

SOUTHWESTERN COMMISSION

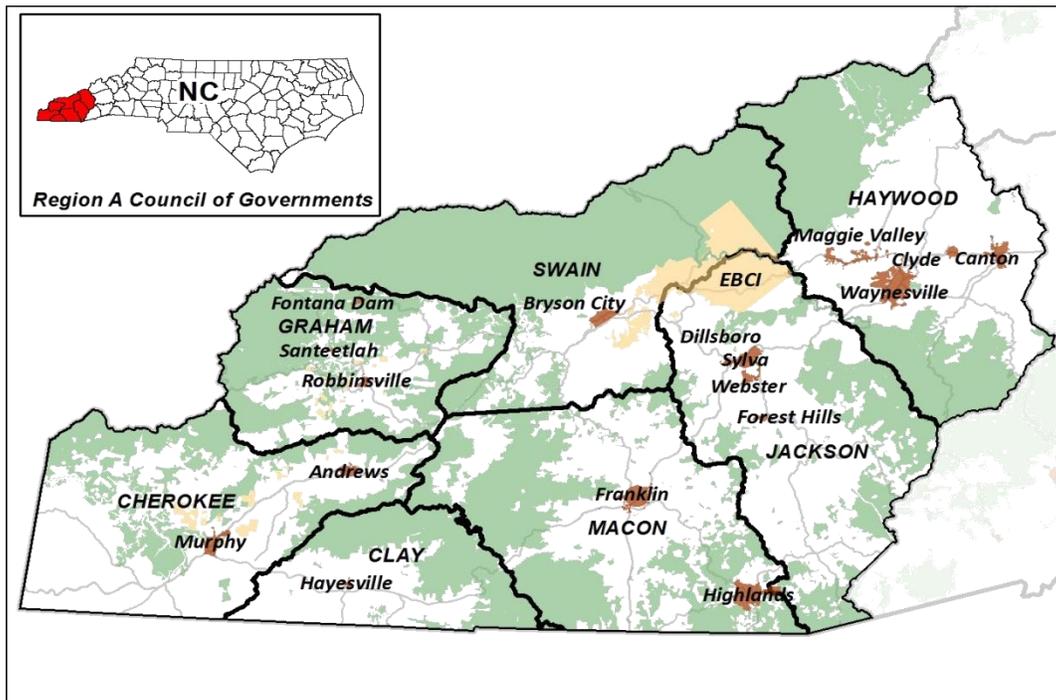


AREA AGENCY ON AGING Regional Aging Services Plan

July 1, 2016 – June 30, 2020

Booming Forward:

*We're in this together ...
and together it works.*



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**Southwestern Commission Area Agency on Aging
2016-2020 AGING SERVICES PLAN**



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EXECUTIVE SUMMARY

The Southwestern Commission Area Agency on Aging is the designated regional planning and service agency for services to residents age 60 years and older and their family caregivers in the seven western-most counties of North Carolina (Cherokee, Clay, Graham, Haywood, Jackson, Macon and Swain). The organization works within a federal mandate to inform, advocate, and plan for community services on behalf of older adults.

This plan is a statement of policy and serves as a guide for AAA planning efforts in achieving the six strategic goals for developing a comprehensive and coordinated system of supportive services, as outlined in the North Carolina Aging Services Plan for 2015-2019.

The staff of the Area Agency on Aging works with advisory committees in each county to study the needs of older adults and plan for services to meet those needs. The strategies and goals set forth in this plan are based on the needs and priorities of the older adult population and on the program requirements for meeting those needs with adequate funding sources. The overarching service goal is to enable older adults age 60 and older to live life to the fullest in the least restrictive setting possible.

Region A's staff of five includes:

- Sarajane Melton, AAA Administrator
- Jeanne Mathews, Aging Program Coordinator
- Cindy Miles, Family Caregiver Resource Coordinator
- Larry Reeves, Regional Long-Term Care Ombudsman
- Mandy Thomas, Aging Programs Assistant

Governance:

The Area Agency on Aging is a service of the Southwestern Commission, a regional planning organization. As part of the Council of Governments, the AAA is governed by the Southwestern Commission Board (comprised of county commissioners and other local elected officials, county and town managers from the 17 cities and towns within those counties, as well as the AAA's own Regional Advisory Council (RAC). The members of the RAC are appointed by each of the Boards of County Commissioners; the Board of Elders of

the Eastern Band of Cherokee Indians (EBCI) appoints RAC members to represent the Qualla Boundary. Each County may be represented by three voting members and three alternate members. Many of the RAC members also serve in other leadership and advocacy capacities through their county's HCCBG Planning Committee, the Long-term Care County Advisory Committee, leaders of Title IIID Evidence-Based Disease Prevention and Health Promotions Programs, or the Senior Tar Heel Legislature delegation.

Mission:

To assure that every older person in Region A has the opportunity to live life to the fullest in the least restrictive setting possible.

