana" grant program and the Louisiana Medicaid program for residents who wish to transition into a community living setting whether the resident utilizes community resources or family resources. One of the greatest challenges for a resident to transition from a facility to the community is locating affordable and appropriate housing.

Legal Assistance is available to older residents who may need assistance with civil legal matters. Examples of legal assistance provided are Guardianships, Wills, Living Wills, Trusts, Tenant/Landlord Concerns and Power of Attorney. Legal Assistance is provided statewide and is awarded by contract thru a competitive bid process and is funded with Title III-B Funds. Legal Assistance service is monitored on the programmatic and fiscal requirements of the contracts. Louisiana has a Legal Service Developer (LSD) who reviews and approves all legal service contracts as a component of each AAA Area Plan.

Elderly Protective Services is administered by the *Louisiana Department of Health and Hospitals/Office of Aging and Adult Services*. Louisiana continues to educate and collaborate with other agencies to increase awareness of Elder Rights. Effective statutes have been passed into law to protect older adults from abuse, neglect and exploitation. Legislative Regular Session moved funding for Elderly Protective Services program from GOEA on June 30, 2012 to the Louisiana Department of Health and Hospitals/Office of Aging and Adult Services (DHH/OAAS). GOEA continues to work with DHH/OAAS to maintain the rights of the elderly citizens are sustained in accordance with the Older Americans Act, as amended in 2006. All contract agencies to GOEA are provided education sessions which include topics such as what is abuse, which statutes protect older adults and citizens and who/where to call if abuse is detected. The aging network (AAAs, COAs and ADRCs) are encouraged to collaborate with the local

Senior & Law Enforcement Together (SALT) coalition and Law Enforcement, Senior Citizens and Community Groups (TRIAD) to enhance the community awareness of elder abuse signs and symptoms. The Louisiana Aging Network providers routinely identify and report and refer individuals for elder abuse as well as receive referrals from the Office of Aging and Adult Services to provide services for clients of DHH/OAAS.

Monitoring of the state plan is conducted by GOEA staff through the contract monitoring process. Monitoring practices ensure compliance with administrative, programmatic, and fiscal requirements. Monitoring practices include financial reviews and budgetary comparisons which are conducted monthly for fiscal requirements; a semi-annual review of units of service delivery is compared to NAPIS reports and a budgetary comparison reports to ensure target projections of service and expenditures are being met; an annual area agency assessment is conducted to review the AAAs policies and procedures for administrative and programmatic compliance. AAA Emergency and Disaster Plans are reviewed and submitted to GOEA for approval by April of each year, which provides the SUA and the AAA time to make changes prior to the start of hurricane season (June 1). For state fiscal year close-out, GOEA will review NAPIS reports and financial reports for fiscal year closeout. GOEA has developed a tool for each AAA to use to self-assess area plan progress. Each AAA must complete and submit to GOEA an Area Plan Goal Review at the close of each state fiscal year for GOEA review and approval.

In addition to the contract monitoring process, In accordance with Act 1465 of the 1997 Legislative Session, GOEA submits to the State of Louisiana a 5 year Strategic Plan which is updated every 3 years. From this strategic plan, GOEA submits quarterly performance reports to the Louisiana Division of Administration/Office of Planning and Budget. These performance reports are submitted online and may be viewed at www.doa.louisiana.gov/opb/lapas/lapas.htm.

Goal 1- Information: GOEA will provide information regarding the interests of older persons in Louisiana

Objective 1.1: Increase public awareness and needs of the elderly population

Strategies:

- Engage in dialogue with persons who are elderly and or their family members through technology, social media, public forums, webpages, newsletters
- Encourage Louisiana Aging Network to engage in dialogue with local officials and private sector to provide awareness of the elderly population and the growing needs of the elderly population
- Encourage the elderly to share their needs with local and state officials

Measures:

- Number of Public Education Sessions to educate and advocate on services and resources available
- Number of consumers who access information and services through the GOEA and Louisiana Answers websites
- Increase Information and Assistance units by 2% from federal fiscal year 2014

Objective 1.2: Ensure that current policies and programs address and meet the needs of the elderly individuals in Louisiana and their family

Strategies:

- Educate key stakeholders in the Louisiana Aging Network of new policies and programs
- Advise key stakeholders in the Louisiana Aging Network of program policy changes and public hearing
- GOEA staff will serve on various boards and/or committees to stay abreast of trends, partnership opportunities, and new initiatives that may benefit elderly and disabled individuals

Measures:

- Increase in percentage of new contacts who access information and resources from the GOEA and LouisianaAnswers websites over a federal fiscal year for 2015

Goal 2 - Protect Rights and Prevent Abuse: GOEA will work collaboratively with Elder Rights agencies to enhance the rights of older individuals and to prevent abuse, neglect and exploitation.

Objective 2.1 Provide legal assistance to older individuals who are over age 60

Strategies:

- Collaborate with the Louisiana legal corporations
- Continue collaboration with the Louisiana Office of the Attorney General's Office and Aging and Adult Protective Services to provide public education in regards to Elder Abuse, Neglect and Financial Exploitation
- Legal presentations (Boot Camps) to assist elders in understanding rights, choices and benefiting from services and opportunities

Measures:

- Number of referrals given to older adults
- Number of GOEA supported public education sessions annually
- 95% of all surveyed participants at "Boot Camps" are satisfactory or above

Objectives 2.2 Provide regular monthly and timely access to Long Term Care Ombudsman services to residents of nursing and adult residential care facilities.

Strategies:

- Provide on-going training to the community and long term care staff regarding the Long Term Care Ombudsman Program, Resident's rights and other long term issues
- Visits to the Nursing and Adult Residential Care Facilities on a regular basis

Measures:

- Number of monthly visits to long term care facilities
- Number of facility staff trained and ombudsman volunteers trained annually
- 91% of complaints resolved to the satisfaction of the resident

Objective 2.3 Provide awareness and education presentations regarding elder abuse

Strategies:

- Disseminate information of elder abuse through various means: senior center and meal sites, including home bound delivery staff, local churches, schools, community centers, law enforcement and civic organizations

- Collaborate with local SALT Councils, TRIAD and other agencies to promote awareness of elder abuse
- Promote GOEA's website as a mechanism for information on elder abuse neglect and exploitation

Measures:

- Increase new users to the GOEA Protective and Advocacy services link by at least 2% from fiscal year 2014

Goal 3 – Long Term Services and Supports: GOEA will enable older individuals and individuals with disabilities access to long term care services and supports, including supports for families and their caregivers.

Objective 3.1 Provide supportive and nutritional services to at least 8% of elderly individuals.

Strategies:

- Monitor area agencies on aging regarding services delivered
- Promote nutrition through web pages and newsletters
- Provide nutritional training

Measures:

- Number of older adults receiving nutrition services and other supportive OAA services
- Number of services provided to eligible individuals
- Percent of elderly individuals served
- Percentage of high nutritional risk served through the nutrition program

Objectives 3.2: Provide Long Term Care Options Counseling to consumers who are seeking information regarding Long Term Care options.

Strategies:

- Outreach caregivers and family members who may be seeking resources for their elderly or disabled relative.
- Market the ADRC as a tool for individuals to call to receive information and resources for their needs or their family members

Measures:

- Number of ADRC Long Term Care Options Counseling sessions conducted
- Number of calls received from the marketing efforts of the ADRC services for Long Term Care Options Counseling
- Percent of ADRC clients who receive Options Counseling yearly

Objectives 3.3: Serve 11% of elderly and disabled individuals by providing resources for prescription medication.

Strategies:

- Market the SenioRx/ADRC statewide for consumer access to resources and information via website or direct contact.
- Certification that each SenioRx/ADRC has an AIIRS and SHIP certified counselor on staff

Measures:

- Number of unduplicated SenioRx/ADRC clients
- Percent of clients who receive assistance with prescription medication
- Percent of clients who receive information and assistance about long term care supports and/or services

Goal 4 – Empowerment and Self Determination & Control: Provide education and resources to empower elderly individuals and their families to make informed decisions about their health, independence and well-being.

Objective 4.1: To provide educational resources to elderly and disabled individuals regarding community options.

Strategies:

- Continue access and outreach statewide with the Louisiana Aging network and the ADRCs.
- Provide public education presentation through providers to older adults, caregivers, adults with disabilities and the community on available supports and resources

Measures:

- Number of education presentations provided on caregiver and other resources available within the Louisiana Aging Network
- Number of elderly individuals and/or caregivers assisted through the ADRCs and the AAA's
- Obtain a 95% satisfaction on presentation evaluations

Objective 4.2: Provide awareness activities regarding Medicare Wellness and Preventative Services.

Strategies:

- Promote Medicare Wellness and Preventative Services through partners and the Louisiana Aging Network through community education and outreach events
- Statewide media publicity to educate Medicare eligible individuals about Medicare Wellness and Preventative Services

Measures:

- Number of community education and outreach events
- 50% of participants at the educational activities who are Medicare eligible

Objective 4.3: Provide awareness activities regarding wellness and disease management with special emphasis on evidenced based programs

Strategies:

- Promote and Support all evidence based activities

Measures:

- Number of units of Title III-D Wellness services

Attachment A

STATE PLAN ASSURANCES AND REQUIRED ACTIVITIES

Older Americans Act, As Amended in 2006 *By signing this document, the authorized official commits the State Agency on Aging to performing all listed assurances and activities as stipulated in the Older Americans Act, as amended in 2006.*

ASSURANCES

Sec. 305(a) - (c), ORGANIZATION

(a)(2)(A) The State agency shall, except as provided in subsection (b)(5), designate 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.

(a)(2)(B) The State agency shall provide 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.

(a)(2)(E) The State agency shall provide 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 older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the State plan;

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

(a)(2)(G)(ii) The State agency shall provide an 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.

(c)(5) In the case of a State specified in subsection (b)(5), the State agency and area agencies shall 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.

States must assure that the following assurances (Section 306) will be met by its designated area agencies on agencies, or by the State in the case of single planning and service area states.

Sec. 306(a), AREA PLANS

(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, health services (including mental health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services);

(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.

