

# 2021-2022 Area Plan Program Module

AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC.

PSA: <u>9</u>\_\_\_

For the Period January 1, 2020 - December 31, 2022 Submitted <u>September</u>, 2019

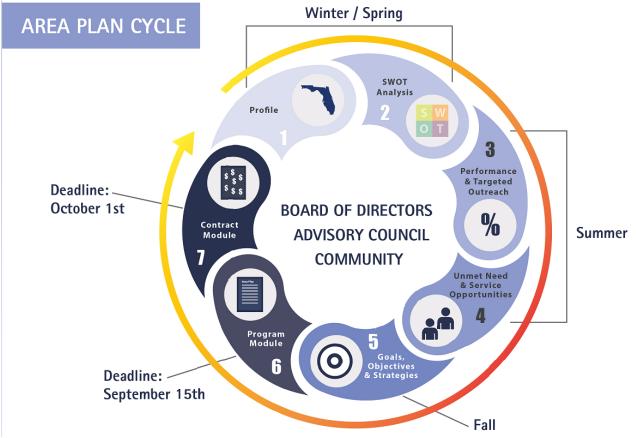
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# Introduction to the Area Plan

The Area Plan describes in detail the specific services to be provided to the population of older adults residing in a given Planning and Service Area (PSA). The plan is developed from an assessment of the needs of the PSA as determined by public input that involves public hearings, the solicited participation of those affected and their caregivers, and service providers. The plan also states the goals and objectives that the Area Agency on Aging (AAA) and its staff and volunteers plan to accomplish during the planning period.

The Area Plan is divided into two parts, the Program Module and the Contract Module. The Program Module includes a profile of the PSA; a SWOT (Strengths, Weaknesses, Opportunities, and Threats) analysis; an analysis of performance and unmet needs; the service plan including goals, objectives, and strategies; assurances; and other elements relating to the provision of services.

The Contract Module includes the elements of the plan relating to funding sources and allocations, as well as other administrative/contractual requirements, and otherwise substantiates the means through which planned activities will be accomplished. In planning for the production of the Area Plan, AAAs should consider the following Area Plan development cycle.



This recommended planning cycle features the development of the PSA Profile, followed by the completion of the comprehensive SWOT analysis during the winter and spring of the Area Plan submission year. The summer should feature the development of the Performance and Targeted

Outreach and Unmet Need and Services opportunities components of the Area Plan. With the completion of these components, the AAA will be prepared to address the Goals, Objectives, and Strategies component of the Area Plan.

With the completion of each stage in development of the Area Plan, the AAA is required to submit the respective components to Department of Elder Affairs (DOEA) through their contract manager for review and feedback.

In the spring of each year, the Department of Elder Affairs will publish a Notice of Instruction (NOI). This NOI will include the Area Plan Program Module Template, Area Plan Contract Module Template, indicator comparative performance file, and a table of due dates for submission of the Area Plan Cycle components.

# Program and Contract Module Certification

ACENCY ON ACINC (AAA) INFORMATION 

AREA AGENCY ON AGING (AAA) INFORMATION:
Legal Name of Agency: <u>Area Agency on Aging of Palm Beach/Treasure Coast, Inc.</u>
Mailing Address:
Telephone: (561) 684 - 5885 FEDERAL ID NUMBER: 65-0087858
CERTIFICATION BY BOARD PRESIDENT, ADVISORY COUNCIL CHAIR, AAA DIRECTOR:
I hereby certify that the attached documents:
Reflect input from a cross section of service providers, consumers, and caregivers who are representative of all areas and culturally diverse populations of the Planning and Service Area (PSA).
1% Incorporate the comments and recommendations of the Area Agency's Advisory Council.
IX Have been reviewed and approved by the Board of Directors of the Area Agency on Aging.
Additionally:
Signatures below indicate that both the Program Module and the Contract Module have been reviewed and approved by the respective governing bodies.
I further certify that the contents are true, accurate, and complete statements. I acknowledge that intentional misrepresentation or falsification may result in the termination of financial assistance. I have reviewed and approved this 2020-2022 Area Plan.
President, Board of Directors
Name: Col Jose R Thomas-Richards Signature: Col Jose R Thomas-Richards
Date: 10/8/2019
Advisory Council Chair
Name: Bree Gordon Lukosavich Signature: PD4
Date: _10/1/2019
Date. <u>Toy ty 2019</u>
Area Agency on Aging Executive Director
Name: Dwight Dchenette Signature: Lholl
Date: 10/2/2019
Date. Jurater (
Signing this form verifies that the Board of Directors and the Advisory Council and AAA Executive Director understand that they are responsible for the development and implementatio of the plan and for ensuring compliance with Older Americans Act Section 306.