Vision:

- * A full range of service options available in all counties
- * Well trained, caring staff in all agencies and facilities
- * Well informed, active, healthy seniors

Program Coordination:

The AAA has a rich history of reducing service duplication and maximizing resource utilization as a result of strong partnerships and linkages with other stakeholder organizations, which serve the older adult and disabled communities. Through the years, the collective impact of these partnerships has enabled the AAA to increase program impact and capacity in initiatives such as:

- Regional Elder Abuse Awareness Walk – For the past three years, the AAA has co-sponsored eight simultaneous Elder Abuse Awareness Walks in each county and on the Qualla Boundary. The first year resulted in participation by approximately 100 individuals; the third year had over 400 individuals, who walked simultaneously in their respective counties, wearing t-shirts inscribed with “ELDERS MATTER: Support Elder Abuse Awareness.”
- Crisis Intervention Resource Kit – In coordination with the LME, Smoky Mountain Center, the AAA has helped to develop a best practices guide for use by law enforcement, long term care facilities, and hospitals to identify and access appropriate emergency mental health interventions.

Future/Planned Efforts to Increase Capacity and Program Coordination:

This plan recognizes the importance of adopting a business model to build capacity and ensure the sustainability of the continuum of aging programs and services. The agency is currently exploring revenue opportunities, including, but not limited to:

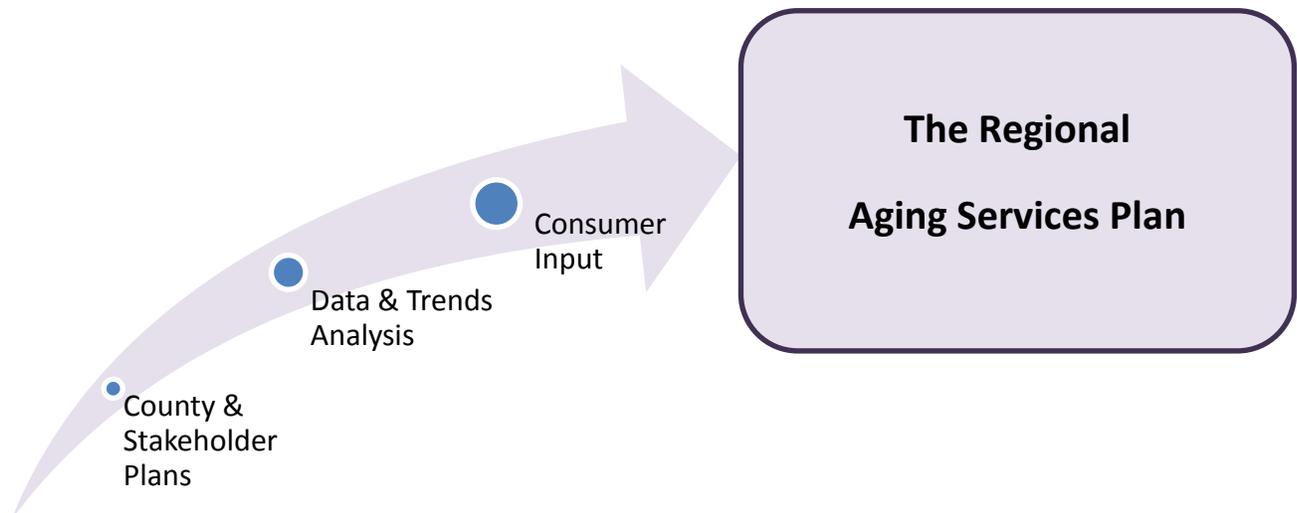
- Becoming a Medicare provider
- Consumer Directed Technology (CareNect)
- Expanded Money Follows the Person
- Fee for Service Health Promotions Programs



DEVELOPING THE PLAN

Needs Assessment Methodology:

The Area Agency on Aging mobilized its partners, consumers, and other stakeholders in a grassroots, yet intense effort to explore numerous avenues for opportunities to have meaningful conversations about our region, its older adults, and how we might best use our resources to serve them. The activities and strategies employed during this discovery process included county focus groups and listening sessions, electronic and hard copy surveys, an analysis of relevant data and trends, as well as the integration of existing county and other stakeholder plans.



Consumer/Stakeholder Input : Community meetings/county focus groups were held at eight sites in Region A. In addition community outreach was undertaken by college students, and solicitation of participation in an online survey were among the methods used to determine current and unmet needs. All counties as well as the Qualla Boundary were represented. The meetings were held at older adult nutrition sites and senior centers, as well as provider, LRO and RAC meetings. Elected officials, senior health & social service organizations, older adult service providers and interested citizens were invited to participate.

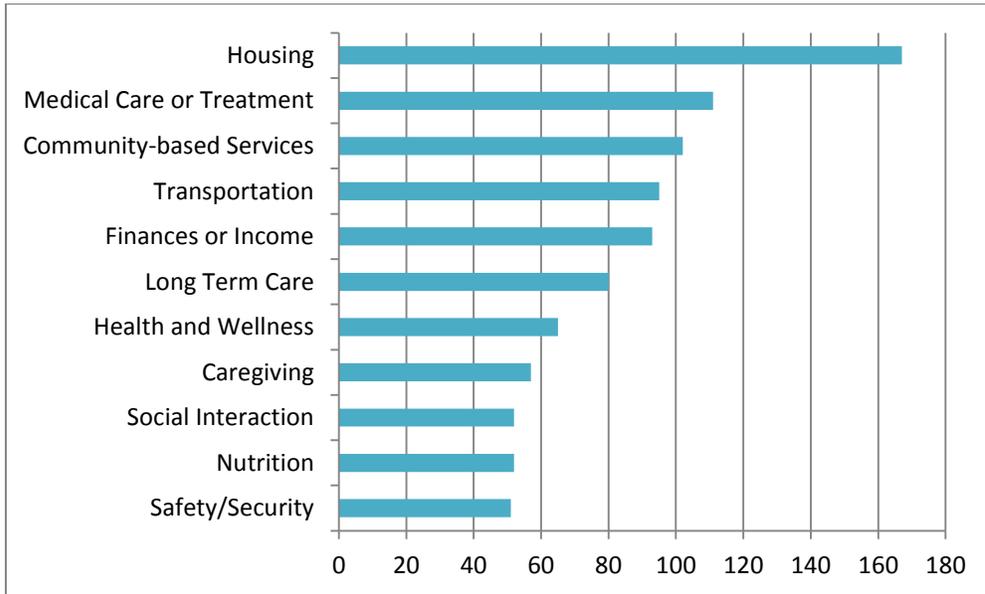
Community meetings/county focus groups occurred at the following locations and dates:

• Clay County	Clay County Senior Center, Hayesville, NC	February 18, 2016
• Cherokee County	J.R. Penland Senior Center, Murphy, NC	February 24, 2016
• Graham County	Graham County Senior Center, Robbinsville, NC	January 15, 2016
• Haywood County	Haywood Senior Resource Center, Waynesville, NC	November 24, 2015
• Jackson County	Jackson County Department on Aging, Sylva, NC	November 17, 2015
• Macon County	Macon County Senior Services, Franklin, NC	October 28, 2015
• Qualla Boundary	Tsali Manor Senior Center, Cherokee, NC	March 24, 2016
• Swain County	Swain County Senior Center, Bryson City, NC	February 25, 2016
• WCU	Western Carolina University, Cullowhee, NC	October 29, 2015

A broad spectrum of ages, interests, and backgrounds among participants throughout this process gave the AAA abundant opportunities to view and discover community perceptions about community needs and issues from traditional as well as nontraditional viewpoints. These conversations provided valuable insights and data for the development of the Area Aging Services Plan from a wide variety of sources.

- **Targeted Outreach:** Social Work students at Western Carolina University visited a variety of restaurants and community settings throughout the region where older adults gather and solicited their responses to the survey questions. The online survey was heavily promoted on social media, via e-mail listservs, and other targeted outreach. A pen and paper version of the survey was distributed throughout the region with home delivered meals, at congregate nutrition sites, and senior centers.
- **Online Survey** - 336 individuals participated in the survey, either in person or via Survey Monkey, which was designed to gather consumer, stakeholder and interested parties' perceptions about the top three priorities for each of the region's seven counties.
- **County Focus Groups** – Each of the seven counties as well as the Qualla Boundary hosted Aging Services Plan focus groups for consumers, stakeholders and interested parties to facilitate discussion and gather input regarding the top three county priorities as well as perceptions about local opportunities and barriers related to the six goals of the 2015-2019 North Carolina State Aging Services Plan. The focus groups were conducted during the months of November 2015 through March 2016, with more than 150 individuals participating. The Social Work students at WCU also conducted a focus group with 30 of their student peers, during which they facilitated discussion and documented student input regarding opportunities and barriers that related to the six state goals.

Data and Trends Analysis: In developing this plan the agency reviewed and analyzed a variety of sources, including census data, food insecurity data, as well as the survey responses and results from our county focus groups. From this analysis, the three issues that emerged as the top three needs for our region included Affordable Housing, Medical Care, and Community-based Services.



Incorporation of County and other Stakeholder Plans: There are other agencies and stakeholder organizations in Region A, which are involved in their own planning processes, many of which will directly or indirectly impact older adults, just by virtue of the demographics of the region. In an effort to build upon and support other local planning initiatives also underway, the AAA reviewed and integrated relevant details from:

- Healthy Carolinians initiative in Jackson County,
- MountainWise (formerly Healthy Carolinians) initiative in Macon County,
- Swain County Senior Needs Assessment, conducted by students of the Nursing program at Western Carolina University,



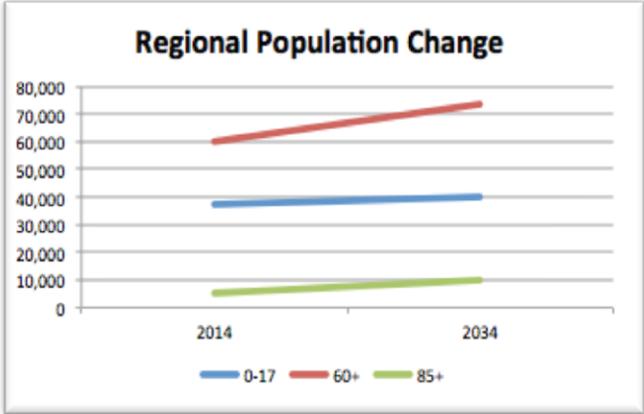
DEMOGRAPHICS

Region A has become known as a wonderful place to age. So much so, that the 60+ population ALREADY OUTNUMBERS the 0-17 population in six of the seven counties in Region A (*all but Swain*). Three of Region A's seven counties (**Cherokee-30%**, **Clay-31%**, and **Macon-30%**) are among the top five counties in North Carolina with the highest percentage of adults, age 65+, surpassed only by Polk and Transylvania counties.

Not only has the increase in older adults outpaced the 0-17 population among the region's full-time residents, the annual in-migration of retirees from other states boosts the region's population significantly for roughly six months out of each year. When unexpected needs arise for the part-time residents, it can put additional strain on the continuum of services and available resources.