(4)(A)(i)(I) provide assurances that the area agency on aging will—

(aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;

(bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and (II) include proposed methods to achieve the objectives described in items (aa) and (bb) of subclause (I);

(ii) 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—

(I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;

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

(III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and

(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—

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

(II) describe the methods used to satisfy the service needs of such minority older individuals; and
(III) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

(4)(B)(i) 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—

(I) older individuals residing in rural areas;

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

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

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

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

(VII) older individuals at risk for institutional placement; and

(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.

(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, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities.

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

(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.

(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

(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.

(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.

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

(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.

(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.

(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.

(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.

(15) provide assurances that funds received under this title will be used

(A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and

(B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;

(17) Each Area Plan will include information detailing how the Area Agency will coordinate activities and develop long-range emergency preparedness plans with local and State emergency

response agencies, relief organizations, local and State governments and other institutions that have responsibility for disaster relief service delivery.

Sec. 307, STATE PLANS

(7)(A) The plan shall provide 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.

(7)(B) The plan shall provide assurances that—

- (i) 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;
- (ii) 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
- (iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

(9) The plan shall provide 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.

(10) The plan shall provide 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.

(11)(A) The plan shall provide assurances that area agencies on aging will—

- (i) enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance;
- (ii) 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
- (iii) 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.

(11)(B) The plan contains assurances 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.

(11)(D) The plan contains assurances, 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;

(11)(E) The plan contains assurances 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.

(12) The plan shall provide, whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals, the plan contains assurances 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—

(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.

(13) The plan shall provide assurances that each 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.

(15) The plan shall provide 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.

(16) The plan shall provide assurances that the State agency will require outreach efforts that will—

(A) identify individuals eligible for assistance under this Act, with special emphasis on—
(i) older individuals residing in rural areas;
(ii) older individuals with greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;
(iii) older individuals with greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;
(iv) older individuals with severe disabilities;
(v) older individuals with limited English-speaking ability; and
(vi) older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
(B) inform the older individuals referred to in clauses (i) through (vi) of subparagraph (A), and the caretakers of such individuals, of the availability of such assistance.

(17) The plan shall provide, 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.

(18) The plan shall provide 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.

(19) The plan shall include the assurances and description required by section 705(a).

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

(21) The plan shall
(A) provide an assurance that the State agency will coordinate programs under this title and programs under title VI, if applicable; and
(B) provide an 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.

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

(23) The plan shall provide 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.

(24) The plan shall provide 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.

(25) The plan shall include assurances that the State has in effect a mechanism to provide for quality in the provision of in-home services under this title.

(26) The plan 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 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.

(27) The plan shall provide assurances that area agencies on aging will provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care.

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

(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)

(1) The State plan shall provide an 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.

(2) The State plan shall provide an 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.

(3) The State plan shall provide an 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.

(4) The State plan shall provide an 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.

(5) The State plan shall provide an 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).

(6) The State plan shall provide an 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; and

(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

**FY 2015 State Plan Guidance
Attachment A (Continued)**

REQUIRED ACTIVITIES

Sec. 307(a) STATE PLANS

(1)(A) The State Agency 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) The State plan is based on such area plans.

Note: THIS SUBSECTION OF STATUTE DOES NOT REQUIRE THAT AREA PLANS BE DEVELOPED PRIOR TO STATE PLANS AND/OR THAT STATE PLANS DEVELOP AS A COMPILATION OF AREA PLANS.

(2) The State agency:

(A) evaluates, using uniform procedures described in section 202(a)(26), 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) has developed a standardized process to determine the extent to which public or private programs and resources (including Department of Labor Senior Community Service Employment Program participants, and programs and services of voluntary organizations) have the capacity and actually meet such need;

(4) The plan shall provide 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 older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas). Note: "Periodic" (defined in 45CFR Part 1321.3) means, at a minimum, once each fiscal year.

(5) The State agency:

(A) affords 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) issues guidelines applicable to grievance procedures required by section 306(a)(10); and

(C) affords 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 Section 316.

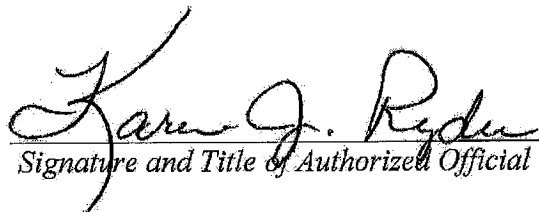
(6) The State agency will make such reports, in such form, and containing such information, as the Assistant Secretary may require, and comply with such requirements as the Assistant Secretary may impose to insure the correctness of such reports.

(8)(A) No supportive services, nutrition services, or in-home services are directly provided by the State agency or an area agency on aging in the State, unless, in the judgment of the State agency—

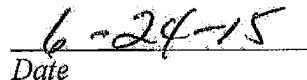
(i) provision of such services by the State agency or the area agency on aging is necessary to assure an adequate supply of such services;

(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.



Signature and Title of Authorized Official



Date

Appendix B

Section 305 (a)(2)(E)

Describe the mechanism(s) for assuring 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 older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the State plan;

Louisiana strives to serve all citizens who are over age 60 utilizing Title III funding without distinction of race or ethnicity. Preference for Title III services is given to individuals who have the greatest economic or social need with particular attention to low-income minority individuals, those who reside in rural areas of the state, those who are limited in their English speaking abilities and those who are of Native American descent.

Section 306(a)(I7)

Describe the mechanism(s) for assuring that each Area Plan will include information detailing how the Area Agency will coordinate activities and develop long-range emergency preparedness plans with local and State emergency response agencies, relief organizations, local and State governments and other institutions that have responsibility for disaster relief service delivery.

As a component of each AAA Area plan, an Emergency/Disaster Plan must be submitted to GOEA by April each year so that changes and modification may be done prior to hurricane season start (June 1). Each Emergency/Disaster Plan, once approved becomes a part of the AAA Area Plan. Each emergency/disaster plan must include mitigation strategies, safety procedures and recovery strategies for continuity of operations. Each AAA must identify local emergency personnel and are encouraged to meet with the emergency managers in each PSA in case of an emergency. Local Councils on Aging that provide transportation services coordinate evacuation transportation with the local emergency managers. The coastal agencies maintain an evacuation roster for those who they serve that need assistance with evacuation. Some coastal agencies have mitigated special shelter locations with other councils on aging that are not in the coastal region. Host agency of evacuated seniors will work with the evacuated agency to ensure the needs of the seniors are met during the time of the evacuation. Emergency/Disaster Plans in Louisiana are considered Hurricane Plans, but each AAA is required to identify any threats to the agency, staff, seniors that may interrupt service delivery or cause safety issues to the staff or clients.

GOEA has a state Disaster Plan (Appendix D), for continuity of operations and services. In addition to the SUA Disaster Plan, GOEA serves in a supportive capacity on the Louisiana State Emergency Operations Plan developed by the Governor's Office of Homeland Security and Emergency Preparedness (GOHSEP) and a support agency in Emergency Management (ESF5) and Emergency Public Information (ESF15).

In 2006, the Emergency Management for Disabled and Elderly Coalition (EMDAC) was established and meets routinely on a quarterly basis. Members to this coalition include GOEA,

Louisiana Department of Health and Hospitals, Louisiana Department of Social Services, AARP, ALS, New Horizons, LA Technology Assistive Network (LATAN), The American Red Cross, Advocacy Center, Louisiana Department of Social Services, ARC of Louisiana, Louisiana Rehabilitation Services and Governor's Office of Homeland Security-Office of Emergency Preparedness, Centene Corporation (a health care agency) and the New Orleans Mayor's Office of Emergency Preparedness. This coalition is part of the Louisiana delegation that participated in the June 2006 Emergency Management and Individuals with Disabilities and the Elderly Conference held in Washington DC. This conference was the response to the aftermath of Hurricane Katrina. This has created a bond with agencies who have individuals with special needs. EMDAC has established resources guides for the Red Cross shelter staff, shelter screening tools, emergency education materials and training modules to help teach disabled individuals, elderly individuals and caregivers how to develop their personal emergency plans. EMDAC is a voluntary coalition. In Spring of 2014 EMDAC held the first round table discussion with emergency managers, EMDAC and disabled/elderly individuals along with their caregivers. GOHSEP moderated the round table discussion. There were representatives from ALS, ARC, Elderly, Vocational Rehabilitation, GOHSEP and emergency responders in attendance. EMDAC members served in an observation capacity. The exercise walked the participants and the emergency managers thru 3 different types of emergencies and asked each participant how he/she would respond. The evaluation survey at the conclusion of the exercise reflects the exercise was beneficial to both the emergency managers and the participants who were caregivers, elderly or disabled. Due to budget constraints of the agencies participating with EMDAC, the roundtable has not been repeated. A training module has been developed for the coalition members to share with their own agency clients. The training module was first used in Jefferson and New Orleans parishes. Training sessions have been scheduled for the meal sites and senior centers for the Jefferson Council on Aging and New Orleans Council on Aging beginning June 2015. Coalition members will deliver the emergency training to the participants.

The Department of Health and Hospitals manages the emergency preparedness for the evacuation procedures for long term care facilities, but GOEA maintains contact with DHH in a state of emergency to ensure that the needs are met for the residents of the long term care facility.

GOEA staff attends training on Emergency Preparedness and provides training workshops, information, training and resources to the aging network thru e-mail, Elder News Publication and on the GOEA website.

Section 307(a)(2)

The plan shall provide that the State agency will:

- (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 sections 306 (c) or 316) by such area agency on aging to provide each of the categories of services specified in section 306(a)(2) (Note: those categories are access, in-home, and legal assistance). Provide specific minimum proportion determined for each category of service.)**

As a component of each AAA area plan, each agency is required to demonstrate its allocation of the required five percent for access, in-home and legal assistance. This data is then captured on a budget page included in the area plan. GOEA has specific policy for the priority services:

<i>Access Services</i>	<i>30%</i>
<i>In Home Services</i>	<i>15%</i>
<i>Legal Services</i>	<i>05%</i>

These requirements are located in the GOEA Policy and Procedure Manual Subchapter B §1141 which specifies the minimum percentage which will be allocated to the priority service categories.

