



# Western Illinois Area Agency on Aging

**WIAAA: FirstStop For Seniors**  
729 34<sup>th</sup> Ave., Rock Island, IL 61201-5950

**Phone: (309) 793-6800**  
**Toll Free (800) 322-1051**

**Fax: (309) 793-6807**  
**Website: [www.wiaaa.org](http://www.wiaaa.org)**



***Sponsor of the Retired & Senior Volunteer Program  
of Eastern Iowa & Western Illinois***

To: Friends and Associates in the Field of Aging  
From: Deb Castillo, Information and Planning Manager  
Date: May 9, 2011  
Re: FY 2012 – 2014 Area Plan Summary and Public Hearings

Enclosed is the Western Illinois Area Agency on Aging FY 2012 – 2014 Public Information Document, a summary of our proposed 2012-2014 area plan. The document provides an overall look at what the Area Agency proposes doing with Federal and State funding for senior services in western Illinois.

We will be conducting two Public Hearings regarding the plan. The dates, times and locations are included with the enclosed document. We encourage you to review the document carefully and attend one or both public hearings to share your comments.

As always, your thoughts and suggestions are a vital part of our planning process and we look forward to and welcome your insights.

For additional information please call me at 309-793-6800 or 1-800-322-1051.

Thank you.

vc



Public Information Document

A Summary of the Fiscal Years 2012 - 2014  
Area Plan on Aging

Proposed by:  
Western Illinois Area Agency on Aging

Issued May 9, 2011

# NOTICE

The Western Illinois Area Agency on Aging (WIAAA) presents this Public Information Document as an official summary of its 2012 - 2014 Area Plan to address the needs of seniors in federal fiscal years 2012 - 2014. The WIAAA will host two Public Hearings on the proposed area plan. The dates, times and locations of the hearings are listed below. This plan addresses the concerns of seniors living in the following Illinois Counties: **Bureau, Henderson, Henry, Knox, LaSalle, McDonough, Mercer, Putnam, Rock Island, and Warren.**

The WIAAA received comments regarding the development of the 2012 - 2014 Area Plan at three community input forums, held in March 2011. Whether or not you participated at one or more of these forums, you are encouraged to review the attached summary and come to a formal public hearing with your comments and recommendations. The proposed area plan includes a waiver request to exceed 15% (up to 30%) transfer of WIAAA's allotment for Title III-C1 to Title III-B services. It also contains three direct service waivers; one under III-E Assistance for \$3,000, one under III-B I&A for \$13,000 and one under III-B Education for \$8,000.

If you'd like to testify you may register in advance by contacting Deb Castillo at the WIAAA office. Testimony may be presented verbally or in writing. Written testimony will be accepted at the WIAAA office no later than Friday, June 3, 2011. For those wishing to testify at the hearings, at least one written copy of your testimony should be available for the hearing panel on the day of the hearing. Although an opportunity for unscheduled comments from the audience will be allowed at each hearing, the amount of time available will be limited by the number of persons scheduled to testify. Hearings are scheduled to end a maximum of two hours after they begin, or whenever there is no more testimony. All presentations will be limited to 10 minutes.

Printed copies of this Public Information Document (PID) are available at all area Community Focal Point Senior Centers, at the office of the Western Illinois Area Agency on Aging and at some public libraries. The WIAAA PID is also available at our website: [www.wiaaa.org](http://www.wiaaa.org). To register to testify, request a copy of the PID, submit written testimony, or for additional information, contact:

Deb Castillo, Western Illinois Area Agency on Aging  
729 – 34th Avenue, Rock Island, IL 61201  
309-793-6800, or toll free, 1-800-322-1051  
[dcastillo@wiaaa.org](mailto:dcastillo@wiaaa.org)

## PUBLIC HEARINGS

**The meetings will be held at these locations:**

**Tuesday, May 31, 2011 at 10:00 a.m. at:**

Bureau County Senior Center  
16 West Marion Street  
Princeton, IL 61356

**Thursday, June 2, 2011 at 9:30 at:**

VNA Community Services Center  
2262 Grand Avenue  
Galesburg, IL 61401

# The Western Illinois Area Agency on Aging

## Who We Are

The Western Illinois Area Agency on Aging was founded in 1973 under an amendment to the Older Americans Act of 1965. The Act is a Federal law created to help older Americans live in their homes with safety and dignity as long as possible with appropriate services and support. There are approximately 629 area agencies across the nation, 13 in the State of Illinois. We are part of a vast, national network of services and programs to protect the rights and support the needs of older Americans. This network includes the Administration on Aging at the federal level, State Units on Aging at the state level, Area Agencies on Aging at the regional level, and local community service providers, all working together to serve our nation's seniors.

The WIAAA serves 10 counties in western Illinois: **Bureau, Henderson, Henry, Knox, LaSalle, McDonough, Mercer, Putnam, Rock Island, and Warren**. There are approximately 99,574 people 60 years old or older living in this area.

The funds we administer are mostly federal, though the state contributes a significant portion. Much of the money in the network is raised locally by service providers or contributed generously by those who benefit from the services.

We are a not-for-profit organization currently staffed under the area plan by 11 full-time people and 5 half-time persons, governed by a 22 member board of directors which seeks advice from a 16 member advisory council. The men and women serving on our board and council represent the ten counties in our planning and service area. Many are retired from full time employment and are active with this network in order to contribute to the well being of the seniors in their communities.

## What We Do

**Support Community Programs on Aging:** WIAAA manages grants with approximately 35 local providers of service to seniors. Services are available to anyone 60 years and older. Caregiver services are available to anyone caring for a person 60 and older, a person 60 and older providing care to a severely disabled adult or a grandparent or relative 55 years and older and raising a grandchild under the age of 18. Voluntary contributions are encouraged and used to expand programs. Services are targeted to low income individuals, including minorities, older individuals with limited English proficiency and older individuals residing in rural areas. In FY 2012, the area agency allocates funds for the following service priorities:

***Community Focal Points/Family Resource Centers*** - Special senior centers located throughout the area's 10 counties that provide a number of valuable services and support for seniors. Each center provides Information and Assistance and Outreach for seniors and their families. They also provide Information and Assistance for caregivers, for grandparents raising grandchildren and for persons with disabilities. They serve as Senior Health Assistance Program (SHAP) sites. As a SHAP site they provide outreach, information and assistance with completing applications for the various SHAP/MIPPA programs for seniors and for persons with disabilities. CFPs also facilitate a host of social and recreational opportunities for seniors as well.

***Home Delivered Meals*** - Nutritious noon meals delivered to seniors who are frail and homebound. Some providers are able to deliver sack or frozen meals to supplement needs for evenings and/or weekends.

***Transportation*** - Vans and other vehicles driven by trained staff or volunteers to transport seniors who are unable to drive themselves. Trips can be to doctors' appointments, to meal sites, for shopping, or a number of other purposes.

***Congregate Meals*** - Nutritious meals offered at senior centers, senior housing, churches and other public facilities that enable seniors to participate in a meal while experiencing companionship and an opportunity to volunteer their time. These meals and activities help older people stay independent by giving them meaningful ways to stay active.

***Legal Assistance*** - Attorneys and paralegals that provide a number of activities designed to protect vulnerable seniors against legal violations.

**Additional Services Offered by the WIAAA:** In addition to those above we fund a number of other valuable services designed to keep older people independent. They are:

***Disease Prevention and Health Promotion*** - There are 12 possible services under this title. The four which we have selected to fund are 1) Physical Fitness, Group Exercise, Music and Dance Movement Therapy; 2) Medication Management; 3) Health Promotion and (4) Health Risk Assessment. Each one offers a unique way of helping older people with a number of Health Promotion and Disease Prevention activities.

***In-home, Adult Day Care and Institutional Respite*** - These services support caregivers by providing respite in the home or adult day care centers for older people who need close attention, or for very short stays in a nursing facility.

***Elder Abuse Prevention*** - A service designed to assist in the protection of older people from abuse, neglect and exploitation. Special case managers follow strict guidelines to uncover abuses and guard vulnerable seniors.

***Ombudsman*** – An advocacy service to protect the rights of older people living in nursing homes.

***Caregiver Support*** – Assistance and Counseling/Training/Support Group services to support the needs of caregivers. Supplemental Gap Filling Service is a service that helps fund the purchase of items that enable a Caregiver needs to continue to provide care for a Care Recipient. Commonly requested items include ramps, window air conditioners, accessible bathroom equipment, etc.

***Senior Health Assistance Program/Medicare Improvement for Patients & Providers Act (SHAP/MIPPA and MIPPA 2)*** – A service which identifies and assists seniors and persons with disabilities eligible for the Circuit Breaker/Illinois Cares Rx program, the Illinois Rx Buying Club, the I-Save RX program, the Medicare D Benefit, Low-Income Subsidy and the Medicare Savings Program. WIAAA staff assists with direct client service in implementing these programs and programs such as the new Medicare B Prevention and Wellness benefit through various outreach activities.