Total Regional Population

Ages	2014	2034
0-17	37,042	39,818
60+	60,061	73,648
85+	5,224	9,892



Cherokee County

Ages	2014		2034		% Change (2014-2034)
	#	%	#	%	
Total	27,451		27,948		1.80%
0-17	4,953	18%	4,934	18%	-0.4%
18-44	7,336	27%	7,734	28%	5.40%
45-59	5,568	20%	4,765	17%	-14.4%
60+	9,594	35%	10,515	38%	9.60%
65+	7,347	27%	8,649	31%	17.70%
85+	776	3%	1,568	6%	102.10%

Clay County

Ages	2014		2034		% Change (2014-2034)
	#	%	#	%	
Total	10,794		11,311		4.80%
0-17	1,903	18%	1,910	17%	0.40%
18-44	2,837	26%	3,179	28%	12.10%
45-59	2,158	20%	1,954	17%	-9.5%
60+	3,896	36%	4,268	38%	9.50%
65+	2,981	28%	3,538	31%	18.70%
85+	342	3%	670	6%	95.90%

Graham County

Ages	2014		2034		% Change (2014-2034)
	#	%	#	%	
Total	8,829		10,136		14.80%
0-17	1,867	21%	1,960	19%	5.00%
18-44	2,563	29%	3,349	33%	30.70%
45-59	1,812	21%	1,800	18%	-0.7%
60+	2,587	29%	3,027	30%	17.00%
65+	1,983	22%	2,469	24%	24.50%
85+	240	3%	402	4%	67.50%

Haywood County

Ages	2014		2034		% Change (2014-2034)
	#	%	#	%	
Total	59,913		65,112		8.70%
0-17	11,124	19%	11,524	18%	3.60%
18-44	17,354	29%	18,895	29%	8.90%
45-59	12,864	21%	11,484	18%	-10.7%
60+	18,571	31%	23,209	36%	25.00%
65+	14,200	24%	18,788	29%	32.30%
85+	1,738	3%	3,003	5%	72.80%

Jackson County

Ages	2014		2034		% Change (2014-2034)
	#	%	#	%	
Total	41,039		45,832		11.70%
0-17	7,242	18%	7,221	16%	-0.3%
18-44	16,828	41%	18,901	41%	12.30%
45-59	7,111	17%	7,461	16%	4.90%
60+	9,858	24%	12,249	27%	24.30%
65+	7,333	18%	9,858	22%	34.40%
85+	751	2%	1,686	4%	124.50%

Macon County

Ages	2014		2034		% Change (2014-2034)
	#	%	#	%	
Total	34,428		42,913		24.60%
0-17	6,496	19%	7,994	19%	23.10%
18-44	9,386	27%	12,159	28%	29.50%
45-59	6,665	19%	7,076	16%	6.20%
60+	11,881	35%	15,684	37%	32.00%
65+	9,189	27%	12,930	30%	40.70%
85+	1,106	3%	2,113	5%	91.00%

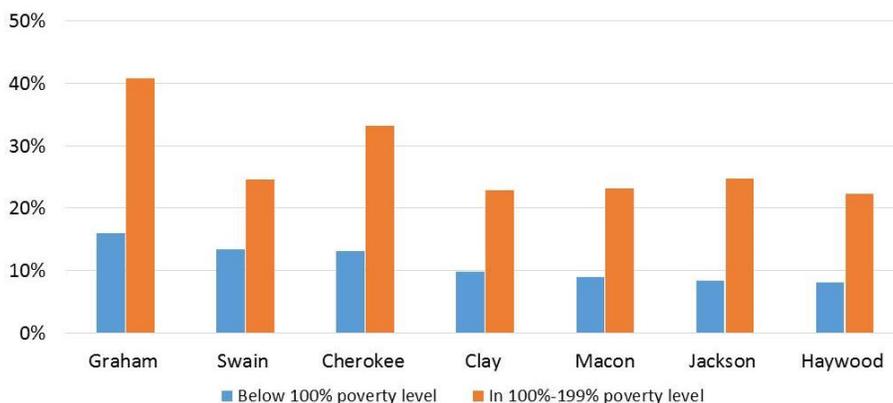
Swain County

Ages	2014		2034		% Change (2014-2034)
	#	%	#	%	
Total	14,831		17,918		20.80%
0-17	3,457	23%	4,275	24%	23.70%
18-44	4,739	32%	5,770	32%	21.80%
45-59	2,961	20%	3,177	18%	7.30%
60+	3,674	25%	4,696	26%	27.80%
65+	2,723	18%	3,656	20%	34.30%
85+	271	2%	450	3%	66.10%

Race/Ethnicity, age 65 and over, 2013

	White alone	Black or African American alone	American Indian and Alaska Native alone	Asian alone	Hispanic or Latino Origin (of any race)
Cherokee	96.8%	1.0%	0.5%	0.5%	1.7%
Clay	96.9%	1.3%	0.0%	0.6%	0.8%
Graham	99.8%	0.0%	0.2%	0.0%	0.0%
Haywood	97.5%	1.3%	0.2%	0.3%	0.7%
Jackson	93.3%	0.8%	5.3%	0.1%	0.0%
Macon	96.9%	2.2%	0.2%	0.3%	1.2%
Swain	81.5%	0.0%	15.6%	0.5%	0.0%
North Carolina	81.6%	15.8%	0.8%	1.1%	1.4%

Poverty status, 65 and over, 2013



NC: Below 100% poverty level (10%)
In 100%-200% poverty level (25%)

*%s are given as % of age group
Source: ACS 2009-2013 estimates, Table B17024

Other demographics:

- 20% or more of all older adults live alone in every county of the region.
- 84% or more of all older adults own their homes.
- More than one-third of the region's older adults have one or more types of disabilities.
- Graham County exceeds the state average for number of older adults with less than a high school diploma.
- Swain County has the highest percentage in the region and exceeds the state average for number of older adults with a high school diploma
- Clay County exceeds the state average for number of older adults with some college or an associates degree.