Section 307(a)(3)

The plan shall:

(B) with respect to services for older individuals residing in rural areas:

- (i) provide assurances the State agency will spend for each fiscal year of the plan, not less than the amount expended for such services for fiscal year 2000.**
- (ii) identify, 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)**
- (iii) describe the methods used to meet the needs for such services in the fiscal year preceding the first year to which such plan applies.**

Each AAA receives annually at least as much funding as it received in year 2000. Year 2000 is the base for annual planning levels, and the difference between planning levels for the coming year and the base is calculated.

The land area in square miles factor is included to compensate area agencies serving predominantly rural areas for the special problems encountered by sparse populations who may be spread over large geographical areas. Assuming flat funding, the component of appropriations associated with land mass/rural population will be:

<i>Federal Fiscal Year</i>	<i>Total Funding Associated with Land Mass/Rural</i>
<i>2015-16</i>	<i>\$4,688,918</i>
<i>2016-17</i>	<i>\$4,688,918</i>
<i>2017-18</i>	<i>\$4,688,918</i>
<i>2018-19</i>	<i>\$4,688,918</i>

Section 307 (a)(10)

The plan shall provide assurance that the special needs of older individuals residing in rural areas are taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

GOEA has worked with the AAAs and the Louisiana aging network to provide service delivery to those older individuals who reside in rural areas of the state and will continue efforts

for this plan. Louisiana demographics reflect that 27% of persons age 60 or above reside in rural areas of the state. Partnership development with local community partners, non-profit agencies, churches, and other groups will be a priority for the aging network to meet the needs of the rural and/or isolated individuals who may be economically and/or socially challenged. Funding is dispersed based upon the IFF.

Section 307 (a)(14)

(14) The plan shall, with respect to the fiscal year preceding the fiscal year for which such plan is prepared __

(A) Identify the number of low-income minority older individuals in the State, including the number of low income minority older individuals with limited English proficiency, and

According to the Aging Integrated Database (AGID) projection estimates for 2013, 13% of the age 60 plus individuals in Louisiana speak another language other than English and 4% of those that speak another language other than English have minimal English speaking abilities and do not speak English “very well”.

14% of individuals over age 60 in Louisiana are low-income and considered below the poverty level. There are 55, 479 minority individuals who are over age 60 in Louisiana.

(B) Describe the methods used to satisfy the service needs of the low-income minority older individuals described in subparagraph (A), including the plan to meet the needs of low-income minority older individuals with limited English proficiency.

- *Encourage and promote inclusion of the most needy economically challenged individuals are representatives of advisory councils at all levels (Local, regional and state)*
- *Continue the establishment of community focal points and/or service locations that provide easy access to services and health care options for the elderly and disabled individuals who may reside in rural areas, individuals of Native American descent and those with limited English speaking abilities.*
- *Assure sensitivity of the state unit on aging staff to the special service needs of the economically and social needy older persons in Louisiana*
- *Provide technical assistance and training to all aging service providers for increased business acumen (AAA's, COA's, ADRC's. etc)*
- *Enhance through extended outreach efforts to for Title VI and the Native American communities within Louisiana to include state and nationally recognized tribal residents*
- *Coordinate Title III and Title VI services for all eligible Louisiana citizens*
- *Provide special needs orientation to service staff and volunteers regarding the economically and socially needy older persons in Louisiana*
- *Continue and enhance partnerships with other state agencies and service providers to ensure information, resources and services reach the target populations*

- *Monitor and assess the AAA's in how they respond to the needs of the economically and socially needy older persons of the state which may include individuals who reside in rural areas, individuals of Native American descent and those with limited English speaking abilities.*

Section 307 (a)(21)

The plan shall:

- (B) provide an 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 (Title III), if applicable, and specify the ways in which the State agency intends to implement the activities.**

Louisiana demographics reflect that under 5% of the elderly citizens are Native American. The service providers in Louisiana work with all community partners and programs to serve all who are age 60 or above regardless of ethnicity. In Louisiana there are only 4 federally recognized tribes and 10 state recognized tribes. Terrebonne AAA has the largest Native American population in their service area, but this tribe is not federally recognized. Thru partnership development and other programs, GOEA continues to encourage outreach and partnerships with the Native American citizens in Louisiana.

Section 307(a)(29)

The plan shall include information detailing how the State will coordinate activities, and develop long-range emergency preparedness plans, with area agencies on aging, local emergency response agencies, relief organizations, local governments, State agencies responsible for emergency preparedness, and any other institutions that have responsibility for disaster relief service delivery.

As a component of each AAA Area plan, an Emergency/Disaster Plan must be submitted to GOEA by April each year so that changes and modification may be done prior to hurricane season start (June 1). Each Emergency/Disaster Plan, once approved becomes a part of the AAA Area Plan. Each emergency/disaster plan must include mitigation strategies, safety procedures and recovery strategies for continuity of operations. Each AAA must identify local emergency personnel and are encouraged to meet with the emergency managers in each PSA in case of an emergency. Local Councils on Aging that provide transportation services coordinate evacuation transportation with the local emergency managers. The coastal agencies maintain an evacuation roster for those who they serve that need assistance with evacuation. Some coastal agencies have mitigated special shelter locations with other councils on aging that are not in the coastal region. Host agency of evacuated seniors will work with the evacuated agency to ensure the needs of the seniors are met during the time of the evacuation. Emergency/Disaster Plans in Louisiana are considered Hurricane Plans, but each AAA is required to identify any threats to the agency, staff, seniors that may interrupt service delivery or cause safety issues to the staff or clients.

GOEA has a state Disaster Plan (Appendix D), for continuity of operations and services. In addition to the SUA Disaster Plan, GOEA serves in a supportive capacity on the Louisiana State Emergency Operations Plan developed by the Governor's Office of Homeland Security and Emergency Preparedness (GOHSEP) and a support agency in Emergency Management (ESF5) and Emergency Public Information (ESF15).

Section 307(a)(30)

The plan shall include information describing the involvement of the head of the State agency in the development, revision, and implementation of emergency preparedness plans, including the State Public Health emergency Preparedness and Response Plan

GOEA serves on emergency management committees to develop, recommend policy/procedural changes and exercise various State emergency preparedness, response and recovery plans. Currently GOEA staff is involved in providing round table exercises to train and prepare individuals who are elderly, disabled or are the caregivers of the elderly and/or disabled. GOEA is listed as a support agency in the Louisiana State Emergency Operations Plan developed by the Governor's Office of Homeland Security and Emergency Preparedness (GOHSEP). GOEA is charged in this state EOP to serve in Emergency Management (ESF5) and Emergency Public Information (ESF15).

Section 705(a)(7)

In order to be eligible to receive an allotment under this subtitle, a State shall include in the State plan submitted under section 307:

(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).

(Note: Paragraphs (1) of through (6) of this section are listed below)

In order to be eligible to receive an allotment under this subtitle, a State shall include in the State plan submitted under section 307:

- (1) An 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;**
- (2) An assurance that 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;**
- (3) An 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;**
- (4) An 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;**
- (5) An assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(s)(5);**

- (6) An 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 services 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 services agencies or sources of assistance if appropriate and if the individuals to be referred consent; and**
 - (iv) Referral of complaints to law enforcement or public protective services 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 services agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or**
 - (iii) Upon court order**

GOEA assurance they will comply with the above assurances. GOEA continues to monitor and review policies, procedures, and regulations to ensure that all services provided through the Older Americans Act comply with these and other requirements of the program.

Appendix 3

IX (1305) Intrastate Funding Formula

A. Intrastate Funding Formula

1. The following is a descriptive summary of the current Intrastate Funding Formula's assumptions and goals, and the application of the definitions of greatest economic or social need and a demonstration of the allocation of funds, pursuant to the formula, to each PSA.
2. Descriptive Statement
 - a. The current intrastate funding formula for the distribution of Older Americans Act Title III funds in Louisiana provides for a base allocation by parish. The following factors are considered in the distribution of funds remaining after base allocations are made: population aged 60 and over; population aged 60 and over below the Bureau of Census poverty threshold; population aged 75 and over; and land area in square miles. Each of these factors is derived by dividing the planning and service area total by the state total.
 - b. Population aged 60 and over, and land area in square miles is assigned weights of one (1) each. Population aged 60 and over below the Bureau of the Census poverty threshold is assigned a weight of nine-tenths. Population aged 75 and over is assigned a weight of one-tenth. The sum of these four factors is three (3).
 - c. Those elderly in greatest economic need are defined as persons aged 60 and older whose incomes are at or below the poverty threshold established by the Bureau of the Census. Those elderly in greatest social need are defined as persons aged 60 and over who have needs based on noneconomic factors such as social isolation caused by living in remote areas, or who are especially vulnerable due to the heightened possibility of frailty among elderly aged 75 and older. Other social needs are those, which restrict an elderly individual's ability to perform normal daily tasks, or which restrict his or her ability to live independently; they can be caused by racial or ethnic status or language barriers. The intra-state funding formula accounts for these individuals by not allocating funds solely on the basis of population. The land area in square miles factor is included to compensate area agencies serving predominantly rural areas for the special problems encountered by sparse populations who may be spread over large geographical areas. The four funding factors combined to meet the special needs of socially and economically needy elderly, urban elderly and rural elderly.

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- d. The base funding allocation of \$12,000 per parish is established on the assumption that this amount represents a minimum allocation for the administration of Older Americans Act programs. There is an increasing need to provide a continuum of care for the very old (aged 75 and older) as this segment of the population gets larger each year. Funding limitation dictate that this group is given special emphasis.