***Western Illinois Aging and Disability Resource Center*** – In January of 2011, WIAAA was awarded a grant to establish Aging and Disability Resource Centers (ADRC) in our 10 county Planning and Service Area. In the spring of 2011, we are in the process of expanding the Information and Assistance service that is offered at WIAAA in Rock Island into an ADRC. This includes working with the Care Coordination Unit, Alternatives for the Older Adult, and the Illinois Iowa Center for Independent Living to provide assistance to seniors and persons with disabilities to help them remain as independent as possible within the community. We also are expanding ADRCs into our other 10 counties, which will be described later in this document.

***Matter of Balance*** – This is an evidence based “falls prevention” program which acknowledges the risk of falling but emphasizes practical coping strategies to reduce this fear. It teaches individuals to set realistic goals for increased activity, to remove obstacles from their home environment to reduce the fall risk and to exercise to increase their strength and balance.

***Senior Medicare Patrol*** – Medicare and Medicaid lose billions of dollars each year due to fraud, abuse and errors. The Senior Medicare Patrol utilizes volunteers to educate and empower consumers about health care fraud and abuse through outreach and education.

**Other activities which benefit seniors:** WIAAA is involved with a number of additional activities that help older people stay independent. They include:

***Senior Community Service Employment Program*** - An employment training program which assists low-income older people with employment needs. “Host agencies” serve as training sites. Enrollees work towards finding suitable jobs once they have been trained.

***Systems Development Grant*** - The WIAAA assists with some of the administrative oversight of the Illinois Community Care Program (comprehensive care coordination services, in-home and adult day care services, flexible senior services and assistive technology offered by the state to help older people stay independent).

***Advocacy*** - WIAAA actively participates in efforts to develop and expand resources for seniors in western Illinois, and supports local advocacy efforts to educate policy makers and represent the interests of seniors.

***Coordination and Community Involvement*** - The WIAAA staff is involved with a number of professional associations and human service councils and community groups to help in the delivery of service to seniors.

***Information Sharing*** - WIAAA is always available to seniors and their families by phone, visit or its website ([www.wiaaa.org](http://www.wiaaa.org)). We maintain a library, called the Greta J. Brooks Elderly Living and Learning Facility (ELLF) containing books, journals, audiovisual materials and a host of pamphlets and brochures all designed to support seniors, caregivers, service providers, and the general public. A newsletter ...*Baseline*... is published quarterly. The agency staff provides information and assistance service to seniors, caregivers, grandparents raising grandchildren, persons with disabilities and the general public.

***Retired and Senior Volunteer Program (RSVP)*** – WIAAA sponsors this organization that works with men and women 55 years of age or older, and community groups to increase and promote volunteerism and the potential for making a difference in the lives of people. In 2010, the

Corporation for National and Community Service, the major funding source of the RSVP program, selected our program to receive a Program of National Significance grant. This grant is allowing RSVP to expand into Knox County and to work with WIAAA staff to expand the Matter of Balance Program to additional counties in the agency service area.

***Quad City Caregiver Connection*** – WIAAA is working with Alternatives for the Older Adult, The Quad Cities Chapter of the Iowa Alzheimers Association and Generations Area Agency on Aging (our Iowa counterpart) to provide Caregiver Assistance to caregivers. During the last year we developed and hosted a caregiver event and have developed a brochure for employers that explains our services. Members of Caregiver Connection are currently working with various local employers to show how these services can benefit them by providing assistance and services to their Caregiver employees.

***Emergency Preparedness Plan*** – WIAAA has reviewed and revised its Disaster Operations Plan to meet the criteria of the 2006 amendments to the Older Americans Act. WIAAA and RSVP remain active members of Volunteer Organizations Active in Disaster (VOAD), the Quad City Homeland Security Program and the Quad City Citizen Corps. We actively participate in “table top” disaster trainings, bi-state pandemic influenza seminars, disaster preparedness “webinars” and all disaster related trainings available to us. WIAAA and RSVP maintain valuable coordinated partnerships at the federal, state and local levels in order to maximize the safety and well being of our vulnerable senior population, their caregivers and the aging network service providers.

**FOR MORE INFORMATION CALL:**

**(309) 793-6800, TOLL FREE AT (800) 322-1051, FAX (309) 793-6807**

**Or visit our website at: <http://www.wiaaa.org>**

## **What Are the Major Issues Facing the Seniors in Western Illinois?**

WIAAA looks forward to addressing the changing needs of the next generation of seniors as we continue each day to provide the best quality of service possible for our older and most frail elderly.

***At the Federal Level:*** WIAAA will focus on several issues at the federal level in FY 2012.

- **Preparing for the Future.** Since its inception in 1965, the Older Americans Act has evolved to meet changing needs and expectations. Consequently, the scope of the Act has expanded to better address and support the needs of older adults and their caregivers. WIAAA believes that the Act’s mission must be expanded to further support the role of the Aging Network as the focal point for aging services and to assist our nation’s communities in meeting the challenges and opportunities of the coming “age wave”. During this Area Plan cycle we will be establishing Aging and Disability Resource Centers (ADRC) throughout our 10 county area. These ADRCs will continue providing information and assistance to seniors and caregivers as well as assist seniors and those with disabilities with the pharmaceutical programs. They will also develop programs to assist seniors and their families with topics such as options counseling and person centered planning.
- **Reauthorization of the Older Americans Act.** The Older Americans Act was last reauthorized in 2006 and is scheduled to be reauthorized in 2012. In this era of dramatically increasing numbers of individuals eligible for our services and either stagnant or declining funding, we face a real challenge in trying to meet the needs of seniors and caregivers. We will be working

with other aging services organizations to keep the Older Americans Act relevant to these challenges we face.

- **Budgetary issues.** We will continue to regularly contact our Senators and Representatives regarding the services we provide and the need for funding to provide home and community based services. Many of the newer legislators are unfamiliar with area agencies on aging and the work we do. We are increasing our educational efforts with these legislators.
- **Census Decline.** In the 2000 census, the 60+ population in our planning and service area declined and there also was a decrease in the percentage of the 60+ population who were below the poverty level. One of our ten counties previously classified as rural was designated urban. All of these factors contributed to a substantial decrease in funding for our area. While we have not yet learned the outcome of the 2010 census, we believe that the percentage of 60+ individuals in Illinois who live in our 10 counties will have decreased. This means that our funding will again decrease which will make it even harder for us to continue providing our current levels of service.
- **Health Care Reform.** We will assist seniors in understanding the new health care reform and how that will affect them. Seniors have expressed their confusion and concern about the upcoming changes and will need guidance and helpful information to help them sort through it all. The Affordable Health Care Act has allowed for expanded Medicare B benefits such as Prevention and Wellness. WIAAA is making a concerted effort to educate and assist seniors, their caregivers and persons with disabilities in understanding and utilizing these benefits.

#### ***At the State Level:***

- **Budgetary issues.** We understand that the state of Illinois is in the midst of a serious budget crisis, and the governor's proposed budget included substantial reductions in our funding. However, we also know that our services help seniors to remain independent in the community for far less money than it would cost to cover their care in a nursing home. We also understand that the cost of providing services has certainly increased with the rising expense of fuel, the recent minimum wage increases and increased energy costs. The agencies which provide senior services are facing these major increases in costs in addition to the increasing numbers of seniors who are becoming eligible for our services. WIAAA will continue to advocate that the state find a way to resolve the budget crisis that will not adversely affect Older American Act services, allowing our providers to continue to offer the same level of services to seniors. WIAAA advocacy efforts include phone calls and emails to legislators in addition to our local legislative forums when we invite legislators to learn from our seniors and service providers.
- **Senior Health Assistance Program (SHAP) and Medicare Improvements for Patients and Providers Act (MIPPA) and MIPPA 2.** We will advocate for the continuation of the Illinois Cares Rx pharmaceutical assistance program so that seniors will have wrap-around coverage to Medicare Part D. We will also continue to advocate for additional funds for the area agencies on aging and their funded providers who continue to assist seniors with Medicare Part D, Low-Income Subsidy, Medicare Savings Program and the new Medicare B Prevention and Wellness benefits.
- ***At the Local Level:*** WIAAA is continuing to increase advocacy and coordination efforts at all levels, including the local level.

- **Maximizing Resources.** WIAAA will collaborate with other organizations and government entities to build on and maximize the effectiveness of our limited resources. By continuing to work with local governments and agencies, sharing information and planning and preparing for potential disaster, we will maximize our resources. We will also utilize the expertise of other organizations for statistical information, reports and other useful data; and establish relationships with other organizations and tap into their valuable resources to help meet the needs of our seniors.
- **Assisting seniors and caregivers.** WIAAA will continue to expand its expertise in providing Information and Assistance by continuing to evaluate current services; presenting information to the community; participating in senior health fairs, human service committees and community events; maintaining and updating ESP; funding AIRS certification for providers and select WIAAA staff; and providing information through trainings, conferences and workshops. The QCA United Way Info Link was chosen to provide “211 Service” locally. WIAAA signed an agreement with Info Link to serve as the senior information provider and Info Link will refer all senior service calls to WIAAA.
- **Living Wage and Benefits.** Our service providers’ employees need a living wage and benefits. Services funded directly by the state, such as the Community Care Program, have seen several Cost of Living Allowance (COLA) increases during the past decade, while Older American Act services have not.
- **Home Delivered Meals.** The demand for home delivered meals has increased over the years as the clients originally served congregate meals age and become homebound. We can expect more frail elderly to opt more often for in-home and community based services to replace the institutional care of the past.