- Jackson County, the seat of Western Carolina University, exceeds the state average for number of older adults with a Bachelors or higher. That distinction is also shared by Clay, Haywood and Macon Counties,

Current and Future Trends:

After analyzing the findings from the county focus groups as well as the needs survey data, the Southwestern Commission Area Agency on Aging has concluded that the top three areas of concern included the following in order of ranking:

1. **Affordable Housing** – particularly accessible, affordable housing
2. **Medical Care** – particularly the critical shortage of primary care physicians throughout the region
3. **Community-based Services** – particularly the impact of shrinking budgets for critically needed services

As the population ages, there will be added strain on the capacity of the aging services provider network to adequately serve the need. It is expected that, without increased allocations or revisions to current funding methodologies, the waiting list for community-based aging programs and services will continue to grow. While the population the AAA serves is increasing rapidly, the financial resources for these programs are not. It is difficult to say what resources will be available through 2020, but state as well as federal funding for senior services has been in serious jeopardy of being reduced or eliminated in recent years, requiring aggressive advocacy throughout the region and state for maintaining at least level funding. Cuts to HCCBG and/or OAA budgets will force people into long-term care facilities and once they exhaust their resources, they become eligible for Medicaid. This is not a viable financial strategy for taxpayers.

The cases of dementia are growing exponentially throughout the region, as it is throughout the United States. Without the development and availability of preventative or curative treatment, this trend is expected to continue to grow. This trend is also expected to increase stressors for families, family caregivers, and the health care continuum as well. The Area Agency recognizes that the shortage of health care professionals creates an even bigger imperative to engage older adults in preventative and health promotions activities for healthy aging.



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

Objective 1.1: Educate the public on the availability of services to foster independence, self-sufficiency and their future planning for long-term needs

Strategies:

- Conduct informational and educational presentations throughout the region on a variety of health and long-term care topics to promote the empowerment of older adults and their families to make informed decisions.

Measure:

- *Inform Medicare Beneficiaries about the benefits aimed at preventing disease and enhancing wellness, including the Low Income Subsidy (LIS) and Medicare Savings Programs (MSP).*
 - *Conduct community presentations as requested on various aging related topics with a goal of 12 annually.*
 - *Seek opportunities for outreach to ministerial associations and the faith community.*
- Conduct at least one joint MIPPA event, to inform the public on the availability of services and benefits, and facilitate consumer access to the Low-Income Subsidy (LIS) and Medicare Savings Program (MSP).

Measure:

- *Track the number of older adults reached through Medicare Improvement for Patients and Providers Act (MIPPA) outreach events.*
- Provide timely response to requests for information about available services and provide support to older adults, caregivers, and professionals as needed.

Measure:

- *Track the number of I & A interactions.*

- Serve as the SHIP Coordinator for Graham County, effective July 1, 2016 to assist consumers with making informed choices regarding their Medicare Prescription Drug (Part D) and Medicare Supplement plans. Assist other county SHIP coordinators during Open Enrollment periods as needed.

Measure:

- *Track the number of older adults reached through Open Enrollment as well as all SHIP counseling activities*

- Utilize print, broadcast, and social media to inform the public about aging-related issues, to promote special programs and educational events, as well as for continuous and ongoing dissemination of credible and timely information about a broad spectrum of health and long-term care options.

Measures:

- *Track the utilization of social media posts; analyze for engagement trends*
- *Participate in community radio programs; with a minimum of two per year goal*
- *Ensure all AAA brochures, including but not limited to: Area Agency on Aging, Family Caregiver Support Program, Local Contact Agency, Long-term Care Ombudsman Program, Health Promotions programs, etc., contain current and accurate information*
- *Develop and disseminate "Aging Advocate" newsletter, with a minimum of three per year goal*

- Inform consumers and caregivers about available supports and services.

Measures:

- *Provide information, assistance with access to available services, counseling and support groups, respite vouchers, and supplemental services to family caregivers throughout the region via the Family Caregiver Support Program.*
- *The Regional Ombudsman will educate nursing homes and their residents on home and community based services and support options.*
- *Ensure availability of community-based caregiver classes and support groups throughout the region.*
- *The availability of Options Counseling Services will be expanded to provide assistance to more older adults in the region.*

- Provide access to end of life planning tools (Health Care POA, Advance Directives) as well as facilitate access to legal assistance for the preparation of simple wills or Durable POA's via the AAA Legal Program.

Measure:

- *Track the number of inquiries, applications and voucher awards for the legal program; track the number of Health Care POA and Advance Directives forms mailed/given to consumers.*

- Facilitate consumer access to timely and accurate information about available services via NC 211.

Measures:

- *Include link to 211 on agency publications, website, and social media posts.*

- *Coordinate activities necessary to ensure accuracy of all service information in 211 database*
 - *Track utilization of 211; analyze data for trends and unmet needs*
 - *Assist consumers in accessing available energy assistance via County Departments of Social Services.*
- Advocate for the service needs of older adults.