3. Numerical statement of the intrastate funding formula

- a. Base allocation per PSA: \$12,000 per parish
- b. Formula Allocation per PSA:

	Factors	Weight
i	<u>PSA 60+Population</u> State 60+ Population	1.0
ii.	<u>PSA 60+ Population below Poverty Threshold</u> State 60+Population below Poverty Threshold	0.9
iii.	<u>PSA Land Mass in Square Miles</u> State Land Mass in Square Miles	1.0
iv.	PSA 75+ Population State 75+ Population	0.1
V	SUM	3.0

4. PSA FORMULA = $\frac{(i)X1 + (ii) \times 0.9 + (iii) \times 1 + (iv) \times 0.1}{3}$

3

AUTHORIT NOTE: Promulgated in accordance with R.S. 46:932(8)

HISTORICAL NOTE: Promulgated by the Office of the Governor , Office of Elderly Affairs, LR 19:1317 (October 1993), repealed and promulgated LR 23:1146 (September 1997) repealed LAC 4:VII 1315 and re-promulgated LAC 4:VII as 1305 LR 26:1611 (August 2000), repealed and promulgated LR 30:1696 (August 2004), LR 35:662 (April 2009), LR 37:320 (January 2011)

Appendix 4

State Plan Demographics

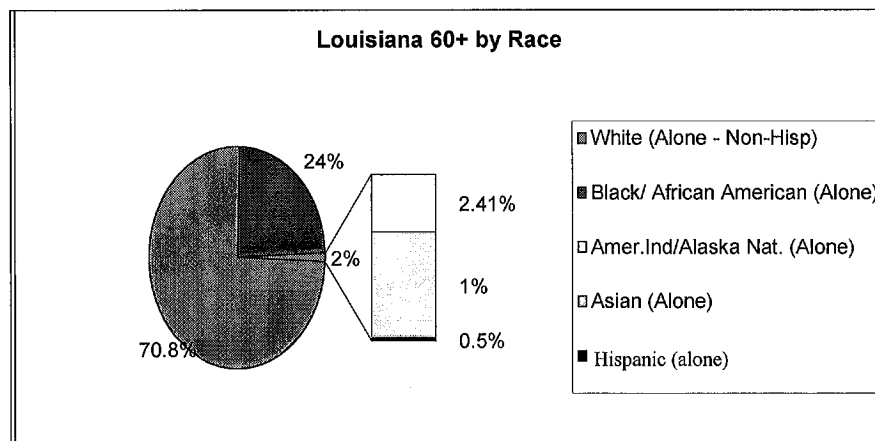
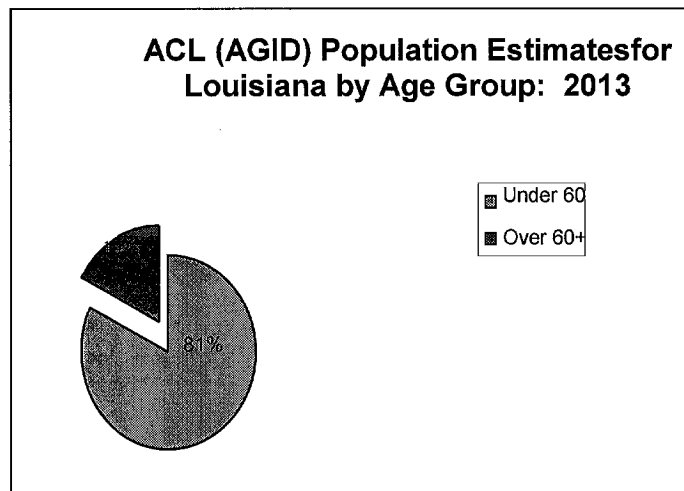
In lieu of the gulf storms of 2005 and 2007, Louisiana continues to recover and move forward. The Louisiana Road Home Program has assisted over 130,000 residents across Louisiana's coastal regions to rebuild and protect homes and rental properties from future storm damage. The Road Home Program also provided funds for restoration of nearly 8,500 rental property units. Currently, while there is still much work to be done to continue to rebuild Louisiana, the Road Home program is in the compliance and monitoring phase of the recovery process. Many areas of the state continue to re-build affordable housing to accommodate those individuals that were affected by the storms. The New Orleans area has increased in population since the storm Katrina in 2005, but still remains below the Pre-Katrina population. The Veteran's Administration has completed the Southeast Louisiana Veterans Health Care System which provides health care to Veterans in a 23 parish area of Southeast Louisiana. There are 8 community-based clinics located in New Orleans, Slidell, Hammond, Saint John, Houma, Franklin, Bogalusa and Baton Rouge. Specialty care is available in Baton Rouge and New Orleans facilities and other Veterans Affairs Medical Centers. The New Orleans campus now has an Ambulatory Procedure Unit, Non -APU services (pain, gastrointestinal and audiology clinics), Vision Center and Mental Health Services. The Southwest area of Louisiana was affected by Storms Rita 2005 and Ike in 2007. Because the population in the Southwest area was not as heavily populated as the Southeast area of the state, the population trend is not as noticeable. Many residents affected by Rita and Ike were able to relocate to family and friends in other areas of the state. In 2012, Gulf Storm Isaac hit the coast of Louisiana and caused extensive flooding and power outages. Saint John the Baptist Parish was hardest hit parish (county) in the state. Hurricane Isaac of 2012 caused damage to nearly 59,000 homes across Southeast Louisiana. GOEA received \$100,000 in Disaster Funding to assist senior residents in the disaster areas by providing supportive services above and beyond other resources.

The 2013 Census projection profiles the general population and housing characteristics for Louisiana. The population estimate for the age 60 plus is 877,547 which is 18.9% of the total state population. Louisiana ranks 25th in the 60 plus age population. The rural population for Louisiana are estimated at 233,561 individuals over age 60. For every 100 males who are age 60 plus, there are 123.9 females. The racial statistics reflect 71% white, 24% African American with other races making up the remaining 5%. The minority make-up for the 60 plus in Louisiana is estimated at 29%. When comparing the 60 plus age group to the 65 plus age group, there is a 264,061 difference with the median age for the 65 age group as 73.9.

The 60 plus age group has 54% married, 28% widowed and 11% divorced and 7% never married. The education statistics are the same for the 60 plus age group as the under age 60. 20% do not have a high school diploma. 35% have a high school diploma or the equivalent (GED). Higher education degrees such as the Bachelor's Degree is at 17% for the 60 plus population and 21% for the population under age 60. 87% of the Louisiana population age 60 plus only speak English. 13% of the age 60 Plus speak another language other than English and 4% of the 13% have minimal English speaking abilities and do not speak English "very well". In the work force for the aged 60 plus population, 24% are employed. The mean income for the aged 60 plus population is \$48,188. 78% receive social security.

Poverty has been determined to be 720,506 older persons with 14% being 100% below the poverty level, 13% at or above 100% to 14% and the remaining 73% are at or above the 150% of the poverty level. 13% of the 60 plus age population receive Supplemental Nutrition Assistance Program (SNAP) benefits.

2013 Population Estimates for Louisiana by Age Group				
All Ages	Under 60	60+	75+	85+
4,625,470	3,747,923	877,547	258,328	73,286
	81.02%	18.97%	5.58%	1.58%



The following chart represents the Census 2013 for the 60+ for states surrounding Louisiana.

STATE	60+ Population	60+ Percentage of Total Population
Louisiana	877,547	18.9%
Alabama	1,010,819	20.9%
Arkansas	627,405	21.2%
Mississippi	586,183	19.5%
New Mexico	434,034	20.8%
Oklahoma	765,521	19.8%

Appendix 5

LA GOVERNOR'S OFFICE OF ELDELRY AFFAIRS EMERGENCY/DISASTER PLAN

AGENCY GOAL

The goal of the Louisiana State Unit on Aging- Governor's Office of Elderly Affairs (GOEA) in an emergency situation is to remain calm, provide assistance, coordinate services, and play a **leadership role** to the aging services network providers in the event disaster strikes anywhere in the state of Louisiana.

AGENCY OBJECTIVES

The objectives of GOEA in a disaster or emergency are:

1. A more **READY** and **RESILIENT** staff and aging services network providers in an emergency or disaster.
2. Continuity of **GOEA** operation to provide immediate assistance to the aging services network providers in an emergency or disaster.
3. **Restoration** of aging services network services as soon as possible following an emergency or disaster.

EMERGENCY REPOSE PRIOR TO AN EMERGENCY

The following measures will be implemented in order to prepare for an emergency/disaster.

1. GOEA Unit Managers will develop an Emergency Plan for his/her unit addressing essential operations, staff roles and responsibilities.
2. GOEA Unit Managers will collaborate with Disaster Coordinator to educate and/or train GOEA staff to fulfill designated roles and responsibilities pre/post emergency/disaster.
3. Disaster Coordinator will engage aging services network providers in preparedness training and community preparedness outreach/education.
4. GOEA staff and aging services network providers shall participate in emergency/disaster prevention or preparedness activities, drill(s) and exercise(s) to allow for a more resilient state unit on aging.
5. GOEA staff and aging services network providers shall establish and maintain a **Communication/Telephone Tree** for notification during the alert and response phase of an emergency or disaster.

6. Disaster Coordinator and Safety Coordinator will maintain a copy of the emergency manual, a first aid kit, and emergency kit. Emergency kit to include: flashlight, battery-operated radio, staff name badge copies, clean up supplies and rubber gloves.

RESPONSE PHASE-ALERT

The following outlines the responsibilities of **GOEA** staff upon notification of an emergency/disaster.

Following the Alert phase, the **Executive Director or Deputy Director** will:

1. Before Emergency Operations Center (EOC) activation, make all communications with the Governor's Office, **GOEA Unit Managers**, and other state agency partners to assure coordination of status reports and resource availability and issue directives accordingly.
2. Ensure that GOEA have assigned staff as appropriate and that communication and record-keeping are in place.

Following the directives of the **Executive Director or Deputy Director, GOEA Unit Managers** will:

1. Communicate with staff about emergency notification and task.
2. **Activate Communication/Telephone Tree** (Disaster Coordinator will update and maintain staff contact information).
3. Ensure that GOEA **"critical" equipment and supplies are secured.**
4. Ensure that all **"essential" documents/files are back-up and secured.**

RESPONSE-During emergency/disaster

GOEA responsibility during a disaster/emergency is to prepare to meet the immediate needs of the aging service network providers impacted. This includes agency response to ensure agency continuity of operations.