If the governor’s budget proposal to decrease funding to Home Delivered Meals is passed by the legislature, the number of meals which can be delivered in our area will almost certainly decrease. This means that our meal providers will have to make some hard choices as to which meals to eliminate, which delivery routes to cut, etc.

## **The Needs of Seniors in Western Illinois**

### **Evidence Based Programs – WIAAA Assessment of Needs**

#### **Evidence Based Programming**

In 2009, members of the WIAAA management team attended a training regarding Evidence Based Programs and their effect on the population we serve. Older Americans are disproportionately affected by chronic diseases and conditions such as arthritis, diabetes and heart disease, as well as disabilities that result from injuries such as falls. More than one-third of adults 65 or older fall each year. Twenty-one percent of the population age 60 and older – 10.3 million people – have diabetes. Seven of every 10 Americans who die each year, more than 1.7 million people, die of a chronic disease. The need for programs that enable older adults to learn and practice healthy behaviors is critical.

Through collaboration with Health and Human Services (HHS) agencies, the National Council on Aging (NCOA) and philanthropic organizations, the Administration on Aging (AoA) has created national partnerships that have addressed the need for community-based health, prevention and wellness programs. These programs have been proven to increase self-efficacy, decrease health service

utilization and enable participants to adopt healthy self-management behaviors. This health, prevention and wellness Program:

- Focuses on the utilization of evidence-based self-management programs
- Implements and maintains self-management classes within the comfort of participant's community, using traditional non-clinical settings such as Area Agencies on Aging or senior centers; and
- Enables participants to modify existing health self-management behaviors through group interaction and reinforcement.

### **Why Evidence Based Programming?**

There is a national movement towards utilizing evidence based programming where outcomes from participation in the programs can be proven. The Center for Disease Control, AoA and the NCOA are collaborating and offering grants for disease preventing evidence based programs. The Department of Public Health has identified obesity and lack of physical activity as one of the leading causes of illness in the WIAAA 10 county Planning and Service Area.

A WIAAA Advisory Council member had experienced a fall and traumatic brain injury one winter. This member's struggles and challenges inspired a new interest in "falls prevention" methods with staff, Advisory Council and Board of Directors members. WIAAA conducted a strategic planning retreat with our Board in the summer of 2009 and reviewed a number of evidence based programs. The program chosen during this retreat for implementation and support by our Agency was: **Matter of Balance** (a falls prevention program).

### **Matter of Balance Assessment (MOB)**

Matter of Balance or MOB acknowledges the risk of falling but emphasizes practical coping strategies to reduce this fear. This program helps participants view falls and fear of falls as controllable. It helps individuals set realistic goals for increased activity, it teaches them to remove obstacles from their home environment to reduce the fall risk factor and it promotes exercise to increase their strength and balance.

The workshop is conducted over eight sessions, meeting weekly or twice weekly for two hours per session. Meetings are led by both Master Trainers and volunteer lay-leaders who have received training from Master Trainers.

### **Learning Objectives:**

- View falls and fear of falling as controllable
- Set realistic goals for increasing activity
- Change environment to reduce risk factors for falls
- Promote exercise to increase strength and balance

## **Program Components**

- Curriculum based to address fear of falling
- Cognitive restructuring
- Fall techniques verses natural instinct
- Home safety check conducted
- Peer/group model of support and socialization
- Exercise component (add thirty minutes of physical activity per day)
- Healthy eating

In FY 2010 and into FY 2011 four classes were conducted at four different venues: an assisted living facility, a senior hi-rise, a local church and a local senior activity center. Two leaders led each group through the program components, encouraging interaction through group discussion, role playing, problem solving, assertiveness and exercise training, video tapes and group sharing.

## **MOB Summary of Findings**

As of the date of this writing, four classes have been fully concluded with a total of 28 participants completing the course. As a result of these classes, of those 28 individuals, the majority highly praised the course and its goals. Most felt that significant changes had been made in their manner of thinking regarding falls and falls prevention. While WIAAA had hoped for and expected good results, these comments from participants far exceeded our expectations. It is obvious that MOB, an evidence based program, is truly critical to assisting seniors who wish to remain independent in their own homes for as long as possible.

WIAAA considers that Matter of Balance has been a good fit for the agency and that the overwhelmingly positive results ensure and encourage the staff at WIAAA to continue to implement and expand the program throughout our Planning and Service Area (PSA). WIAAA considers that MOB it is still in its infancy with a bright future ahead. There are now four Master Trainers from WIAAA working with volunteers to host the classes but the demand for this popular program continues to exceed the available trainers.

MOB is making a noticeable difference in peoples' lives. It is truly an evidence based program that produces positive outcomes. The program is currently being implemented in other counties in our Planning and Service area, receiving a rave response and a growing attendance. At the time of this report two other classes are in session though will not be completed in time to be included in this assessment.

## **Future of Evidence Based Programs at WIAAA**

The Area Agency on Aging continues to search for and implement evidence based programs which are not only healthy and safe for its seniors, but which are enjoyable and fulfilling as well. WIAAA feels that its implementation of MOB is addressing the critical issues that seniors are facing today.

The assessment of needs of the MOB program is a work in progress but the assessment so far lends hope that the final outcome will be positive and rewarding. This report is merely a stepping stone to the next level of involvement for WIAAA. After the FY 2011 implementation of this program WIAAA will again assess and publish the results.

## **Community Input Meeting Summary**

### **Western Illinois Area Agency on Aging 2011 Community Input/Legislative Forums**

Three Community Input Meetings/Legislative Forums were held in the Western Illinois Area on Agency (WIAAA) Planning and Service Area (PSA). Counties covered in our Planning and Service Area (PSA) are: Bureau, Henderson, Henry, Knox, LaSalle, McDonough, Mercer, Putnam, Rock Island and Warren. The purpose of these forums is to obtain public input and to hear from our elected officials regarding our upcoming Area Plan for FY 2012. The forums are open to seniors, their caregivers, persons with disabilities, elected officials and the general public. These meetings were held in: **Henry, LaSalle (Ottawa) and Mercer Counties.**

The Illinois Department on Aging (IDOA) allocates federal funds for services for older adults, family caregivers and persons with disabilities. WIAAA is one of those agencies that develops and coordinates comprehensive systems of home and community-based services to enable older adults and persons with disabilities to live in the least restrictive settings and avoid unnecessary hospital readmissions and placement in long term care facilities.

In 2010 in our area, 18,640 persons age 60 and over benefited from our Older Americans Act (OAA) services. In January 2011, WIAAA became an Aging and Disability Resource Center, and are already serving many of persons living with disabilities. WIAAA partners with 35 agencies and continues to expand its collaboration with other agencies within the aging and disability networks.

Each Community Input Meeting/Legislative Forum opened with the Executive Director, Janice Stille, detailing some of our home and community based services and future budgeting concerns. WIAAA-ADRC leverages OAA funds with other federal, state, local and private resources to support community programs in aging. In FY 2010, expenditures for OAA programs in our 10 county PSA totaled \$6,006,403 including \$2,475,537 federal OAA funds (41.2 %), \$269,975 Federal Nutrition Incentive Program (NSIP) funds (4.5%), \$907,228 Illinois General Revenue Funds (15.1%), \$1,628,022 in local cash and in-kind support (27.1%) and \$725,641 in voluntary participant contributions (12.1%).

With the Governor's proposed budget cuts WIAAA is greatly concerned about the future of its services and the persons we serve. The WIAAA Board will ultimately need to decide where those cuts should come from using our priority services list. Much discussion ensued at these three meetings regarding where those cuts should come from.

### **Henry County – March 15, 2011**

Citizens in attendance at this meeting were very concerned about the impact of cuts on services such as transportation. The worry has long been the lack of transportation in Henry County and if funding was taken from the senior transportation program many persons would be affected. In 2010, our transportation providers provided 78,600 rides to 2,231 seniors to access medical appointments, shopping, nutrition programs and senior centers. Currently, another agency in the county provides some transportation but has also experienced funding cuts so rides are limited. Many spoke up requesting that the funding not be taken from this particular service and that WIAAA advocate with its Board to keep transportation funding level, taking funds from another service such as Community Focal Point (Information and Assistance and Outreach) and/or Legal Services. The WIAAA Board will make the final decision based partially on suggestions from the community.

Participants of the meeting discussed ways to do transportation differently such as organizing volunteer programs which might be coordinated by the senior center, arranging for persons to go to doctors and clinics on same days. If a volunteer can take one person to the doctor every week why couldn't it be arranged that three people could schedule their doctor appointments for the same date.