	Date: 10/1/2019	
	Area Agency on Aging Executive Director Name: <u>Dwight Dchenette</u> Signature: <u>Pchen</u> Date: <u>10/2/2019</u>	Al-
	Signing this form verifies that the Board of Directors and the Advisory Council a Executive Director understand that they are responsible for the development ar of the plan and for ensuring compliance with Older Americans Act Section 306.	nd implementation
	PSA 9 2020 - 2022 Area Plan Date: <september, 2019=""></september,>	iii   Page
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#### AAA Board of Directors

## Membership Composition:

The Board of Directors shall consist of a membership of at least 15 members, but not to exceed 19, including the immediate past Chair of the Board.

The Board membership shall, as nearly as possible, be representative of age, gender, race and ethnic populations and counties served in PSA9, and be comprised of members having a variety of skills, talents, experience and interests.

### Frequency of Meetings:

Regular meetings of the Board shall be held as necessary, on a bi-monthly basis with a minimum of five (5) meetings in the fiscal year, at a time and place established by the board.

## Officer Selection Schedule:

The Executive Committee will serve as the Nominating Committee and shall present a slate of Officer Nominations in writing to all Directors during the third quarter of the fiscal year. Other nominations may also be made from the floor. Nominations from the floor must be of persons who have expressed a willingness to serve if elected.

# AAA Board Officers:

Title	Name	Term
Chair	Colonel Jose Thomas-Richards	09/2019-12/2019
Vice Chair	Open	
Treasurer	Kathryn Perrin	09/2019 – 12/2019
Secretary	Jim Cioffi	09/2019 –12/2019
Immediate Past Chair	James Sugarman	01/2019 –09/2019
Other: (Member at Large)	Barbara Pembamoto	01/2019 –12/2019
Other: (Member at Large)	Lesley Vestrich	01/2019 –12/2019

# AAA Board of Directors Membership:

Name	Occupation / Affiliation	Home Address (include county)	Phone Number	Member Since	Current Term of Office
Abarbanell, Neal	Physician	9556 Doubloon Drive Vero Beach, FL 32963 Indian River County	305-522-3572	2008	01/2019- 12/2019
James Cioffi, Esq.	Attorney, Probate & Estate Planning	250 Tequesta Drive Tequesta, FL 33469 Palm Beach County	561-747-6000 Ext. 113	2011	01/2019- 12/2019
lan Cordes	Health Care Marketing	400 Executive Center Dr. Ste. 208 West Palm Beach, FL 33401 Palm Beach County	561-689-6321	2017	01/2019- 12/2019
Arnold Gaines, Esq.	Attorney, Litigation Employment Law	P.O. Box 37 Fort Pierce, FL 34954 St. Lucie County	772-214-2512	2016	01/2019- 12/2019
Barbara Pembamoto	Program Planning/Nonprofit Mgmt/Community Outreach	618 Third Street Lake Park, FL 33403 Palm Beach County	561-951-6626	2012	01/2019- 12/2019
Kathryn Lewis Perrin	Attorney – Elder Law & Estate Planning	252 Honeysuckle Dr. Jupiter, FL 33458 Palm Beach County	561-721-0600	2017	01/2019- 12/2019
Sheldon Siskin	Retired - Business Executive – Insurance	6858 Woodbridge Drive Boca Raton, FL 33434 Palm Beach County	561-488-9220	2017	01/2019- 12/2019
Jose Thomas- Richards	Col. US Army Retired Retired Physician	17145 Bay Street Jupiter, FL 33477	561-222-4886	2014	01/2019- 12/2019

		Palm Beach County			
Lesley Vestrich- Hudanish, CSA	Business Development/ Management	4606 SE Manatee Lane Stuart, FL 34997 Martin County	772-529-8327	2011	01/2019- 12/2019
Monica Wilson	Gerontology, Program/ Policy Development Assisted Living Delivery, Regulation, Compliance, Policy	19227 Caribbean Court Tequesta, FL 33469 Palm Beach County	954-646-9646	2011	01/2019- 12/2019
James Sugarman	Life Coach/Nonprofit Management	248 North Country Club Dr. Atlantis, FL 33462 Palm Beach County	561-762-3818	2011	01/2019- 12/2019

# AAA Advisory Council

# Council Composition:

The Advisory Council shall consist of a membership of at least 15 members, but not more than 30 members.