1. When alerted of an impending or potential disaster/emergency, it will be the immediate responsibility of any or all **GOEA staff** to contact their **Unit Manager** for guidance and directives. In the absence of the Unit Manager, the Deputy Director must be contacted.
2. **Activation of Communication/Telephone Log** In the event telephones are inoperable, text messaging or email shall be used instead.
3. **GOEA staff** must be accessible and ready to respond to the aging services network providers' needs.

4. The **Disaster Coordinator** shall obtain status report(s) of impacted areas and provide critical data to the HCBS Unit/Program Monitors and management as needed.

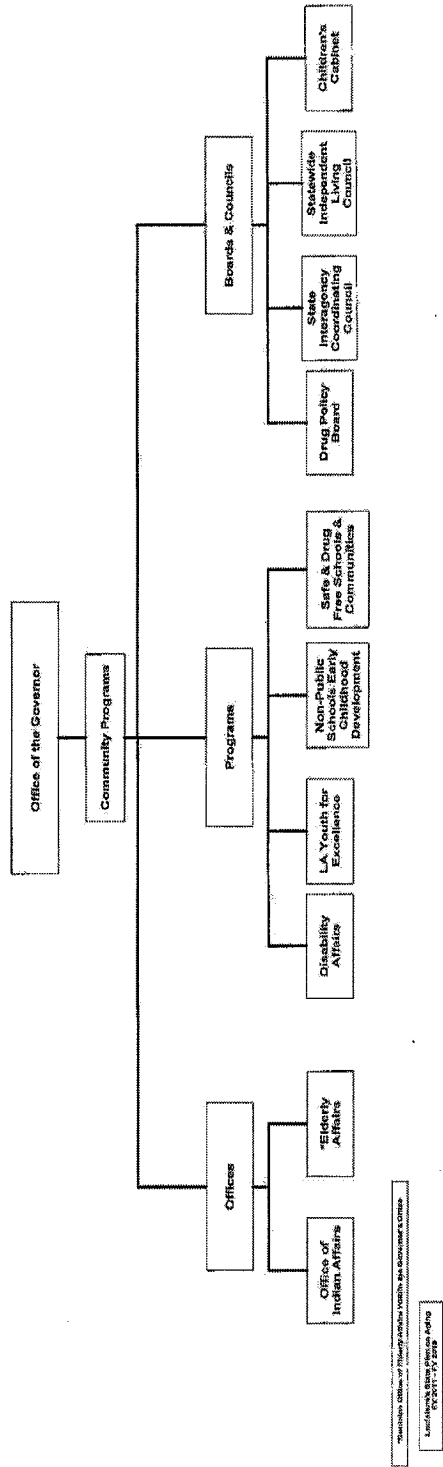
RECOVERY PHASE

GOEA will collaborate and coordinate resources available to the aging services network during the Recovery Phase to assist elderly in re-establishing their lives.

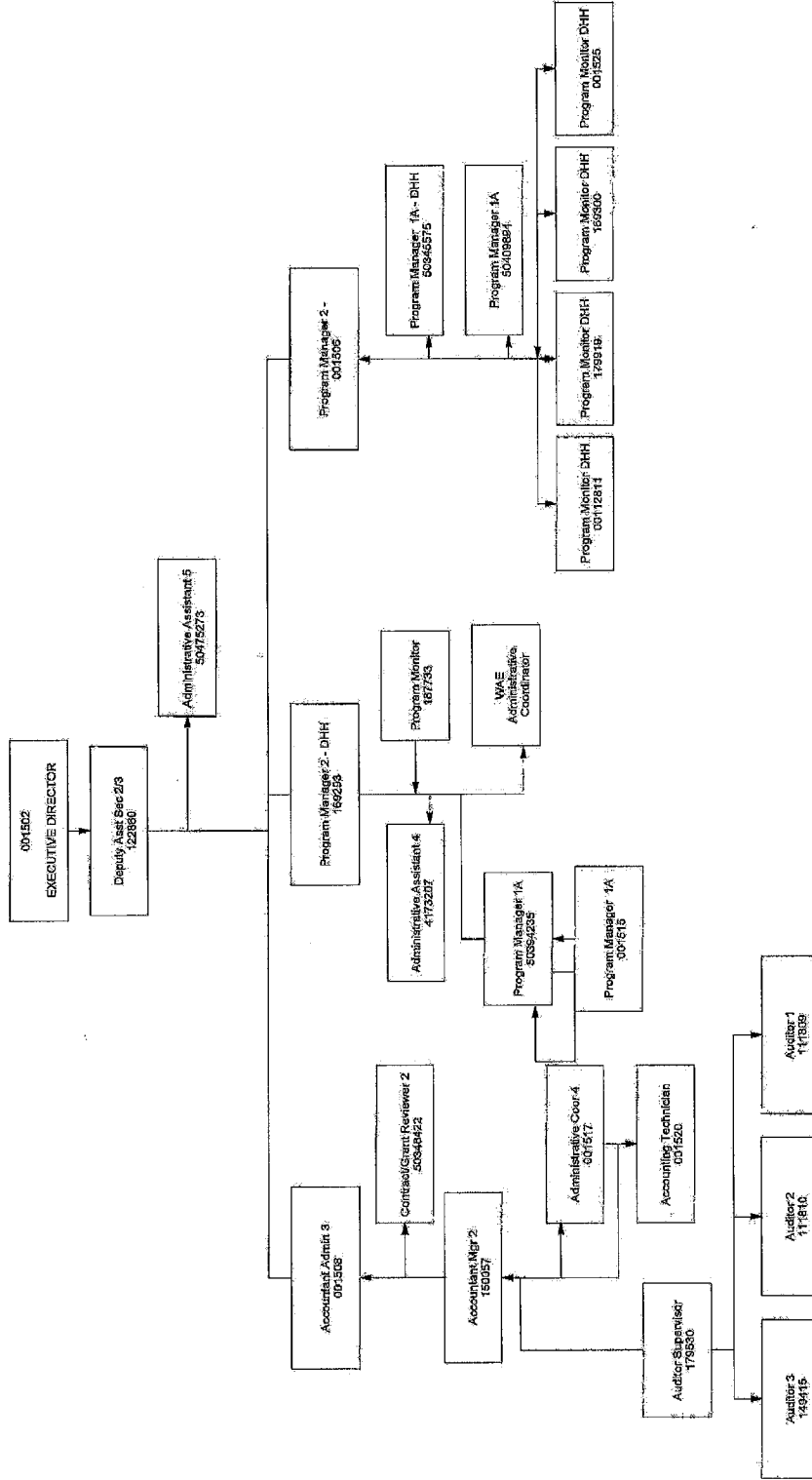
1. Following the emergency/disaster, a report and/or operations evaluation will be prepared, including but not limited to the following:
Type/scope and location of the disaster/emergency
Numbers of seniors impacted
Services provided, resources utilized and phone log
2. The AAA Director will communicate identified needs to GOEA and must notify the GOEA Disaster Coordinator within 24 hours, and provide the following information:
Number of seniors affected
Services needed
Description of services
Need for relocating services
3. Disaster Coordinator will compile statistical data of impacted area(s) and submit to Compliance and Planning Unit Manager within 24-hours and daily thereafter.
4. Compliance and Planning Unit will compile GOEA report to the Administration on Community Living (ACL)/Administration on Aging (AoA) and agency status report to GOEA Management.

Appendix 6

Organizational Charts



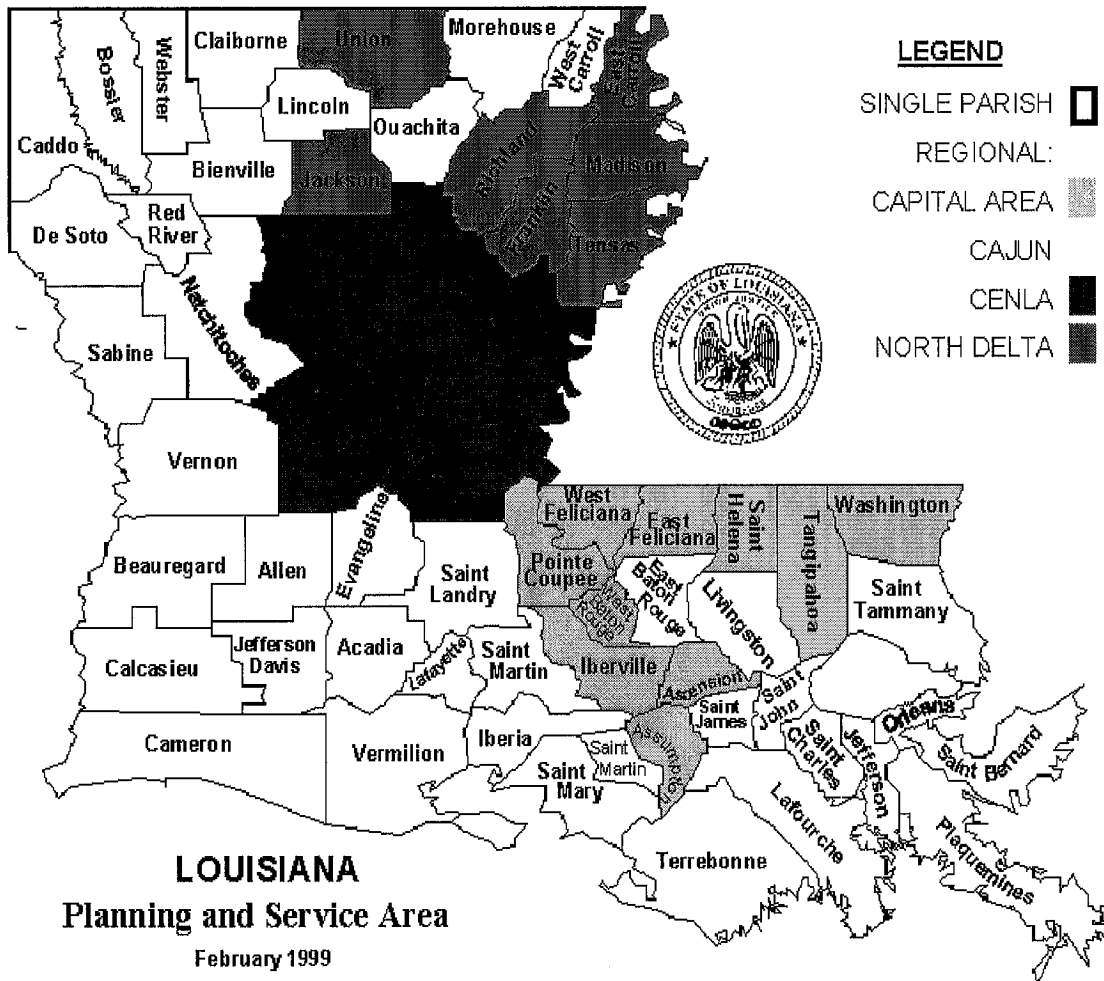
OFFICE OF THE GOVERNOR - OFFICE OF ELDERLY AFFAIRS