If funding is lost to the Home Delivered Meals (HDM) program it would have to come from that line item and there was discussion about how to reduce the number of delivery times without having to cut seniors from the program. Most of the expense of transportation is the delivery due to fuel costs. Perhaps a hot meal and a cold meal could be delivered every other day, cutting back on delivery costs but still providing that individual with 5-7 meals per week. Frozen or "sack meals" could be delivered along with the hot meal and while it is not a perfect solution to the problem, it would reduce the possibility of long waiting lists.

Some discussion arose regarding the elimination of the Circuit Breaker/Illinois Cares Rx program but because so little is known about its future not much could be said. Participants and staff were encouraged to continue to contact elected officials to let them know of their concerns and the impact its loss would have on both seniors and the disabled. People were reminded that certain low income individuals would continue to receive help under "extra help" and that WIAAA-ADRC would do everything in its power to continue to work with persons who would need to find the best Medicare D plan should the program be de-funded. Programs such as "Patient Assistance" would be utilized to the extent possible as well as programs offering drug discount cards.

Other suggestions included dropping both the car tag reduction and rent/property tax rebate benefits of the Circuit Breaker to help cut costs while keeping the pharmaceutical assistance portion of the program.

### **Mercer County – March 16, 2011**

The citizens of Mercer County seemed more concerned about what they would do if funding to their senior center (Information and Assistance and Outreach) was cut. 12,400 older adults received help through Information and Assistance throughout our PSA.

Several people spoke up to support the fellowship and social interaction that their center provided them and the dedicated workers who assisted them with programs and services. 5,318 seniors participated in senior center activities and 127,032 congregate meals were served to 2,923 seniors in PSA 03.

It was discussed how senior center participation has greatly declined over the years. The seniors of today have different interests than those who came before them. Baby boomers are more inclined to stay active longer and require more challenging activities to entertain them or volunteer opportunities to keep them busy. The days of bingo and card games seem to have fallen by the wayside with Internet cafes and Wii tournaments taking their places. The Mercer senior center is open to change and has acquired computers for use by the general public as well as "Breakfast for Your Brain" educational sessions. Seniors themselves discussed how they needed to continue to consider innovative thinking in drawing in new participants while still appealing to the interests of its steady base group.

There was discussion regarding the elimination of Circuit Breaker/Illinois Cares Rx with many concerned about what they would do without the pharmaceutical assistance the program provides. Citizens were again reminded by WIAAA staff of the active supporting role that WIAAA would

continue to play should the program be eliminated, giving seniors and others hope that they could still receive the most reasonable assistance for medications as would be possible.

### **LaSalle County (Ottawa) – March 25, 2011**

Participants and some of the aging network staff expressed concern about cuts coming to their senior centers and services such as Information and Assistance and Outreach. They discussed how these services are critical to keeping seniors in their own homes and without them we would see an increase in seniors being “institutionalized”.

While legislators debate budget issues in the capitol, several persons inquired as to whether or not these officials really have a grip on reality regarding what our senior citizens are experiencing with all the past and current proposed cuts. The seniors are our frailest and most vulnerable population, the backbone of our country, yet they seem to always have to bear the brunt of the funding cuts.

The day prior to this gathering the WIAAA Board had made the very difficult decision regarding where to take the proposed cuts. It was decided that Legal Services would be cut by \$10,000 and that the remaining cuts would be split between Community Focal Points (cut of around 17%) and Transportation (cut of around 6%). There are proposed cuts to the Home Delivered Meal program as well, but those cuts would need to come from that line item. As discussion continued everyone was reminded that until the actual budget is released everything remains subject to change.

A provider appealed to WIAAA to consider giving technical assistance in rearranging services once the cuts are made. Many are concerned how they will continue to conduct business with fewer funds. The number of seniors who wish and need to be served has not decreased and they will still require assistance.

Pam Roth, State Representative for the 75<sup>th</sup> District, spoke about her commitment to providing services to seniors and commented on the current legislative session. O.J. Stoutner, staff person for Senator Sue Rezin, also attended the meeting and commented on Senator Rezin’s commitment to services for seniors.

At each meeting a brief presentation was given regarding the new Medicare B Preventive and Wellness benefits and the Senior Medicare Patrol fraud and abuse program.

## **Western Illinois Area Agency on Aging Funded Services and Commitments**

***Service Priorities:*** The WIAAA Board of Directors is choosing not to change current service priorities for FY 2011 with the exception of adding Legal to the Caregiver services. These priorities are:

***Title III-B Community Focal Point/Family Resource Centers*** - The WIAAA's first commitment is to the eleven special senior centers throughout the ten-county area called Community Focal Points (CFP's). Each of the 10 counties has one CFP except LaSalle which has two because of its large geographic size. We require each CFP to adhere to special standards and furnish specified levels of Information and Assistance and Outreach services, in exchange for receiving guaranteed, non-competitive funding for these services and their operations. The CFP vision was initiated by the WIAAA office to give seniors and their families' local places to turn for help. We are attempting to keep service as close to the consumer as possible, to create one-stop-service shopping for seniors to the extent possible, and to nourish the grassroots vision of the Older Americans Act. In FY 2012, we plan to award \$43,023 grants to each CFP (except the Rock Island Senior Center which will receive \$63,024 because of its large population base). In keeping with this one-stop concept, we are calling the CFP's Community Focal Point/Family Resource Centers, as they now incorporate Information/Information and Assistance service for caregivers and grandparents raising grandchildren. Separate Title III-E funding for the Information service has been allocated. During the FY 2012 – 2014 Area Plan the 11 Community Focal Points will become Coordinated Points of Entry and eventually a part of the Aging and Disability Resource Center (ADRC) of Western Illinois. More information regarding the ADRC is included in a later section of this document.

***Title III-C2 Home Delivered Meals*** - This nutrition service is vital to the independence of countless seniors in western Illinois. Many seniors require meals for extended lengths of time, while many others need meals for a short period of time while recovering from an illness or other temporary condition. The number of seniors needing meals delivered to their homes compared to the number who are able to go out for a meal has risen dramatically over the past several years, and continues to rise. It is further indication that seniors are "aging in place" and that their needs are increasingly more complex as they do. The demand is expected to continue growing.

***Title III-B Transportation*** - When seniors are asked to tell us which service is most critical to their independence, transportation always shows up right at the top of the list. Once someone loses the ability to drive, he/she is also losing the ability to get to the doctor, the store, family and friends. Transportation is vital to a person's independence.

***Title III-C1 Congregate Meals*** - The Older Americans Act allocates a great deal of money for community-based meal sites. The congregate meal program gives seniors a nutritionally balanced meal and the opportunity to socialize and stay active. Meal participants also benefit from educational programs about nutrition and other important issues. Congregate meal programs are one of the first steps in a continuum of care. The program is critical from a preventive point of view. Many of the seniors who benefit from the meals also volunteer at the sites, giving them meaningful and rewarding activity.

***Title III-B Legal Assistance*** - Seniors are vulnerable in many ways. Legal assistance is often the only way to help assure that an older person is not exploited, neglected or abused. This service is important for the legal protection and rights of many seniors in western Illinois.

***Title III-E Caregiver Respite*** - Respite services, both to relieve the caregiver and to allow the caregiver to attend support/counseling sessions, will be provided on the same basis as our Title III-B Respite service. This service is also available to grandparents who are raising grandchildren.

***Title III-E Caregiver Assistance*** - This service, provided by Community Focal Points and/or other providers at both the local and long-distance levels, will enable caregivers to find services to fit their needs.

***Title III-E Caregiver Counseling/Training/Support Groups*** - Both group and one-on-one training is provided on topics such as coping with stress, coping with behavioral problems, and personal care techniques. Individual counseling is available, as well as referrals to mental health professionals for those needing therapeutic counseling. Funding will be available for start-up and/or operating expenses of existing support groups for caregivers and grandparent relative caregivers.

***Title III-E Caregiver Legal Services*** – Our Legal Services provider will be able to provide some assistance to all Caregivers including grandparents who are raising grandchildren.

***Title III-E Caregiver Supplemental Services*** - To allow for flexibility in meeting the unique needs of individual caregivers, funds will be available for such things as minor home modifications, legal assistance, medical transportation or one-time housecleaning.

***Other services funded by the WIAAA not subject to the service priority list***. The WIAAA funds additional services under the Older Americans Act. Title III-B Respite and Ombudsman are designated under the Older Americans Act for specific purposes. Though we have little flexibility with these services and they are not subject to our funding priorities, we believe that they are also valuable components to the continuum of care offered to seniors in western Illinois. The Title III-E National Family Caregiver Support Program has its own priority list.

***Title III-D Disease Prevention and Health Promotion Services*** - The Older Americans Act includes this title for a variety of services that prevent disease and promote health for older people. The WIAAA Board has selected four services that may be provided only by Community Focal Points. Those services are Health Promotion; Physical Fitness, Group Exercise, Music and Dance Movement Therapy; and Health Risk Assessment. A separate grant will be issued to a single provider to provide Medication Management throughout all of the ten counties.