Every county in PSA 9 shall be represented by a minimum of one Council member, except for Palm Beach County which shall have a minimum of seven members. At least 50% of the Advisory Council shall consist of persons age 60 or older, including persons of diverse backgrounds who are eligible to participate in Older American's Act services.

Membership shall, as nearly as possible, represent of the demographics of PSA 9.

## Frequency of Meetings:

The regular meetings of the Advisory Council shall be held at every other month at the Center's West Palm Beach office. Members and guests may participate via teleconference.

Special meetings may be called by the Chair. Written notice and the purpose of the special meeting shall be sent to each member four days prior to the special meeting.

The Advisory Council shall hold in concert with the Center's Board of Directors an Annual Meeting for such business as may be considered.

## Member Selection Schedule:

Members shall be elected by a majority vote of those present at an appropriate Advisory Council meeting from a slate recommended by the Membership Committee which shall consider input from persons within PSA 9. If a vacancy occurs in a mandated Council seat before July, the seat shall be filled for the remainder of the calendar year by an interim voting member by a vote at a regular meeting on the recommendation of the Membership Committee. The official term shall begin January of the following year. If a vacancy occurs in a mandated Council seat after July, the position will be held open until January of the following year.

## Service Term(s):

New Members to the Advisory Council will be approved by the Advisory Council to a three year term. At the expiration of each term, Advisory Council members may recommit for an additional three year term to the Advisory Council. There is no limitation on the number of terms that Advisory Council members may serve as long as they are performing their role in an exemplary manner.

# AAA Advisory Council Members:

Name	Occupation / Affiliation	Home Address (include county)	Phone Number	Member Since	Current Term of Office	Age	Race	Eth.
Jennifer Braisted	Public Policy Manager, Alzheimer's Association	3333 Forest Hill Blvd West Palm Beach, FL – Palm Beach Co	561.706.2043	2016	1 <sup>st</sup> term	30-40	Caucasian	
John Dalton	CEO/Founder OptimumRTS; Medical Equipment Specialist	3749 SW Quanset Terrace, Stuart, FL – Martin Co.	<mark>561.408.2192</mark>	<mark>2020</mark>	1 <sup>st</sup> Term	<mark>65-70</mark>	Caucasian	
Steve Delach	Community Outreach; senior advocate	5100 Cresthaven Blvd, West Palm Beach, FL – Palm Beach Co	561.964.2828	2015	2 <sup>nd</sup> term	65 - 70	Caucasian	
Sid Estrada	ED Phil-American Cultural Foundation	120 SW 21 <sup>st</sup> Terrace, Okeechobee, FL – Okeechobee Co	863.610.0515	2018	1 <sup>st</sup> term	70-75	Hispanic	
Kathleen Gannon	Associate Rector, St. Paul's Episcopal Church	188 S Swinton, Delray Beach, FL– Palm Beach Co	561.276.4541	2015	2 <sup>nd</sup> term	65 -70	Caucasian	
Bree Gordon	Neurologic Music Therapist	2550 Canterbury Drive S, West Palm Beach, Fl – Palm Beach Co	315.945.7018	2011	3 <sup>rd</sup> term	30 - 35	Caucasian	
Scott Greenberg	Home Health Care Management	4001 N Ocean Blvd, Boca Raton, FL – Palm Beach Co	561.706.5157	2011	3 <sup>rd</sup> term	65 - 70	Caucasian	
Patricia Isaacs	Retired Restaurant Management/ Former Foster Grandparent Volunteer	2656 Sw Fair Isle Road, Port Saint, Lucie, FL – St. Lucie Co	<mark>561.353.8438</mark>	<mark>2020</mark>	1 <sup>st</sup> Term	<mark>65-70</mark>	African American	
Jeffrey Lane	Finance /Management/ Project Management	113 SW Sea Lion Road, Port Saint Lucie, FL- St. Lucie Co	<mark>561.376.5036</mark>	<mark>2020</mark>	1 <sup>st</sup> Term	<mark>46-59</mark>	Caucasion	