REVISED: DECEMBER 10, 2014

Appendix 7

PSA MAP



PSA	Area Agency on Aging
01	Beauregard Council on Aging, P.O. Drawer 534, Deridder, LA 70634-0534 E-Mail: clgbeaucoa@bellsouth.net Business: 337-463-6578
02	Bienville Council on Aging, 600 Factory Outlet Drive, Suite 15, Arcadia, LA 71001 E-Mail: bienco@bayou.com Business: 318-263-8936
03	Bossier Council on Aging, P.O. Box 5606, Bossier City, LA 71171-5606 E-Mail: tcrane@bossiercoa.org Business: 318-741-7358
04	Caddo Council on Aging, 1700 Buckner Street, Suite 240, Shreveport, LA 71101-6422 E-Mail: cco@caddocoa.org Business: 318-632-2090 Website: www.caddocouncilonaging.org
05	Calcasieu Council on Aging, 3950 Hwy 14, Lake Charles, LA 70605 E-Mail: jgreen@calcoa.org Business: 337-471-2583 Website: www.swlamall.com/agingwell
06	Caldwell Parish Council on Aging, P.O. Box 1498, Columbia, LA 71418 E-Mail: dottie@caldwellcoa.org Business: 318-649-2584 Website: www.caldwellcoa.org
07	Cameron Council on Aging, P.O. Box 880, Grand Lake, LA 70606 E-Mail: dinahlandry@yahoo.com Business: 337-598-5158
08	Claiborne Council on Aging, P.O. Box 480, Homer, LA 71040-0480 E-Mail: dblackwell@claibornecouncilonagin.org Business: 318-927-6922
09	DeSoto Council on Aging, P.O. Box 996, Mansfield, LA 71052 E-Mail: dcoa@bellsouth.net Business: 318-872-3700
10	East Baton Rouge Council on Aging, 5790 Florida Blvd, Baton Rouge, LA 70806 E-Mail: tamar@ebrcoa.org
11	Jefferson Council on Aging, P.O. Box 73769, Metairie, LA 70003 E-Mail: arobichaux@jcoa.net Business: 504-888-5880
12	Lafourche Council on Aging, P.O. Box 500, Raceland, LA 70394-0500 E-Mail: lafcoadirector@viscom.net Business: 985-537-3492 Website: www.lafourcheco.org
13	Lincoln Council on Aging, P.O. Box 1058, Ruston, LA 71273-1058 E-Mail: mdwright@suddenlinkmail.com Business: 318-255-5070
15	Morehouse Council on Aging, P.O. Box 1471, Bastrop, LA 71221-1471 E-Mail: reggiedir@bellsouth.net Business: 318-283-0845 Website: www.morehousecoa.org
16	Natchitoches Council on Aging, P.O. Box 2083, Natchitoches, LA 71458 E-Mail: mpcoa@cp-tel.net Business: 318-357-3250
17	New Orleans Council on Aging, P.O. Box 19067, New Orleans, LA 70119 E-Mail: hrogers@noco.org Business: 504-821-4121 Website: www.noco.org
18	Ouachita Council on Aging, P.O. Box 14363, Monroe, LA 71201 E-Mail: aging@centrytel.net Business: 318-387-0535 Website: www.ouachitacoa.com
19	Plaquemines Council on Aging, P.O. Drawer 189, Port Sulphur, LA 70083 E-Mail: gjenks@pcoa.us Business: 985-564-0600
20	Red River Council on Aging, P.O. Drawer 688, Coushatta, LA 71019 E-Mail: rrcoa2@bellsouth.net Business: 318-923-5721
21	Sabine Council on Aging, 200 Legacy Drive, Many, LA 71449 E-Mail: scoa@bellsouth.net Business: 318-256-4140
22	Saint Bernard Council on Aging, 8201-A West Judge Perez Drive, Chalmette, LA 70043

	E-Mail: stbernardcoa@yahoo.com Business: 504-278-7335
23	Saint Charles Council on Aging, 626 Pine Street, Suite A, Hahnville, LA 70057 E-Mail: akeller@stcharlescoa.com Business: 985-783-6683
24	Saint James Parish Dept. of Human Resources, P.O. Box 87, Convent, LA 70723 E-Mail: Suewon.narcisse@stjamesla.com Business: 225-562-2302
25	Saint John Council on Aging, 214 Regala Park Road, Reserve, LA 70084 E-Mail: cherylp@rtconline.com Business: 985-652-3660
26	Saint Tammany Council on Aging, P.O. Box 171, Covington, LA 70433 E-Mail: Julie@coastseniors.org Business: 985-892-0377 Website: www.coastseniors.org
28	Terrebonne Council on Aging, 995 West Tunnel Blvd, Houma, LA 70360 E-Mail: diana@tcoa-la.org Business: 985-868-7701 Website: www.bayoubusiness.com/tcoa
29	Webster Council on Aging, P.O. Box 913, Minden, LA 71055 E-Mail: wpc@a@yahoo.com Business: 318-371-3056
30	West Carroll Council on Aging, P.O. Box 1058, Oak Grove, LA 71263 E-Mail: wcco71263@yahoo.com Business: 318-428-4217
31	Capital Area Agency on Aging, P.O. Box 66038, Baton Rouge, LA 70896-6038 E-Mail: ibeauvais@capitalaaa.org Business: 225-922-2525 Website: www.capitalaaa.org Parishes: Ascension, Assumption, East Feliciana, Iberville, Pointe Coupee, Saint Helena, Tangipahoa, Washington, West Baton Rouge and West Feliciana
32	CENLA Area Agency on Aging, P.O. Box 13027, Alexandria, LA 71315-3027 E-Mail: nelldeville@cenlaaging.org Business: 318-484-2260 Website: www.cenlaaging.org Parishes: Avoyelles, Catahoula, Concordia, Grant, LaSalle, Rapides and Winn
33	Cajun Area Agency on Aging, P.O. Box 60850, Lafayette, LA 70506 E-Mail: cajunaaa@bellsouth.net Business: 337-572-8940 Website: www.cajunaaa.org Parishes: Acadia, Evangeline, Iberia, Lafayette, Saint Landry, Saint Martin, Saint Mary and Vermilion
34	North Delta Area Agency on Aging, 1913 Stubbs Avenue, Monroe, LA 71201 E-Mail: lanell@northdelta.org Business: 318-387-2572 Website: www.northdelta.org Parishes: East Carroll, Franklin, Jackson, Madison, Richland, Tensas and Union
35	Livingston Council on Aging, P.O. Box 658, Denham Springs, LA 70727 E-Mail: director@livcoa.brcoxmail.com Business: 225-664-9343 Website: www.livingstoncouncilonaging.com
36	Vernon Council on Aging, 200 N. Third Street, Leesville, LA 71446-0275 E-Mail: vcoa1@bellsouth.net Business: 337-239-4361
37	Allen Council on Aging, P.O. Drawer E-L, Oakdale, LA 71463 E-Mail: allencouncil@bellsouth.net Business: 318-335-3195
38	Jefferson Davis Council on Aging, P.O. Box 734, Jennings, LA 70546 E-Mail: hlangley@bellsouth.net Business: 337-824-5504

Appendix 9

Community & Public Hearing Meetings

Community & Public Hearing Meetings

Allen Council on Aging

Date of Community Meeting: August 29, 2014

Summary of Comments:

- Consumers requested more transportation to the Allen Parish Senior Center for residents near the Kinder Area.
- A service provider from hospice who requested services from the council on aging for her clients who live in remote rural areas of the parish.
- A comment was made by a state legislator regarding agency funding and that the agency needs more funding.

There were no revisions to the plan due to the comments received at the community meeting.

Date of Public Hearing: August 29, 2014

Summary of Comments:

- Consumers requested more transportation to the Allen Parish Senior Center for residents in the more rural areas of the parish
- Expansion of services to reach more rural areas of the parish

There were no modifications or revisions made to the plan due to the public hearing

Beauregard Council on Aging

Date of Community Meeting: July 8, 2014

Summary of Comments:

- Menu changes requested as there are too many bean days
- Client requested transportation services
- How can we get VA to come to the parish 5 days a week to process claims instead of 2-3 days per week? VA makes us wait hours and sometimes we are not seen
- Are there any trips planned in the fall?
- Just went next door to community action, this is my 3rd trip in 2 months and still no money to pay electric bills

There were no revisions to the plan due to the comments received at the community meeting.

Date of Public Hearing: 08-18-2015

Summary of Comments:

- No comments provided

There were no modifications or revisions made to the plan due to the public hearing

Bienville Council on Aging

Dates of Community Meetings: December 17, 2014, December 30, 2014

Summary of Comments:

- Interested in legal assistance and sitter service

Legal assistance and Sitter services will be included in the area plan.

Bossier Council on Aging

Dates of Community Meetings: April 22, 2014, June 30, 2014, July 11, 2014

Summary of Comments:

- Comments of appreciation were received by the agency from clients who participate in services delivered at the Bossier meal sites and senior centers
- Comments were received regarding transportation as it is not being provided daily.
- Comments were received regarding the senior center operating at full capacity and how the agency can look at was to expand the building
- The Benton Mayor expressed how much he appreciated the seniors supporting the Benton meal site and attending functions.
- Families attending the June 13, 2014 meeting requested more support in caregiving for loved ones at home (More time)
- Healthcare agencies requested information on how they can make referrals to the agency for services.
- Clients requested information on how the wellness and recreations services could be expanded
- Clarification was requested on how waiting lists were handled if the agency has a waiting list for a specific service.