Measures:

- *Represent agency at meetings of the COG Board and County Commissioners.*
- *Continue partnerships with County Departments of Health and Departments of Social Services.*
- *Engage members of Community Advisory Committees in advocacy for residents of long term care facilities.*
- *Ensure regional representation on the NC Senior Tar Heel Legislature.*
- *Support senior centers with advocacy efforts.*

Objective 1.2: Streamline access to long-term services and supports to facilitate informed decision-making

Strategies:

- Target outreach to nursing homes and their residents on home and community-based services and support options.

Measures:

- *Serve as the Local Contact Agency and coordinate the Money Follows the Person services to residents of long term care facilities in the region; provide options counseling to consumers, family caregivers, and eligible individuals seeking to transition from institutional settings to independent living.*
- *The Regional Ombudsman will provide advocacy for the rights of residents in long-term care facilities, mediation between families and facilities, and in-service training for the staff of long-term care facilities on an ongoing basis via the Long-term Care Ombudsman program.*
- *The Family Caregiver Support Program will provide information, assistance with access to available services, counseling and support groups, respite vouchers, and supplemental services to family caregivers throughout the region via the Family Caregiver Support Program.*

Objective 1.3: Ensure inclusion of diverse cultures and abilities in all aspects of the aging and adult services network

NOTE: *The demographics of Region A indicate that, for the most part, the concentration of older adults of Black, African American, Hispanic or Latino ethnicity is well below the North Carolina state average (see chart, “Race/Ethnicity, age 65 and over, 2013”, page 9). The existence of the Eastern Band of Cherokee Indians on the Qualla Boundary, which includes sections of Cherokee, Graham, Jackson and Swain Counties, results in the region exceeding the North Carolina state average for older adults of American Indian ethnicity.*

Strategies:

- Increase outreach to consumers with limited English proficiency.

Measures:

- *Develop culturally appropriate publications and materials to ensure the inclusion of older adults of diverse cultures and abilities.*
 - *Partner with County DSS and Health Departments to ensure the availability of culturally appropriate materials.*
 - *Work with teachers of ESL courses to ascertain need for materials and information in other languages.*
 - *Seek opportunities to participate in multicultural events throughout the region for program outreach.*
 - *Reach out to the Hispanic-Latino faith community to educate about available services for older adults and their caregivers.*
- Increase outreach and competencies to serve consumers with hearing or vision limitations.

Measures:

- *Seek opportunities to partner with the Regional NC Division of Deaf and Hard of Hearing and the NC Services for the Blind to educate on available services for older adults and their caregivers.*
- Honor and recognize older adults and their caregivers throughout the year.

Measures:

- *Each county will host a special event, such as Candlelight Reflections, during the month of November annually to honor and recognize family caregivers.*
 - *Participate in regional events during the month of May in observance of Older Americans Month.*
 - *Annually recognize the Governor's Proclamation of Resident's Rights month.*
 - *Annually emphasize the importance of Elder Abuse Awareness during the month of June.*
- Collaborate with LME and organizations supporting older adults with physical and mental disabilities.

Measure:

- *Partner with Geriatric & Adult Mental Health Specialty Team, CIL, and Vocational Rehabilitation to raise awareness and educate the public on mental health issues affecting older adults.*

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

Objective 2.1: Maintain and expand the availability of community-based services and supports

Strategies:

- Continue the collective impact of existing as well as new partnerships, and stakeholders to reduce duplication, maximize resource utilization, and expand capacity throughout the continuum of community-based services and supports.

Measures:

- *Continue collaborative partnerships with Smoky Mountain Center (LME), Disability Partners (CIL), county Departments of Health, and Departments of Social Services, as well as the Southwestern Commission Planning Department, county transit, and housing authorities to expand or develop the services that were noted as high priority on the regional needs assessment.*
 - *Assist communities to develop additional affordable housing, both public and private sector, and home repair programs in the region.*
 - *Continue to expand Senior Center programming in all counties.*
 - *The Family Caregiver Support Program will ensure the availability of the five core FCSP services throughout the region, including consumer-directed respite vouchers.*
- Expand the Elder Abuse awareness initiatives throughout the region.

Measures:

- *Conduct concurrent Elder Abuse Awareness walks in every county and on the Qualla Boundary on World Elder Abuse Day, annually.*
 - *Pursue grants for expansion of Elder Abuse outreach and prevention.*
 - *The Regional Ombudsman will continue to work with APS teams throughout the region.*
 - *Contribute toward the expansion of Adult Protection Teams in each county.*
- Explore the expansion of programs, which help consumers meet their health care and other needs in the community instead of going to a nursing home or other care facility.

Measures:

- *PACE (Program of All-inclusive Care for the Elderly) into the region*
 - *Special Assistance-In-home*
 - *MemoryCare*
 - *Mental Health Crisis Intervention tools*
- Continue to offer options to consumers who are transitioning back to community living and other consumers as needed.

Measures:

- *Each LCA and MFP consumer will be offered Options Counseling, provided by the AAA.*
 - *The Family Caregiver Support Program will offer consumer-directed options, including information and assistance, assistance with access to services, Options Counseling/training/support groups, respite vouchers, and supplemental services.*
- Pursue a business model to augment available resources and services.

Measures:

- *Pursue fee-for service opportunities, such as CareNect.*
 - *Explore the feasibility of becoming a Medicare provider.*
- Contribute toward the development of a labor force of skilled professionals, prepared to meet the needs of older adults.