Marshall McDonald	Elder law	14814 Drafthorse Lane, Wellington, FL – Palm Beach Co	561.748.2233	2010	3 <sup>rd</sup> term	60 - 65	Caucasian	
Alex Modric	Project Management/Home Modifications	9469 Deer Creek Circle, Lake Worth, FL- Palm Beach Co	561.236.9384	2020	1 <sup>st</sup> Term	30-35	Hispanic	
Jack Nicol	Home Health Care Management	725 N A1A, Jupiter, FL – Palm Beach Co	561.741.1200	2011	3 <sup>rd</sup> term	65 - 70	Caucasian	
Carolyn Norton	Elder law	2770 Indian River Blvd, Vero Beach, FL – Indian River Co	772.257.5751	2013	2 <sup>nd</sup> term	60 - 65	Caucasian	
Janie Peters	Retired educator; senior advocate	1600 44 <sup>th</sup> Street, West Palm Beach, FL - Palm Beach Co	561.844.8546	2011	3 <sup>rd</sup> term	65 - 70	Other	
Maite Reyes- Coles	Coalition for Independent Living Options	6800 Forest Hill Blvd, West Palm Beach, FL – Palm Beach Co	561.966.4288	2016	1 <sup>st</sup> term	45-50	Hispanic	
Emily Robarts	Senior advocate	6223 Pond Tree Court, Greenacres, FL – Palm Beach Co	561.432.9014		Honorary	75 - 80	Caucasian	
Kelly Wilson	FALA/ Senor Living	2170 Polo Gardens Drive, #108, Wellington, FL- Palm Beach Co	561.373.3888	2010	3 <sup>rd</sup> term	55-60	Caucasian	

\*\*Removed Carole Seigworth\*\*

# Funds Administered and Bid Cycles

The following funds are administered by Area Agency on Aging of Palm Beach/Treasure Coast, Inc. for PSA 9. The current and anticipated Bid Cycles are provided for those programs that are administered through competitively procured subcontracts.

			Current	Bid Cycle	Anticipate	d Bid Cycle
F	unds Administered	1	Published	Current Year of Cycle	Ant. Pub.	Ant. Award
H	III B	$\boxtimes$	06/2015	4	06/21	09/21
Is Ac	III C.I	$\boxtimes$	06/2015	4	06/21	09/21
ricar A)	III C.II	$\boxtimes$	06/2015	4	06/21	09/21
Americ (OAA)	III D	$\boxtimes$	06/2015	4	06/21	09/21
Older Americans Act (OAA)	III E	$\boxtimes$	06/2015	4	06/21	09/21
0	VII*	$\boxtimes$				
le Je	ADI	$\boxtimes$	10/2014	5	10/2020	01/2021
General Revenue	CCE	$\boxtimes$	10/2014	5	10/2020	01/2021
Ge Re	HCE	$\boxtimes$	10/2014	5	10/2020	01/2021
	ADRC*	$\boxtimes$				
	AoA Grants					
	ЕНЕАР	$\boxtimes$	10/2014	5	10/2020	01/2021
Other	LSP*	$\boxtimes$				
Gt	NSIP*	$\boxtimes$				
	RELIEF*	$\boxtimes$				
	SHINE*	$\boxtimes$				
	USDA*	$\boxtimes$				

\* This fund does not have an associated Bid Cycle.

# **Resources Used**

- American Community Survey
- AoA Special Tabulation Data 60+
- Bureau of Economic and Business Research (BEBR)
- Economic and Demographic Research (EDR)
- DOEA Client Satisfaction Survey
- DOEA Elder Needs Index Maps

- ☑ Targeting Performance Maps
- □ National Association of States United for Aging and Disability (NASUAD)
- Assessing the Needs of Elder Floridians 2016
- ⊠ Other Palm Beach County Business Development Board, Shimberg Center for Housing Studies
- ⊠ Other 2018 Community Needs Assessment conducted by The Economic Opportunities Council of Indian River County, National Council on Aging Elder Index, America's Health Rankings

BRFSS Survey Data 

DOH Florida Charts

⊠ American FactFinder

- DOEA County Profiles, WOW Index
- □ NAPIS
- ⊠ Targeting Data and Dashboard

# 2021-2022 Area Plan Program Module

# **Executive Summary**

The Area Agency on Aging of Palm Beach and Treasure Coast, Inc. is pleased to present this EXECUTIVE SUMMARY for the 2020-2022 Area Plan. Planning and Service Area 9 includes Palm Beach County, Indian River County, Martin County, Okeechobee County and St. Lucie County. In close partnership with the Department of Elder Affairs, the Area Agency on Aging of Palm Beach/Treasure Coast dba Your Aging & Disability Resource Center administers Older Americans Act, General Revenue, private grants and donations for service provision and access to information, resources and assistance. The service network includes more than 15 contracted providers.