Transportation will be included in the area plan as a need

Date of Public Hearing: July 11, 2014

Summary of Comments:

- Clarification was requested on the qualification for services (not income based/priority)
- Clarification on what services are provided
- Clarification requested on how to refer an individual and how the services are funded
- How will the agency seek additional funding (ie millage, contributions, etc)

There were no modification or revisions made to the plan from the public hearing comments.

Caddo Council on Aging

Dates of Community Meetings: April 1, 2014, April 7, 2014 and May 9, 2014

Summary of Comments:

- Suggestion was made to send letters to churches to explain the resources and services including respite care
- Requests for resources for seniors and disabled adults is noted as a huge priority.
- Requests and comments for the resource directory after a disaster for evacuees
- Comments were made to make posts to the agency Facebook page and twitter following a disaster.
- Comments were made regarding the wellness program “Balance Matters” some in attendance had taken the class and loved it. They thought it was a very high priority because of the risk of falls for seniors and the devastating results from injury.
- Comments were made regarding the clients’ desire for information from the council on aging be mailed to the local churches about all the resources for seniors and their caregivers

The agency added a mailing component to the area plan to outreach and include the churches in outreach and education.

Dates of Public Hearings: June 13, 2014 and June 25, 2014

Summary of Comments: None received

Cajun Area Agency on Aging

Dates of Community Meetings: July 17, 2014

Summary of Comments:

- Comments were received to increase expectation and opportunities for home and community based care
- Comments were received to develop expertise in long term care options

- Comments were received to explore the possibilities and coordinate efforts to expand home and community based long term care services (ie: in home respite, sitter services, meal programs, homemaker/housekeeping)
- Comments were received to improve access and awareness through educating providers and consumers about current services available in the public and private sectors
- Comments were received to improve and increase the capacity of community programs to serve the elderly by Increasing socialization opportunities for isolated and frail older adults and to improve mechanisms/decrease barriers to information sharing between service agencies

The agency identified and confirmed four priority needs for the area plan:

1. Stabilizing and increasing funding for services
2. Increasing awareness of supports and services
3. Establishing Cajun as most trusted source of information for services and resources
4. Advocating needs of older adults in the PSA

Dates of Public Hearings: July 24, 2014 (6 Held), July 25, 2014 (2 Held)

There were no modifications or revisions made to the plan due to the public hearing

Calcasieu Council on Aging

Dates of Community Meetings: August 1, 2014, August 5, 2014, August 7, 2014, August 14, 2014

Summary of Comments:

- Very pleased with the services provided by the Calcasieu Council on Aging
- Participants expressed the need for transportation services in the rural areas of the parish
- Participants requested more trips
- Participants asked about exercise and daily living techniques

There were no modifications or revisions made to the plan due to the community meetings

Date of Public Hearing: November 20, 2014

Summary of Comments:

- Comments and questions regarding services provided were made about how the community does not know who the agency is and what the agency provides.
- Comments were expressed about how the agency is only known for “Meals on Wheels”

- Comments were directed toward the agency doing a better job of public awareness
- Comments were made regarding the anticipated capital projects to the area. The seniors were concerned about traffic issues, crime, housing and every other aspect of this massive change.
- Service providers expressed concern regarding duplication of services to clients

There were no modifications or revisions made to the plan due to the Public Hearing.

Caldwell Council on Aging

Date of Community Meeting: October 30, 2014

Summary of Comments:

- Community meeting participants asked questions about utility assistance and the changes that have taken place in the program.
- Participants of the council on aging commented on how much they enjoy coming to the senior center
- A VA representative stated he thought the senior center was one of the best for a rural area such as Caldwell parish.

There were no modifications or revisions made to the plan due to the community meeting.

Date of Public Hearing: November 21, 2014

Summary of Comments: There were no comments received
There were no modifications or revisions made to the plan due to the public hearing.

Cameron Council on Aging

Date of Community Meeting: April 21, 2014, April 29, 2014

Summary of Comments:

- Comments from participants were received to confirm the services provided by the agency are necessary for older adults to remain in the comfort of their own homes
- Common comments were received suggested that transportation and home delivered meals were on the top of the needs list
- Comments were received regarding the need for energy assistance
- Comments were received regarding funding for prescribed medications
- Home health care and respite care are in greater demand due to Alzheimer's or dementia patients increase

- Emergency food and housing assistance is needed because so much of the participant's social security check is devoted to paying high insurances at different times of the year.
- Dental care needs to be addressed.
- Positive comments were received regarding the services provided at the Grand Lake Senior Center
- Home delivered meals and transportation are an important service
- Comments were received regarding medical transportation to neighboring parish was a service regarded as a need for those in need
- Transportation for evacuation purposes during hurricane threats is a great service for those that do not have transportation to evacuate.
- Comments were made that home health and homemaker are critical needs

Dental service became a need to be addressed in the area plan.

Capital Area Agency on Aging

Date of Community Meeting: May 21, 2014

Summary of Comments:

- Comments were received to suggest activities that would attract more seniors to senior centers
- Comments were received to outreach retired educators to find out what activities would be of interest to them
- Comments were received regarding activities that would encourage homebound to come to the senior center at least once in a while so they aren't so bored and lonely at home

There were no modifications or revisions made to the plan due to the community meetings.

Dates of Public Hearings: June 16, 2014, June 17, 2014, June 18, 2014, June 19, 2014 and June 20, 2014

Summary of Comments:

- Comments received from participants were received regarding the use of the Councils on aging services
- The need for local SALT councils was expressed by a participant
- Service requested by a participant for weatherization
- Client requested assistance with chores (cutting grass)
- Who can a lonely person who lives alone call when he/she is feeling lonely and uncertain

- Comments were received requesting CAA to work more closely with the councils on aging to accomplish the goals of the area plan.
- Comments were received regarding the lack of resources in rural areas, such as transportation

The plan was revised to include greater emphasis on the need to increase transportation services and to show the partnerships that exist between Capital AAA and the service providers in the service area.

CENLA Area Agency on Aging

Dates of Community Meetings: June 19, 2014, June 24, 2014, June 23, 2014, June 25, 2014, June 26, 2014, July 1, 2014

Summary of Comments:

- Comments were made regarding the nutritional value of the meals served at the meal sites and would they be appropriate for those who have diabetes or high blood pressure.
- Comments were received regarding the need for newer model vans for transportation in Catahoula parish

There were no modifications or revisions made to the plan due to the community meetings.

Dates of Public Hearings: June 18, 2014, June 23, 2014, June 24, 2014, June 24, 2014, June 26, 2014 and July 1, 2014

Summary of Comments:

- Comments were made regarding the nutritional value of the meals served at the meal sites and would they be appropriate for those who have diabetes or high blood pressure.
- Comments were made on special diet meals for regular site participants who are on dialysis three days per week and would this be an option.
- Comments were received regarding gaps of service such as transportation and in home services and how the agency could obtain additional funding to support these gap services.

Follow-up will be conducted on the viability of special meals for the clients who are dialysis patients.

Claiborne Council on Aging

Date of Community Meeting: June 17, 2014

Summary of Comments: No comments received

Date of Public Hearing: July 8, 2014

Summary of Comments: No comments received

DeSoto Council on Aging

Date of Community Meeting: October 27, 2014

Summary of Comments:

- Clarification was requested regarding the closure of the Grand Cane Meal Site.

There were no modifications or revisions made to the plan due to the community meetings.

Date of Public Hearing: October 28, 2014

Summary of Comments:

- Comments were received regarding the enthusiasm of services that are being provided by the DeSoto Council on Aging
- Comments regarding concern of safety for seniors at the senior apartments. The rails were taken down in the bath and the participant feared the seniors would fall while taking their shower

There were no modifications or revisions made to the plan due to the public hearing.

East Baton Rouge Council on Aging

Date of Community Meetings: May 19, 2014, May 20, 2014, May 21, 2014

Summary of Comments:

- Clarification was requested on how the survey would benefit the client

There were no modifications or revisions made to the plan due to the community meetings.

Date of Public Hearing: July 24, 2014

Summary of Comments:

- Comment was proposed "I am aware of some of your services that are offered, however, you have to qualify for these services. What will be the qualification for services?"
- A suggestion was offered to have CATS (transportation provider) add a stop to their Express route which will allow seniors to be picked up and dropped off in front of the main senior center instead of across the street which causes a safety hazard.

- A suggestion was offered to seek a senior friendly organization or agency that would “Split the Pot” with the Council on aging to raise funds for all programs

Transportation issues will be researched, but no modifications or revisions were made to the plan based on the public hearings.

Jefferson Council on Aging

Dates of Community Meetings: July 16, 2014, July 23, 2014

Summary of Comments:

- Comments were expressed regarding awareness of services that Jefferson Council on Aging provides and how to access those services.
- Comments were expressed regarding the need for transportation services, especially to the grocery stores and how long the seniors are allowed to stay at the center for the seniors who receive transportation services to and from the senior centers.

Revisions and modifications were made on spot of the community meetings as the needs were identified and grouped at the community meetings/public hearings.

Date of Public Hearing: August 21, 2014

Summary of Comments: No comments received for modification or revisions to the area plan.

Jefferson Davis Council on Aging

Date of Community Meeting: August 13, 2014

Summary of Comments:

- Comments were received regarding the quality of the meals and nutritional value

There were no modifications or revisions to the area plan due to the community meeting.

Date of Public Hearing: August 13, 2014

Summary of Comments:

- A study was requested to look at the ways to make improvements as funds permit.
- Comments from participants reflect participants are pleased with the area plan process

There were no modifications or revisions to the area plan due to the public hearing.