Measures:

- *Provide aging- and dementia-sensitivity training to students in the health occupations classes throughout the region's high schools and community colleges.*
- *Continue to offer internship opportunities for graduating Social Work students from WCU*
- *The Regional Ombudsman will continue to contribute toward the professional development of the workforce through ongoing in-service trainings.*
- *The AAA Director will continue in the faculty role with Social Work students at Western Carolina University*

Objective 2.2: Promote flexibility in publicly funded services and supports to allow older adults and their caregivers more opportunities to choose how and where they receive services**Strategies:**

- Promote and advocate for consumer choice in all interactions.

Measures:

- *Options Counseling will facilitate person-centered dialogs aimed at empowering the consumer to make informed choices*
 - *The Family Caregiver Support Program will continue to operate as a consumer-directed service*
- Facilitate access to the services of My Care My Choice, a veteran-directed home and community based services program.

Measures:

- *Provide Options Counseling to eligible veterans referred by the VA Hospital, with an annual four-year goal of one, two, three, and four per year consecutively*
- *Coordinate eligible veterans' access to supports, services, and benefits*

- The Regional Ombudsman will offer and provide residents rights in services to staff of LTC facilities in an effort to provide awareness and system change by providing education about the issue.

Measures:

- *Attend quarterly state training in an effort to gain knowledge and information regarding current issues in an effort to be able to support systems change appropriately.*
- *Implement a systems development program by offering through the AAA newsletter, and presenting as requested to staff of LTC facilities as well as the community: the Virtual Dementia Tour, Person Centered Thinking Training, Culture Change and Consider the Conversation.*

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

Objective 3.1: Promote engagement in health and wellness programs and initiatives

Strategies:

- Provide community education and information regarding healthy lifestyle choices.

Measures:

- *Utilize agency newsletter and posts on social media outlets to post educational information from credible sources.*
- *Distribute information about healthy lifestyle choices at health fairs throughout the region.*
- *Ensure the availability of Title IIIID Evidence-Based Disease Prevention and Health Promotions Programs throughout the region.*
- *Encourage senior centers to provide ongoing classes and activities centered on healthy lifestyle choices.*
- *Promote special campaigns including but not limited to falls prevention, nutrition and food safety, elder abuse, and family caregiving.*
- *Promote Senior Games and support each county's Senior Games initiatives.*

Objective 3.2: Expand access to and increase participation in evidence-based health promotion and disease prevention programs

Strategies:

- Build the capacity of Health Promotion and Disease Prevention Programs in the Region.

Measures:

- *Engage senior centers in each county to offer at least two Title IIIID Evidence-Based Disease Prevention and Health Promotions Programs annually*
- *Recruit and train additional leaders throughout the region in programs such as: CDSMP, Living Healthy, Living Healthy with Diabetes, Matter of Balance, Arthritis Foundation programs, DEEP, Laughter Yoga.*
- *Provide technical assistance to help leaders recruit and retain participants.*

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

Objective 4.1: Maximize collaboration, outreach, and training to stop or prevent abuse, neglect, and exploitation

Strategies:

- Coordinate a wide variety of activities throughout the region aimed at educating and engaging the community in the prevention of elder abuse, neglect and exploitation.

Measures:

- *The Regional Ombudsman will ensure the safety and protection of the rights of older and vulnerable adults in residential and skilled facilities throughout the region.*
- *Provide ongoing education to service providers, consumers, and professionals on the detection, reporting, and prevention of elder abuse, neglect and exploitation.*
- *Utilize participation in events, health fairs, and other outreach outlets as a means to promote awareness about elder abuse, neglect and exploitation.*
- *Observe World Elder Abuse Day and will collaborate with stakeholder organizations throughout the region to coordinate annual Elder Abuse Awareness walks and campaigns in all counties as well as the Qualla Boundary.*
- *Utilize print and broadcast media outlets throughout the region to increase public awareness, of elder abuse, neglect and exploitation.*
- *Conduct ongoing public awareness, using print, broadcast, and social media including scam alerts and safety advisories and warnings.*
- *SCAM JAM*
- *Serve as SHIIP Coordinator for Graham County; the AAA will conduct Senior Medicare Patrol (SMP) as well as MIPPA outreach in all seven counties.*

Objective 4.2: Strengthen emergency preparedness and response for older adults and people with disabilities

Strategies:

- Strengthen the Emergency Preparedness for older adults in the region.

Measures:

- *Update the AAA Disaster Plan annually.*
 - *Assist counties in developing a special Medical Needs Registry as requested.*
 - *Promote and assist with access to tracking systems for older adults who wander.*
- Collaborate with the region's leadership and stakeholders to educate, advocate and participate in activities to strengthen readiness for emergency response for older adults and people with disabilities.