Your Aging & Disability Resource Center (the Center) is a private, non-profit organization that provides services to and advocacy for seniors, adults with disabilities and those who care for them. With more than 553,000 individuals who are 60+ residing within the five counties, Your Aging & Disability Resource Center is the largest Area Agency on Aging in the state of Florida in terms of its older population. Established in 1988, the Area Agency on Aging was designated as an "Area Agency on Aging" (AAA) by the Florida Department of Elder Affairs in accordance with the Older Americans Act and as a fully implemented "Aging Resource Center" in 2008. As a "fully operational" Aging Resource Center, Your Aging & Disability Resource Center committed itself to major systems and staffing changes to implement the Helpline service. Last year the Helpline handled over 170,000 calls throughout the planning and service area.

In 2012 the Department of Elder Affairs expanded the designation of Your Aging Resource Center to an Aging & Disability Resource Center. This designation reflects the expansion of information and referral services to adults with disabilities.

Whereas our focus for service delivery will continue to prioritize those in greatest economic or social need, with particular attention to low income minority individuals, the role of Your Aging & Disability Resource Center has expanded to include person-centered access to information and resources to persons of all ages with respect to individual service needs and/or related caregiver concerns. Along these lines, Your Aging & Disability Resource Center recognizes the need for people of all ages to prepare for retirement and old age while helping them understand the service infrastructures that are available to support people as they age.

The four years that have passed since the completion of the last full cycle area plan have shown remarkable changes. The 60+ population in our Planning and Service Area has grown by nearly 6% from 2015 to 2017. Population projections in this plan reflect increases of more than 100% by 2030 for some population segments that we serve.

Organizational accomplishments since the previous plan are listed below.

Since 2017 the organization:

• implemented agency-wide quality measures

- launched the Veterans Independence Program. In partnership with the West Palm Beach Veterans Administration Medical Center, the Center launched the Veterans Independence Program (VIP). VIP allows qualifying veterans the opportunity to recruit and hire their caregivers. Ultimately this program allows veterans to live more independently in their communities avoiding costly nursing home placement.
- implemented the WellMed Crisis Solutions program which offers case management and financial assistance to support a senior with a crisis. We assisted 31 clients with crisis issues from rent assistance, move in deposits, replacement of electrical boxes, replacement water heaters, refrigerators, extermination and more.
- contributed data to Palm Beach County's Metropolitan Planning Organization's US 1 Multi-Modal Corridor Study Health Impact Assessment.
- participated in 7 senior focus groups with Palm Beach County Community Services that showed the need for food and affordable housing among the top needs for seniors.
- created data by zip code for each of our counties to capture information on the 60+ population including disabilities, clients active and waitlisted in our programs, income, hunger issues and crime.
- successfully increased the number of referrals for SNAP in targeted zip codes with a flyer specifically designed for seniors through the Senior Hunger Relief Workgroup Committee
- implemented Older Floridians Legal Assistance Program IS Reporting
- added 10 new senior communities to our requests to become a senior distribution site in case of disaster
- implemented new monitoring requirements for random invoice testing and review of program income and match
- provided direct assistance to more than 7200 senior crime victims in 2017 who collectively lost more than 15 million dollars, primarily to fraud and exploitation. Victims receive an array of services in order to assist them to regain their dignity and sense of security and to remain in the least restrictive setting for as long as possible.
- celebrated its 29<sup>th</sup> and 30<sup>th</sup> anniversaries at the Circle of Care Celebration Luncheon at the Kravis Center Cohen Pavilion. Featured guests have included newly appointed Assistant Secretary for Aging Lance Robertson; Dr. Jamie Huysman, Vice President of Provider Relations and Government Affairs at WellMed Medical Management, well-known for his work fiercely advocating on behalf of family and professional caregivers; and, Jeff Johnson, AARP Florida State Director.
- was named a winner of the 2017 When Work Works Award.
- Was named a winner of the 2018 Top Places to Work Award
- created a partnership with Catholic Charities to provide Powerful Tools for Caregivers through their faith based community nurses in both Palm Beach County and the Treasure Coast.
- completed the requirements so that two staff members now carry the designation of master trainers for Powerful Tools for Caregivers.
- completed requirements to certify two Master Trainers and Chronic Disease Self-Management and Diabetes Self-Management programs in West Palm Beach and two Master Trainers in the Treasure Coast.
- created a collaboration with Fearless Caregiver Conference by which the Healthy Living Center of Excellence presented the PTC program at each of their conferences locations in Palm Beach County and the Treasure Coast.