***Ombudsman*** - The WIAAA also funds the area's Regional Ombudsman Program to help people living in long term care facilities by advocating for them when they have concerns or complaints, and by providing important information to residents about their rights. About 6% of the senior population lives in a long term care facility at any one point in time. There are 75 nursing facilities in our ten counties with approximately 6,295 licensed beds. There are 10 Supportive Living Facilities with a total of 706 beds and 22 Assisted Living Facilities with a total of 897 beds in our ten counties where the ombudsman program provides services. The Ombudsman program operates primarily with Ombudsman staff.

***Senior Health Assistance Program/Medicare Improvements for Patients & Providers Act (SHAP/MIPPA)*** - A service which identifies and assists seniors, caregivers and persons with disabilities eligible for the Illinois Cares Rx program, the Illinois Rx Buying Club, the I-Save Rx

program, the Medicare D Benefit and the Medicare Savings Program. WIAAA staff assists with direct service in implementing these programs through disseminating information and providing assistance with the application processes.

**Education** – WIAAA believes “Lifelong Learning” is essential to the mental and physical health of today’s seniors. Through our “Living and Learning” series we are presenting a wide range of topics to enable older learners to keep their minds and bodies engaged in actively pursuing knowledge and experience through a variety of learning options. Our series engages older adults in challenging and intellectually stimulating programs which will enable them to make informed decisions regarding legal issues, health issues, financial planning, insurance decisions, etc. so that they can be actively engaged in planning for their futures.

**Other WIAAA activities that benefit seniors:** The WIAAA is involved with a number of additional activities beyond funding for and oversight of the services mentioned above. These additional programs are equally important to fulfilling our mission under the Older Americans Act to be a central, coordinating and planning organization for the seniors of western Illinois.

**Employment Assistance** - Under Title V of the Older Americans Act, the WIAAA helps people age 55 and over with employment needs. The program matches eligible seniors with host agencies that serve as job training sites. The host agencies benefit from having an additional short-term employee funded by an outside source, and the senior benefits from on-the-job training. The goal is to move seniors into the workforce once training is complete, and often the host agencies end up hiring the worker. Lack of suitable employment for seniors continues to be a concern everywhere. Age discrimination in job sites is real, though often undetectable. This program, like the other parts of the Older Americans Act, is meant to help seniors continue to live independently and with dignity.

**Retired and Senior Volunteer Program (RSVP)** - WIAAA sponsors the RSVP that serves in both Illinois and Iowa. This program allows seniors to share their wisdom, expertise and time with Quad City social service agencies, schools, etc. throughout their communities on both sides of the river. RSVP has also received a Program of National Significance grant for public safety and disaster preparedness.

**Systems Development Grant** - The Department on Aging funds the WIAAA to help with some of the administration of the Community Care Program’s purchase of service processes and administrative oversight. Though this is mostly an administrative function, our assistance helps the CCP run more smoothly and efficiently, which in turn means a higher quality of service for seniors.

**Advocacy** - We are always involved with a number of political advocacy issues at the local, state and federal level. We are mandated under the Older Americans Act to stay informed of issues that may affect the seniors in our area and respond appropriately. There is no doubt that advocacy which makes a difference is advocacy organized and put forth by seniors themselves. Our role is to help seniors stay informed and to evaluate the potential consequences of particular legislation to see how it will affect the seniors in our area. Many of the benefits and services now available to seniors would not exist if it were not for the efforts of senior advocates. This service is imperative to the continued well-being of the seniors in western Illinois and to the preservation of critical services.

**Coordination and Community Involvement** - The WIAAA staff attend human service council meetings, participate in initiatives to bridge generations, offer numerous and varied training opportunities to service providers and the public, help seniors and providers with specific requests for information as the requests occur, and many other similar activities. Our work on behalf of the seniors of Western Illinois goes well beyond the administration of the Older Americans Act funds.

**Information Sharing** - The WIAAA hosts a library, called the Greta J. Brooks Elderly Living and Learning and Facility (ELLF), full of current gerontology material that is used by students, providers, seniors, caregivers, researchers and staff. We are linked electronically with our regional library system which significantly increases our potential for circulation. We continue promotion of this valuable center as a resource for research and information.

**Flexible Senior Services**– This program is funded by the Illinois Department on Aging to provide needed goods and services to seniors eligible for the Community Care Program. Funding is granted to the AAAs who then provides oversight and administration for the programs.

**Publication** -There is a WIAAA publication...Baseline... which is issued quarterly in order to share information on legislative issues and aging trends as well as training opportunities and agency happenings.

**Website** - We have also established a web site for WIAAA. Changes and additions have been made to the site in an effort to assure current information is available to seniors and their families. Residents of our ten-county area are urged to check it periodically for news, advocacy, events and more. The site's address is: <http://www.wiaaa.org>

**Senior Computer Center** - The Greta J. Brooks Elderly Living and Learning Facility (ELLF) has established a computer center, staffed by volunteers, to teach seniors to use computers and be able to access the vast amount of information available on the internet. The ELLF also issues a bi-monthly newsletter.

## **Area Plan Initiatives for 2012 - 2014**

Two initiatives are included in the 2012 – 2014 Area Plan. These initiatives were presented at the Community Input Meetings and have been approved by the Board.

1. **Statewide Initiative: Enhance Illinois Existing Aging and Disability Access Network Through Improved Collaboration and by Adoption of the Coordinated Point of Entry (CPoE) and Aging and Disability Resource Center Standards**
  - Expansion of our current Information and Assistance program into a Coordinated Point of Entry (CPoE) system and ultimately an Aging and Disability Resource Center (ADRC) system will be a multi-step program within the WIAAA service area. The first step, which we are currently instituting, is the requirement for all of our existing Community Focal Points to meet the CPoE Standards by the end of FY 2012. Those standards are:
    1. The CPoE shall provide basic information to clients, their families and the general public on aging topics as well as disability issues. The CPoE shall use the IDoA approved, standardized intake form/process to identify the issues and capacities of the individual beyond the presenting problem, and make appropriate referrals. The CPoE's protocols must be compatible with the

Comprehensive Care Coordination system, which may be the next step for a client (intake) following information and assistance provision. The CPoE shall maintain client confidentiality and respect client privacy when providing service.

2. The CPoE shall have a working relationship and a written agreement with a local disability-related information provider, as well as the major human services providers.
3. The CPoE must have staff with appropriate qualifications, education (A.A., B.S., B.A., LPN, RN, etc.) or experience to be further defined by the Department. The CPoE shall have at least one person with AIRS certification on staff.
4. The CPoE must adhere to a standard, statewide (IDoA Approved) training protocol for training new employees and for updating existing employees.
5. The CPoE shall engage in outreach and public awareness activities in coordination with the SeniorHelpline and be full participants in statewide outreach activities.
6. The CPoE system shall utilize the State-approved brand name and logo.
7. The CPoE shall at least provide full day (at least 7 hours) M-F availability for staffing and information.
8. The CPoE must have three-way calling phone systems for 'warm transfers' of callers.
9. The CPoE must have a disability-accessible environment for meeting customers and the general public.
10. The CPoE must have an internet link to utilize the state Enhanced Services Program (ESP) resource data base, the Benefits CheckUp assessment tool, illinoishousingsearch.org (IDHA), and other web tools as selected in the development of the statewide system.
11. The CPoE shall make unbiased referrals reflecting the best outcomes for the client, and shall make efforts to avoid a conflict of interest.
12. The CPoE must utilize Person-Centered-Planning procedures when advising clients or their families.
13. The CPoE must establish a relationship with an array of formal or informal access points within their catchment area to funnel contacts to the CPoE.
14. The CPoE must train staff in LTC options counseling as a priority, or make appropriate referrals so that clients are carefully prepared to make decisions.
15. The CPoE must provide individual and systemic advocacy to identify problems, barriers and successful best practices.
16. The CPoE must provide assistance in filling out applications, obtaining authorizations and shall follow up with clients to make sure that services are accessed.
17. The CPoE must participate in statewide efforts regarding the continual development process for improving the system and ongoing quality assurance for clients and the system as a whole.
18. The CPoE must participate in the IDoA Disaster Assistance Planning protocol.

19. The CPoE must follow statewide and regional protocol for coordination between the CPoE system and 211 providers, as this system is developed.
  20. The CPoE must demonstrate cultural competency and have measures in place for persons of Limited English Proficiency (LEP).
  21. The CPoE will meet Department reporting requirements and will be subject to IDoA evaluation. The CPoE's will be evaluated as to whether or not the access system is effectively responding to needs of older adults, family caregivers and other consumers, and targeting those in greatest social and economic need.
  22. If at the end of FY 2012 one or more of our CFPs does not meet the CPoE Standards, WIAAA will either work with the agency to quickly meet the required standards or search for another CPoE in the area.
- Another step in the expansion process is the continuation of expanding WIAAA Information & Assistance into an ADRC. Since January of 2011, WIAAA staff has continued to provide traditional Information & Assistance, Caregiver Assistance and Senior Health Assistance Program assistance. Meanwhile, we have started to work with our Care Coordination Unit, Alternatives for the Older Adult, and the Illinois Iowa Center for Independent Living to better coordinate services in Rock Island County and to follow the service provision and reporting procedures as instructed by IDOA. Other organizations and agencies will be included in this planning and development process during the coming year.