Measures:

- *The Regional Ombudsman will assist facilities in the ongoing development of emergency service plans to ensure their readiness for emergency response.*
- *The Regional Ombudsman will participate on the Mountain Area Trauma Regional Advisory Council (MATRAC).*
- *Advocate on behalf of emergency preparedness and response for older adults and people with disabilities and will engage county and regional leadership in constructive partnerships.*
- *Participate in county emergency drills as appropriate.*
- *Ensure the availability of emergency information and procedures in each of the region's service providers and contractors.*
- *Partner with the LME and the CIL to provide technical assistance to the region's service providers and contractors.*

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

Objective 5.1: Promote volunteerism and other active engagement

Strategies:

- Utilize all ongoing community outreach, quarterly newsletter and social media posts to promote volunteerism and other active engagement

Measures:

- *Fill vacancies on and orient members for the Regional Advisory Committee (RAC), Senior Tar Heel Legislature (STHL), Community Advisory Committees (CAC) with appropriate, actively engaged, and committed volunteers.*
- *Utilize volunteers in key agency roles, including RAC, STHL, County HCCBG Funding Committees, CAC, and Evidence-Based Health Promotions Program leaders.*
- *Utilize the AAA newsletter and social media posts to promote volunteerism and active engagement*
- *Promote Senior Games throughout the year as a means of active engagement*
- *Honor all volunteers at least once a year.*
- *Advocate for the recognition of volunteers' contributions throughout the region.*

Objective 5.2: Promote older workers as vital for businesses seeking a trained, qualified, and reliable workforce

Strategies:

- Conduct outreach to promote older workers as vital resource for a trained, qualified, and reliable workforce

Measures:

- *Collaborate with the COG's Workforce Development department to promote older workers as a vital resource for trained, qualified, and reliable workforce*
- *Coordinate with the State of Franklin Title V Program to ensure that eligible older adults have employment opportunities*
- *Promote the value of older workers via county advisory committees, regional advisory council, and county HCCBG funding committees*

Objective 5.3: Support state and local communities to better prepare and plan for an aging population

Strategies:

- Collaborate with the region's leadership and stakeholders to educate, advocate and participate in activities to plan for an aging population

Measures:

- *Attend COG Board and County Commission meetings to educate, advocate and participate in planning for an aging population.*
- *Advocate on behalf of emergency preparedness and response for older adults and people with disabilities and will engage county and regional leadership in constructive partnerships.*
- *Participate in planning initiatives conducted by county Departments of Social Services, Departments of Health, and other relevant stakeholder organizations.*

6. Ensure public accountability and responsiveness

Objective 6.1: Implement operational improvements and managerial efficiencies for critical services and supports

Strategies:

- Build and strengthen capacity of contracted service providers, AAA staff, and other stakeholder organizations to meet the needs of the region's older adults.

Measures:

- *Provide ongoing training to contracted services providers on Waiting Lists, ARMS, contracts, resource management, and other technical assistance to maximize stewardship and implement operational improvements and efficiencies.*
 - *Ensure consumers are given every opportunity to make voluntary contributions and that contracted providers are adhering to consumer contributions policies.*
 - *Provide staff professional development and training necessary to enhance competencies and maintain required certifications.*
 - *Build capacity of the region's Senior Centers in order to expand services and/or maintain their individual center certification.*
 - *The Regional Ombudsman will increase education and knowledge about current LTC issues.*
- Ensure availability of critical services and supports.

Measures:

- *Advocate for increased community awareness of the needs of older adults through community presentations and representation on various committees.*
- *Serve as SHIIP Coordinator for Graham County, beginning July 1, 2016.*
- *Ensure accurate and timely information brokerage by overseeing regional 211 database.*
- *Disseminate pertinent advocacy alerts to consumers and professionals across the continuum of aging programs and services.*
- *Collaborate with stakeholder organizations to eliminate duplications in service and expand consumer access.*
- *The Regional Ombudsman office will adhere to policy by receiving, investigating, and striving to resolve grievances and concerns made by or on behalf of long term care residents and report the results accordingly to appropriate parties as well as in the Ombudsman reporting system – ODIS.*
- *The Regional Ombudsman will be involved in regional and county committees regarding LTC and Elder Abuse issues.*
- *The Regional Ombudsman office will work to ensure that all elder abuse funds are used across the region to promote awareness of elder abuse issues.*
- *The Regional Ombudsman will meet the policy regarding training for community advisory committees.*

Objective 6.2: Strengthen performance-based standards and outcomes

Strategies:

- The Area Agency on Aging will ensure that HCCBG and Older Americans Act funds are effectively utilized for maximum impact.

Measures:

- *Assist HCCBG and FCSP Providers in becoming more familiar with service standards, monitoring procedures, and effective budgeting.*
- *Compile and analyze monthly Program Expenditure report and offer technical assistance as needed.*
- *Provide training and technical assistance to providers on prioritizing service delivery to older adults with the greatest needs, management of the waiting list, and best practices for consumer contributions.*
- *Monitor all providers on the schedule adopted by the Division of Aging and as set forth in Exhibit 14 and 14A of this plan.*
- *Receive and disburse funds for Operation Fan Heat Relief Funds; prepare related reports.*



The sheer demographics of our seven counties point to the stark reality that, unless there is a tremendous infusion of public funding for older adult programs, demand for services is always going to outweigh available public resources, at least through 2050. This plan outlines the avenues our agency is pursuing toward a business model of program expansion.

Some of the most critical unmet needs, such as shortage of primary care physicians and lack of mental health resources, far exceed the capacity of the aging services network to fully address. In this plan we present the ways our agency will be working with our partners to address these and other unmet needs.

In this plan, the Southwestern Commission Area Agency on Aging has laid out an approach, which relies heavily on exceptional stewardship of resources as well as the collective impact of the partnerships we have formed throughout the region. This plan demonstrates the continued commitment of the Area Agency on Aging, our contracted service providers, other stakeholders, as well as our committee members and volunteers to the continuation of a sustainable continuum of programs, services and supports for older adults in our region and state.