Lafourche Council on Aging

Dates of Community Meetings: June 9, 2014, June 10, 2014, June 11, 2014, June 12, 2014

Summary of Comments:

- Comments were received to compliment the Lafourche Council on Aging
- Appreciation was received by the agency by the clients who are in Ward 10 who utilize transportation services

There were no modifications or revisions to the area plan due to the community meetings.

Date of Public Hearing: June 18, 2014

Summary of Comments:

- A local public official expressed concerns regarding the respite service and requested information on why these clients are not receiving the service

The agency will work with the respite contractor to try to resolve the comment stated above. No modifications or revisions were made to the area plan based upon the public hearing.

Lincoln Council on Aging

Date of Community Meeting/Public Hearing: December 31, 2014

Summary of Comments: There were no comments

Livingston Council on Aging

Dates of Community Meetings: July 22, 2014, July 23, 2014, July 28, 2014, July 30, 2014

Summary of Comments:

- Concerns were expressed regarding the possibility of meal site closure due to poor attendance
- Comments were made regarding the continuance of utility assistance and the need for continuance of this service
- Suggestions were made for the agency to host crime prevention classes to help seniors protect themselves in case of break-ins.
- Information was requested on help with medication costs
- Concerns were voiced for the seniors that can no longer attend the senior centers due to poor health and are in need of telephoning service

No modifications or revisions to the plan derived from the community meetings.

Date of Public Hearing: December 1, 2014

Summary of Comments:

- Concerns were expressed regarding telephoning services
- Requests were made for medication assistance

Telephoning and prescription drug assistance has been added to the Goals and Objectives in the area plan.

Morehouse Council on Aging

Date of Community Meeting: August 25, 2014

Summary of Comments: No additional comments made after plan explanation

No modifications or revisions to the plan derived from the community meetings.

Dates of Public Hearings: September 3, 2014, November 20, 2014

Summary of Comments:

- Comments were received regarding the congregate meal program and the communal activities before and after lunch. Participants expressed their love for these programs.
- Life saving techniques and additional communal activities were discussed.

There were no modifications or revisions made to the area plan derived from the public hearings.

Natchitoches Council on Aging

Dates of Community Meetings: March 6, 2014, March 10, 2014, March 11, 2014

Summary of Comments:

- Clarification was requested regarding the Adopt-A-Senior Program
- Clarification was requested on how to receive services such as commodities, legal services, meals
- Seniors requested that the continue hearing, sight, blood pressure clinics and health fairs continue to be offered
- Seniors expressed appreciation for telephone reassurance

There were no modifications or revisions made to the area plan derived from the community meetings.

Dates of Public Hearing: May 13, 2014

Summary of Comments:

- Expressions of gratitude were received from participants/clients of the Council on Aging
- Appreciation for telephoning was expressed
- Clarification was requested regarding the food distribution programs

There were no modifications or revisions made to the area plan derived from the public hearings.

New Orleans Council on Aging

Dates of Community Meetings: September 9, 2014, September 11, 2014

Summary of Comments:

- Comments were received regarding transportation services provided by the Regional Transit Authority system (RTA). Concerns were expressed regarding the treatment received from the drivers and wait time for confirmation of reservation of transportation services

There were no modifications or revisions made to the area plan derived from the community meetings.

Date of Public Hearing: September 19, 2014

Summary of Comments:

- Concerns were expressed regarding the cost of living in the city has increased since Hurricane Katrina and more resources are needed for older adults

There were no modifications or revisions made to the area plan derived from the public hearing.

North Delta Area Agency on Aging

Dates of Community Meetings: July 22, 2014, July 23, 2014, July 24, 2014, July 25, 2014

Summary of Comments:

- Request for computer classes for seniors in Madison Parish
- Request for transportation out of parish
- Request for handyman, lawn service, free sitters, movie theater and discount on foods for seniors at the local grocery store

The agency will research the above and add to "to do list".

Dates of Public Hearings: May 1, 2014, May 9, 2014, May 12, 2014, May 23, 2014

Summary of Comments:

- Individuals voiced their opinion regarding services of the council and that primary needs should be met and not on going

There were no modifications or revisions made to the area plan derived from the public hearing.

Ouachita Council on Aging

Dates of Community Meetings: May 14, 2014, May 28, 2014, May 29, 2014

Summary of Comments:

- Agency received compliments regarding services currently provided
- Concerns regarding transportation (lack of) in the PSA
- Questions were asked regarding Medicare, Medicaid enrollment process
- Concerns were expressed regarding possible budget cuts

There were no modifications or revisions made to the area plan derived from the community meetings.

Dates of Public Hearing: November 19, 2014

Summary of Comments:

- Comments were received applauding the services provided by the agency

There were no modifications or revisions made to the area plan derived from the public hearings.

Plaquemines Council on Aging

Dates of Community Meetings: August 14, 2014, August 17, 2014

Summary of Comments:

- Request for yard work was made
- Request for meals
- Request for transportation

There were no modifications or revisions made to the plan derived from the community meetings.

Dates of Public Hearings: September 17, 2014

Summary of Comments:

- Request for yard work, increased transportation
- Comments were made regarding the importance of the meals program

There were no modifications or revisions made to the plan derived from the public hearing.

Sabine Council on Aging

Dates of Community Meetings: April 3, 2014, May 9, 2014

Summary of Comments:

- Outreach to local churches was requested to reach more of the homebound seniors

There were no modifications or revisions made to the plan derived from the community meetings.

Dates of Public Hearings: October 2, 2014

Summary of Comments:

- Comments were received regarding the area plan and how the agency plans on getting information out to the public
- Participants commented on how they would like to see more convenient meeting facility for seniors on senior fair day
- Response received on how essential services provided by the agency are to the very rural which has high poverty rate
- Requested more activities for the younger, active seniors

There were no modifications or revisions made to the plan derived from the public hearings.

Saint Bernard Council on Aging

Date of Community Meeting: May 7, 2014

Summary of Comments: No comments received

Date of Public Hearing: November 13, 2014

Summary of Comments:

- Concerns regarding funding and potential budget cuts were discussed
- Newly built senior housing unit was discussed and the services of transportation and meals that are being provided to the senior residents
- Comments were made regarding the potential tax millage

There were no modifications or revisions made to the plan derived from the public hearing.

Saint Charles Council on Aging

Dates of Community Meeting: June 11, 2014, June 12, 2014

Summary of Comments:

- Comments were received from the advisory board regarding the scope of the needs assessment and agreed that the identified needs reflected the needs of the community

There were no modifications or revisions made to the plan derived from the community meetings.

Date of Public Hearing: July 17, 2014

Summary of Comments:

- How does the COA measure 15% increase in service (outlined in brief provided during hearing)?
- What funds are used to transport under age 60 clients?
- Does the agency outreach the Mexican population in the parish/
- Does St. Charles parish really have people who are only accessible by boat?
- What is Respite Care?
- When will bids for services be open?

All comments and questions were addressed by the Executive Director. There were no modifications or revisions made to the plan derived from the public hearing.

Saint James Area Agency on Aging

Date of Community Meeting: August 13, 2014

Summary of Comments: There were no comments.

Date of Public Hearing: August 26, 2014, August 27, 2014

Summary of Comments: There were no comments.

Saint John Council on Aging

Date of Community Meeting: August 4, 2014

Summary of Comments:

- Participant requested when the next computer class would begin

There were no revisions to the plan derived from the community meeting.

Date of Public Hearing: June 23, 2014

Summary of Comments:

- Comments were received on “great service on meals”
- Comments were received concerning the meal choices and quality of the food
- Participant asked why eggs were not served with breakfast
- Recommendation for meals provided to all seniors at their homes
- Requests were provided for more arts and crafts, pool tournaments, field trips

There were no modifications or revisions of the plan derived from the public hearings.

Saint Tammany Council on Aging

Date of Community Meeting: September 5, 2014

Summary of Comments:

- After a review of the area plan was read to the community, the community participants asked “How can I help COAST (St. Tammany Council on Aging)”?

There were no modifications or revisions of the plan derived from the community meeting.

Date of Public Hearing: September 30, 2014

Summary of Comments:

- Questions were asked regarding the home delivered meals program and senior center location selections.
- Satisfaction from participants was expressed with the process that was used to determine the needs of the seniors in St. Tammany parish and how inclusive the process was to set the goals for the next four years.
- Response from a representative of St. Tammany Parish Government noted that the response rate for the survey made the survey a relevant survey.

There were no modifications or revisions of the plan derived from the public hearing.

Terrebonne Council on Aging

Dates of Community Meetings: July 15, 2014, July 16, 2014, July 18, 2014

Summary of Comments:

- Concerns were expressed for assistance with dental care, eye glasses, safety and hearing aids

There were no modifications or revisions of the plan derived from the community meeting.

Date of Public Hearing: July 24, 2014

Summary of Comments: No comments received

Vernon Council on Aging

Date of Community Meeting: October 2, 2014, October 10, 2014, November 3, 2014

Summary of Comments: No Comments received

Date of Public Hearing: November 10, 2014

Summary of Comments:

- Comments were received regarding the validity of a 4 year plan

After explanation of the plan, plan development process there were no other comments. There were no modifications or revisions of the plan derived from the public hearings.

Webster Council on Aging

Date of Community/Public Hearing Meeting: 12-09-2014

Summary of Comments:

- Concerns were expressed of the homemaker service and congregate meals
- Expression of positive comments regarding current services provided by the agency

The director addressed the concerns expressed of the homemaker service and congregate meals. There were no modifications or revision of the plan derived from the community meeting.

West Carroll Council on Aging

Date of Community Meetings: June 27, 2014

Summary of Comments:

- Concerns were expressed regarding awareness of the services provided by the agency
- Concerns were expressed regarding increasing homemaker services, overall health and well-being of the elderly, increasing awareness of the Family Caregiver Services, Increasing ombudsman program and increasing the number of elderly who benefit from EPS
- Assistance for the elderly in applying for benefits and programs needed

The agency director addressed the above comments. There were no revisions made to the plan derived from the community meeting.

Date of Public Hearing: July 15, 2014

Summary of Comments: No comments regarding the area plan were received
There were no modifications or revisions to the plan derived from the public hearing.