As defined by IDOA, ADRCs serve as a highly visible and trusted place to go or call for unbiased information and assistance regarding public benefit programs, community-based services and long-term care support services for seniors, caregivers and individuals with disabilities regardless of income source.

ACRCs are information and access service systems that involve networks of state and community organizations that work together in a coordinated manner to provide consumers with points of entry to public benefit programs, community-based services and long-term support services.

ADRCs are not necessarily located in a single physical place and the program components are not necessarily carried out by a single agency. **The service model of ADRCs is more of a process than an entity.**

The ADRC service model that WIAAA plans to implement is the plan that IDOA recommends. It is the **“no wrong door” approach** where aging and disability providers partner together to enhance and strengthen the present access system.

This brings WIAAA to the third step in developing this initiative. During the entire three-year plan WIAAA will be working to establish the ADRC system throughout our 10 county planning and service area. Major organizations included in this system will be our 11 Community Focal Points and our Care Coordination Unit, Alternatives for the Older Adult. Other participating organizations will be determined as we expand the ADRC design throughout the area. It is during this step that WIAAA will develop its plan to design our

ADRC Standards according to the Aging and Disability Resource Center Standards adopted by IDOA.

1. **Local Initiative: Expand Evidence Based Programs Which Promote Health and Wellness for Older Persons** – Older Americans are disproportionately affected by chronic disease and conditions such as arthritis and heart disease, as well as disabilities that result from injuries such as falls. Twenty-one percent of the population age 60 and older (10.3 million people) have diabetes. Seven of every ten Americans who die each year, more than 1.7 million people, die of a chronic disease.

There is a national movement towards using evidence based programming where outcomes from participation in the programs can be proven. These programs enable older adults to learn and practice healthy behaviors.

WIAAA staff is currently implementing “Matter of Balance” and will continue to expand the program through this Area Plan cycle.

### **Strategies:**

- Continue with the implementation and expansion of Matter of Balance, a falls prevention program, throughout our PSA
- Seek and assess additional evidence-based and health promotion programs
- Provide educational programs through the Living and Learning Series to inform seniors, their caregivers, persons with disabilities and the general public of programs which enable them to take charge of their health
- Empower older persons to adopt healthy behaviors, improve health status and better manage chronic conditions through information and education
- Expand our capacity to deliver evidence-based programs
- Enable older persons to maintain their health, wellness and independence
- Promote increased physical activity, fall prevention and better nutrition for older adults
- Conduct training for local community based providers regarding evidence based programs
- Advocate for increased federal and state funding to support disease prevention and health promotion programs

***The number of people we anticipate serving and the amount of service they will receive in FY 2012***

<i>Services to be Provided</i>	<i># of persons to be served</i>	<i>Federal Units</i>	<i>GRF Units</i>	<i>Total Units</i>
<b>ACCESS SERVICES</b>				
Information and Assistance	10,000	12,750	2,250	15,000
Outreach	4,000	4,100	400	4,500
Transportation	1,500	40,000	10,000	50,000
<b>IN-HOME CARE SERVICES</b>				
Home-Delivered Meals (IIIC-2)	2,000	110,000	115,000	225,000
<b>COMMUNITY SERVICES</b>				
Congregate Meal (IIIC-1)	2,700	110,000		110,000
Legal Assistance	225	1,000		1,000
Multi-Purpose Senior Centers <sup>1</sup>	4,500			
Title IIID – Health Promotion Services	1,000	4,500		4,500
Recreation <sup>2</sup>	100	500		500
<b>CAREGIVER SUPPORT SERVICES</b>				
Respite	175	6,000		6,000
Access Assistance	1,000	1,300		1,300
Training/Counseling/Support Groups	400	1,300		1,300
Supplemental Services	20	20		20
<b>RACE</b>				
White Only	18,750	Low-Income Minority...		359
White of Hispanic Ethnicity	250	Greatest Economic Need...		5,069
American Indian or Alaskan Native	30	Greatest Social Need...		13,124
Asian Only	10	Limited English Proficiency...		61
Black/African American	780			
Native Hawaiian/Pacific Islander Only	3			
Some Other	0			
Two or More Races	40			
<b>TOTAL</b>	19,863			
<b>ETHNICITY</b>				
Hispanic or Latino	250			
Not Hispanic or Latino	19,613			

<sup>1</sup> Multi Purpose Senior Centers are funded through the WIAAA's 11 Community Focal Point base funding system.

<sup>2</sup> Recreation is furnished by one Community Focal Point with some of its base funding.

## **Funding Increases, Decreases & Various Scenarios**

### ***What will the WIAAA do with funding increases or decreases during the year?***

The WIAAA board works diligently and conscientiously to make fair and equitable choices. The Board established a service priority list, and to the extent that it can, it bases funding change decisions on that list.

**Funding Increases** - Should the amount of federal or state funds increase at any time during the year, the amount will be considered by the WIAAA Board at the time of the increase. All specified Title increases will go to that Title. (Title III-B increases will go to Title III-B; Title III-C1 to C1; C2 to C2, and so forth). The Board will take into consideration:

- the current service priorities
- 2012 allocations
- any additional needs-based information we may have received
- any other pertinent data to make an informed decision at the time of the increase

**Funding Decreases** - Should the amount of federal or state funds decrease during the year the WIAAA Board will consider, but will not be bound by, the current service priority list in making its decisions. All specified Title decreases will come from that Title. (Title III-B decreases will come from Title III-B; Title III-C1 from C1; C2 from C2, and so forth.) The Board will then consider what its other options are and make decisions accordingly. (Note: If funds are increased for a service, then later reduced, the WIAAA Board reserves the right to first take funds away from the places it put the increases before reducing services on the priority list.)

## **Other scenarios and funding possibilities**

### **Census Decline**

When the 2000 Census figures were applied to the state funding formula, WIAAA received a substantial reduction in allocated funds due to a smaller percentage of 60+ Illinois seniors living in our area, due to a reduction in the percentage of low income seniors in our area and due to the change of one county from rural to urban status. While 2010 census numbers have not yet been fully released, we expect the trend set in 2000 to be continued. Therefore, we expect to have to again reduce funding allocations due to the census results. At this time, we are considering taking an across the board reduction in allocations per title.

### **Community Based Services**

WIAAA is assuming up to a 20% decrease in General Revenue Funds for community-based services since this is what the governor's proposed budget recommended. The WIAAA Board recommended that \$10,000 be removed from the Legal Services allocation and the remaining cuts be taken equally from Community Focal Point Funding and from Transportation. We assume that an even larger cut would be split similarly among the same services.

### **Home Delivered Meals Funds**

The governor's proposed SFY12 budget included what appears to be an approximate 11% reduction in the state Home Delivered Meal funds. In our 10 county planning and service area we already have 3

counties that currently have a waiting list for home delivered meals and a total of approximately 90 townships where there is no Home Delivered Meal service. Providers of Home Delivered Meals state that they cannot serve additional persons with current funds and will be forced to either serve fewer persons or to serve meals fewer days a week to the same number of people. If the possible reduction in Home Delivered Meal funding becomes a reality, WIAAA will reduce allocations to providers based on 60+ population basis. We will work with each provider to determine the best way for them to cope with that reduction.

### **Family Caregiver Support Program**

The Family Caregiver Support Program came into existence with the reauthorization of the Older Americans Act in 2000. Experience has shown that more funds can be used for assistance, counseling, respite and training. We are also adding Caregiver Legal as a service to be funded in this area plan cycle. Any cuts to the Caregiver program will first come from the Supplemental Gap Services line item. The usage of this program seems to have declined since Flexible Senior Services became a part of the Community Care Program.

### **Senior Health Assistance Program/Medicare Improvements for Patients & Providers (SHAP/MIPPA and MIPPA 2)**

These funds have been used to provide additional outreach in the planning and service area since fiscal 2001. This funding is used to aid in locating individuals eligible for the Circuit Breaker/Illinois Cares Rx pharmaceutical assistance program, Illinois RX Buying Club and I-Save Rx program. We will continue to identify eligible seniors and persons with disabilities to assist them with applications and enrollment. In addition, we will continue to serve seniors, caregivers and persons with disabilities with Medicare Part D. Since 2010 the agency has been receiving some federal funds under the Medicare Improvements for Patients and Providers Act (MIPPA) and in 2011 additional funds (MIPPA 2) to expand our efforts to assist eligible individuals to apply for Medicare Savings Program (MSP), the Low-Income Subsidy Program and the Medicare B Prevention and Wellness benefits.

### **III-E I/I&A Caregiver Information Waiver Request**

Western Illinois Area Agency is seeking to retain a waiver under Title III-E of the Older Americans Act to provide information service directly to caregivers, both those caring for elderly individuals and grandparents raising grandchildren. Title III-E, Caregiver Information funding will be utilized by the WIAAA during this year, to disseminate informational materials to caregivers. This information may be in the form of videos, books, manuals and brochures in addition to personal responses to caregiver's questions. WIAAA has the only gerontology library in the 10-county area. This library has interlibrary and intra-agency loan capabilities.

Total I&A Title III-E budget	\$3,000
Number of persons to be served	100
Number of units to be provided	125

### **III-B I&A Waiver Request**

Western Illinois Area Agency on Aging is seeking a second waiver to directly furnish Information and Assistance. We will continue to seek a waiver to provide general I&A under Title III-B. We anticipate using approximately \$13,000 from administratively mandated direct services to I&A for this service.

Our agency, like several others in Illinois, has purchased ESP software to enhance our I&A database. We are planning to cover the cost of funding ESP access for all of our CFPs. We are continually adding sources of service for elderly persons and for grandparents raising grandchildren. Data entry for additional sources and keeping the information updated is very time consuming. In addition, staff at the area agency receives many calls seeking information and assistance and answers questions directly when appropriate. This is particularly true of Circuit Breaker, Illinois Cares Rx, Medicare D and other pharmaceutical program questions. We also expend time and other resources training I&A workers at our Community Focal Points and providing them with updates of the ESP database. The fact is that our agency has in the past and will continue to provide information and assistance services to seniors, caregivers and the general public in western Illinois. It only makes sense to assign the attendant costs to the service. The area agency budget will not change in total when this waiver is granted. Costs will simply be applied correctly to the activity being supported.

Total I&A Title III-B budget	\$13,000
Number of persons to be served	500
Number of units to be provided	575

### **III-B Education Waiver Request**

Western Illinois Area Agency on Aging is seeking a third waiver to directly provide education to seniors and the general public. The educational series is called “Living and Learning” and is being provided here at our office as well as at public libraries, colleges, township meeting halls, etc. These will be informational sessions designed to aid seniors in making decisions on a variety of topics such as healthy living, nutrition, mental health, personal care, consumerism, legal rights, home maintenance and repair, life enrichment, etc. They will afford seniors and other citizens opportunities to acquire knowledge and skills to enhance their ability to make decisions regarding planning for their future. This series will provide a way for seniors to engage in challenging and stimulating programs which will provide them with seminars, lectures, printed materials and access to important resources for information. Studies show that there are strong correlations between lifelong learning and its affect on aging, indicating that seniors who participate in activities that stimulate their minds will experience a decreased risk of dementia. WIAAA wishes to be at the forefront of offering better mental and physical health to seniors we serve.

Total Education Title III-B budget:	\$8,000
Number of persons to be served:	100
Number of units to be provided:	175

## **The Vision of the Western Illinois Area Agency on Aging for Future Planning and Services**

We envision that the years 2012 – 2014 will be a time when aging service providers will realize that the future is now. The trend across the nation is looking to put the focus of aging network services on individuals, their strengths and their network of family and community support by utilizing “person centered care”. Individuals have a right to a flexible and cost effective plan that allows them maximum choice and control over the supports they need to live in the community. Person centered care provides a process to help an individual formulate a support plan that is directed by the participants or their families or representatives. The goal is to help identify their preferences, strengths, capacities, needs and desired outcomes.

Aging and Disability Resource Centers (ADRC) are now becoming prevalent nationwide, serving as “one-stop-shop” opportunities for seniors, persons with disabilities and their families. The maze of existing public and private services that blanket the area is overwhelming to most people who are seeking help for themselves or their loved ones. It is no longer feasible or reasonable to send a consumer from one place to another to access much needed services and information. The ADRC is geared to providing smooth transitions, referrals or direct assistance whenever possible.

As persons age they risk developing chronic health conditions or experiencing life changing events such as falls. There is a national movement to implement Evidence Based Programs where outcomes can be measured. These programs have been proven to increase self-efficacy, decrease health service utilization and enable participants to adopt healthy self-management behaviors. The Department of Public Health has identified obesity and lack of physical activity as one of the leading causes of illness in the WIAAA 10 county Planning and Service Area.

Technology advances will continue to change the way things are done. Many younger seniors are computer savvy and expect to be able to obtain information via the Internet. We must be ready to make that information available to them. With a state-wide information system, knowledge about services throughout the state could literally be at the fingertips of all Information and Assistance providers. Monitoring of frail, homebound seniors can already be done via cameras, Internet access, etc. Some medical monitoring is also being done electronically. As the demand for new ways of providing services increases, we must be ready to adjust our service provision accordingly.

### **Emerging issues within the PSA include:**

- Transportation in remote rural areas and medical transportation, often out of county;
- Continuing to provide adequate transportation in light of increased fuel and personnel costs;
- Determining how senior centers must evolve in order to attract future seniors/participants;
- Determining how services will need to change and expand as the baby boomers become seniors;
- Seeking and/or creating additional funding sources for services;
- Increasing awareness of availability of services;
- Methods of attracting volunteers to deliver home delivered meals, to assist at meal sites and to provide out-of-county medical transportation.
- Determining creative, more mentally challenging roles for volunteers so they might lend their resources to help fill the gaps in services created by lack of increased funding for services;
- Seniors who receive Title III services may be adversely affected by Title III provider’s dramatic increase in costs in personnel and energy due to the increase in minimum wage, heating costs and gasoline costs while funding has remained level or declined.

These issues will be considered in our planning process and will continue to be addressed by needs assessments, provider best practice sessions at meetings, and technical assistance. WIAAA staff will strive to increase awareness of services through increased community involvement. WIAAA will continue to form relationships with other agencies and organizations in order broaden the realm of services we can provide. The need for volunteers will be addressed by continued coordination with Directors of Volunteers in Agencies (DOVIA) and the Retired and Senior Volunteer Program (RSVP).

***Expenditures for WIAAA Administrative Functions***

Description	FY 2012 (a)
1. Administration	320,894
2. Advocacy	23,988
3. Coordination	29,983
4. Program Development	245,864
5. Subtotal Admin. And Admin. Related Direct Services	620,729
7. Administratively related IIIB Direct Service Waiver/I & A	13,000
8. Administratively related IIIB Direct Service Waiver/Education	8,000
9. Administratively related IIIE Direct Service Waiver/Information	3,000
10. Total Admin., Admin Related Direct Services and Direct Service Waivers	644,729



















***A brief look at the amount and sources of funds the WIAAA uses.*** The table above shows the amount of administrative and administratively related direct service funds the Western Illinois Area Agency on Aging proposes using for FY 2012. These funds are taken primarily from Title III, Title VII and Illinois General Revenue Funds (GRF). They do not include several other small sources of funding administered by our agency such as Title V (a senior employment training program), SESP (a small contract we get to help administer our senior employment program), the Systems Development Contract we use to help administer the Illinois Community Care Program, the funds we use to administer the Elder Abuse Prevention Program, funds to administer the Senior Health Assistance Program, and funds to cover costs for the Flexible Senior Services program. These additional funding sources are shown in the table below. The following table shows the total WIAAA FY 2012 operating budget resources.

Total WIAAA Administrative Budget by Category	Fund Amount
1. Title III Administration, Administratively Related Direct Services, and Direct Service Waivers	644,729
2. Title V Senior Employment Program	25,387
3. Senior Employment Specialist Program	16,717
4. System Development Contract	15,758
5. Elder Abuse Prevention Contract	35,847
6. Senior Health Assistance Program	13,100
7. Flexible Senior Services	15,063
8. Flexible Senior Services	5,700
Total	772,301












***How WIAAA uses its administrative and administratively direct service money.*** The Older Americans Act restricts Area Agency administrative costs to 10% of the Title III allocation and also allows the provision of the “administratively related” direct services of advocacy, coordination and program development. We are allowed to spend up to 20% of the Title III base funding for Administration and Administratively Related Direct Services. We will continue to assure that we do not exceed this level.

Funds developed to administration and administratively related direct services are used to support the operations of WIAAA to be a planning, coordinating and advocating agency for the seniors in Western Illinois as described under the Older Americans Act. The following is a list of those activities.







**Program Development:** Our activities under this administratively related direct service include:

-  We do complete assessment of needs at least once every three years and more intensive, focused assessment of needs in some interim years.
-  We develop recommendations for service priorities and provide our board and advisory council with the information they need to make informed decisions about those priorities.
-  We develop and issue a general Request for Proposal every three years and process applications for extensions in the interim years.
-  We develop and issue other Requests for Proposals as required and/or necessary such as Title III respite, one-time only funding, III-D funds, etc.
-  We process applications for all requests for proposal including scoring, providing information to the board of directors, notifying successful applicants, assisting successful applicants with making necessary corrections to their budgets and plans and issuing Notifications of Grants Awarded and/or Contracts for Service.
-  We monitor all funded providers through on-site visits, correspondence and telephone contact for compliance with all rules and regulations pertaining to Older Americans Act funds and general revenue funds.
-  We assist providers in coming into compliance with rules and regulations in areas where they are experiencing difficulties or are weak.
-  We administer programs such as Title III-D that do not allow for use of dollars for administrative/program development purposes.
-  We develop a complete area plan once every three years and provide extensive interim year addenda to that area plan.
-  We conduct public hearings on the area plan yearly.
-  We process financial and service statistical data and complete all reports required by the Illinois Department on Aging.
-  We comment and testify in writing or orally to various levels of government in response to rule making efforts and other issues of importance to seniors.
-  We fulfill requirements of grants/contracts management in-house including audits, reporting, etc.
-  We provide information to funded providers and others about the needs of older people.
-  We work with providers and others to target older people most in need of service by providing information about the location of such populations and methods of reaching them.
-  We provide technical assistance to the ombudsman and elder abuse prevention programs.
-  We provide and maintain a board/advisory council orientation manual and work with various board and council committees to recruit new members, set agendas, and so forth.
-  We work extensively with local organizations to develop meaningful caregiver training.

**Coordination:** Our activities under this administratively related direct service include:

-  We developed and maintain a web page which provides information about available services in our ten county planning and service area, covers a number of important advocacy concerns. The site's address is <http://www.wiaaa.org>
-  We publish an agency newsletter quarterly ...*Baseline*... as a management tool for providers and a vehicle for information to the network we serve.
-  We maintain the Greta J. Brooks Elderly Living and Learning Facility (ELLF), a library devoted to gerontology and the needs of older people, as well as a computer learning center for seniors.
-  We update and disseminate information in our Elderly Services Program (ESP) resource data base.
-  We maintain an active role in the communities we serve by attending local community service group meetings and working with non-funded providers of service
-  We nominate people for special awards at the request of the Department and the Governor's office.
-  We attend meetings as required or necessary on a variety of topics ranging from elder abuse, to training, to department/association meetings, to disaster assistance meetings, etc.
-  We are involved with other special community projects, such as Senior Olympics and nominations for special awards.
-  Our agency and staff are used as an internship site for Gerontology students and others in related fields.
-  We are involved with special projects such as disaster coordination for seniors with local communities and other agencies.
-  WIAAA hosts a life long learning opportunity through its Living and Learning series covering a variety of issues seniors, caregivers and the public need/want to know about.

**Advocacy:** Our activities under this administratively related direct service include:

-  We advocate on behalf of older people by reading and responding to proposed legislation, taxing initiatives, health care reform, etc. at the federal, state and local level. In addition, we advocate by maintaining contact with and sponsoring legislative forums for federal, state and local elected officials.
-  We coordinate special advocacy campaigns with our Advisory Council, Board, and other professionals in the field.
-  We provide advocacy training for our Advisory Council and Board.
-  We are actively involved with state associations and coalitions.
-  We develop and disseminate material to providers, seniors and other interested people about particular issues.
-  We developed and maintain a web page that details advocacy issues.

This is a brief list of some of the administrative and administratively related direct service activities of WIAAA. We continue to be a coordinating presence in the broad senior network. The area agency expects to increase the efficiency and cost effectiveness of service delivery through these activities. We also continue our obligation to be a focal point for advocacy activities through review of and response to local, state and federal policies and legislation that may have an impact on seniors in this area. The agency serves as a point of contact and reference for organized advocacy activities. The area agency's expected long-range outcome is an adequate service support network with broad social and political support.

Finally, development of programs has been and continues to be a high administrative priority for WIAAA. The agency consistently works to strengthen management and delivery capabilities at the service provider level with the ultimate goal of an efficiently operating and responsive service delivery system for the seniors of western Illinois.

**FY 2012 ALLOCATIONS BY COUNTY**

SERVICE	LEGAL	TRANS.	COMM. FOCAL POINTS	Senior Health Assistance Program	IIIE Family Caregiver	CONG MEALS	H.D. MEALS	RESPITE (1)	IIID (2)	
BUREAU	-	4,401	22,175	43,023	9,233	5,000	43,128	66,771	7,754	2,284
HENDERSON	-	1,010	8,943	43,023	9,233	5,000	13,368	26,500	1,780	909
HENRY	-	5,846	27,815	43,023	9,233	5,000	55,812	83,935	10,301	2,869
KNOX	-	6,844	31,710	43,023	9,233	5,000	64,573	95,791	12,059	3,274
LASALLE	-	12,773	59,853	86,046	18,466	10,000	116,621	166,223	22,508	6,177
MCDONOUGH	-	3,231	17,609	43,023	9,233	5,000	32,859	52,875	5,693	1,809
MERCER	-	1,946	12,595	43,023	9,233	5,000	21,581	37,614	3,429	1,289
PUTNAM	-	698	7,725	43,023	9,233	5,000	10,628	22,793	1,230	783
ROCK ISLAND	-	16,096	72,822	63,024	12,096	7,500	145,790	205,694	28,363	7,374
WARREN	-	2,156	13,414	43,023	9,233	5,000	23,424	40,108	3,799	1,374
<b>TOTAL</b>		<b>55,000</b>	<b>274,661</b>	<b>493,254</b>	<b>104,426</b>	<b>57,500</b>	<b>527,784</b>	<b>798,305</b>	<b>96,916</b>	<b>28,142</b>

Caregiver Assistance, Supplemental, Training, Support Groups, and Counseling are not allocated to specific counties. Funds are used to establish a regular presence in all 10 counties.  
**\$107,623 Total Funds Available.**

(1) III-E Respite funds are awarded on a noncompetitive basis to providers who meet or exceed the requirements for either in-home respite, adult day care respite, or institutional respite. Older persons receive respite allowances through approval by the case coordination unit which attempts to use the funds according to individual need and the allocations.

(2) IIID funds are allocated on a noncompetitive basis to Community Focal Points for the provision of health promotion and disease prevention activities at the local level. Medication Management is \$10,694 for all 10 counties by Alternatives for the Older Adult.

TITLE III OMB	TITLE VII OMB	TITLE VII EA
Ombudsman and Elder Abuse funds are not allocated to specific counties. Funds are used to establish a regular presence in all nursing homes in the ten-county area. \$93,289 total funds are available.		

<b>Transportation LaSalle County</b>					
Provider	POP	POP %	Base	POP %	TOTAL
VAC	18,791	81.26%	5,000	40,510	45,510
Mendota	4,334	18.74%	5,000	9,343	14,343
<b>Total</b>	<b>23,125</b>	<b>100.00%</b>	<b>10,000</b>	<b>49,853</b>	<b>59,853</b>

<b>SHAP funding LaSalle County</b>			
Provider	Base	POP %	Funds
Bridges Center	11375	81.26%	9,233
MASS	11375	18.74%	9,233
<b>TOTAL</b>			<b>18,466</b>

<b>IIID, LaSalle County</b>			
Provider	Base	POP %	Funds
Bridges Center	500	81.26%	4,707
MASS	500	18.74%	1,470
<b>Total</b>			<b>6,177</b>

**PROJECTED REVENUE FOR FISCAL 2012**

SOURCE - Letter TBD	FY 2012 Allocation Amounts								Comparison		
	Title IIB Ombudsman	IIB & Comm Based Services	IIC1	IIC2	IID	III	Title VII Eld. Abuse (E)	Title VII Ombud (E)	TOTAL	FY11 PID	DIFF
Federal Allocations	38798	688034	879638	419724	38836	299487	6911	34093	2405521	2405521	0
Transfers		263891	-263891						0		0
State Funds	21466	225738		467282					714486	831731	-117245
"CBS="		58954							58954	73692	-14738
FY11 Carryover (Allocated)		8937							8937		8937
Total Available	60264	1245554	615747	887006	38836	299487	6911	34093	3187897	3310944	-123047

**ALLOCATIONS FOR FISCAL 2012**

APPLICATIONS	Title IIB Ombudsman	IIB	IIC1	IIC2	IID	III	Title VII Eld. Abuse (E)	Title VII Ombud (E)	TOTAL	FY11 PID	DIFF
Access Assistance/AFoA						10000			10000	10000	0
Supplemental						26628			26628	26628	0
Legal		50000				5000			55000	60000	-5000
Community Focal Points		493254							493254	505817	-12563
Access Assistance/CFP						57500			57500	57500	0
Transportation		274661							274661	300724	-26063
Congregate Meals			527784						527784	527784	0
Home Delivered Meals				798305					798305	852702	-54397
Health Promotion/Disease Prev.					28142				28142	28142	0
Medication Management					10694				10694	10694	0
Respite		500				96416			96916	96416	500
Ombudsman	56385							30684	87069	87439	-370
Elder Abuse							6220		6220	6220	0
Caregiver Training						2160			2160	7160	-5000
Caregiver Support Groups						10000			10000	10000	0
Caregiver Counseling						58835			58835	58835	0
Gap Filling									0	0	0
AAA Education		8000							8000	8000	0
AAA I & A		13000				3000			16000	16000	0
AAA Budget	3879	406139	87963	88701		29948	691	3409	620729	640882	-20153
Total Proposed Applications	60264	1245554	615747	887006	38836	299487	6911	34093	3187897	3310944	-123046

Reserved for Contingencies	0	0	0	0	0	0	0	0	0	0	0
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10694 Med Mgt

\* Increased amounts for Family Caregiver Centers are contingent on funding