# Mission and Vision Statements

The Mission Statement defines the purpose and primary objectives of the AAA. The Vision Statement describes what the AAA intends to accomplish or achieve in the future.

# Mission:

Our MISSION is to promote, support and advocate for the independence, dignity and wellbeing of seniors, adults with disabilities, and those who care for them in a manner that values diversity, reflects the communities we serve and embraces the collaboration of the aging network.

# Vision:

Your Aging & Disability Resource Center is the recognized gateway to services for seniors, adults with disabilities and those who care for them.

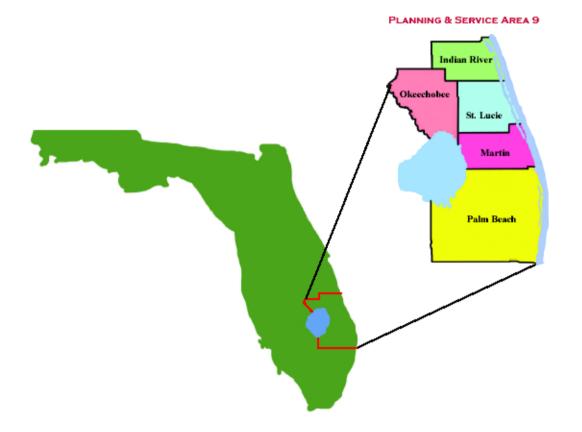
# <u>Profile</u>

This section provides an overview of the social, economic, and demographic characteristics of the PSA. The focus of this overview includes consideration of those geographic areas and population groups within the PSA of low-income older individuals, including low-income minority elders, as well as elders with limited English proficiency and those residing in rural areas.

# Identification of Counties:

PSA 9 encompasses five counties of Palm Beach County, Okeechobee County and the Treasure Coast Counties of Indian River, Martin, and St. Lucie. A map depicting both the counties within PSA 9 and the relation of PSA 9 to the state of Florida is pictured below. Four of the five counties (Palm Beach, Martin, and Indian River are bordered on their East coast by the Atlantic Ocean. Okeechobee County is located on the banks of Lake Okeechobee, the second largest body of freshwater in the United States.

#### PLANNING & SERVICE AREA 9 IN RELATION TO STATE OF FLORIDA



#### **INDIAN RIVER COUNTY**

Indian River County is bordered on the north by Brevard County, on the west by Okeechobee and Osceola Counties, on the south by St. Lucie County, and on the east by the Atlantic Ocean. It is the northernmost county in PSA 9 and is approximately 503 square miles in geographic size.

#### **MARTIN COUNTY**

Martin County is 100 miles north of Miami and 250 miles south of Jacksonville. It is bordered to the north by St. Lucie County, the west by Glades County, the south by Palm Beach County, and the east by the Atlantic Ocean. It is approximately 556 square miles in size geographically.

#### **OKEECHOBEE COUNTY**

Okeechobee County is located on the northern banks of Lake Okeechobee, 70 miles northwest of West Palm Beach and 110 miles south of Orlando. Okeechobee is bordered to the north by Indian River and Osceola Counties, the west by Highlands and Glades Counties, the south by Palm Beach County and the east by St. Lucie and Martin Counties. It is approximately 774 square miles in size geographically. Okeechobee County is the smallest county in the PSA in terms of population.

#### PALM BEACH COUNTY

Palm Beach County is bordered on the north by Martin County, on the west by Hendry County and Lake Okeechobee, on the south by Broward County, and on the east by the Atlantic Ocean. It is the most southern county in Planning and Service Area 9. At 2,023 square miles, Palm Beach County is the largest county geographically in the State of Florida and is approximately the same size as the entire state of Rhode Island. Its sheer size presents unique challenges to service delivery.

#### ST. LUCIE COUNTY

St. Lucie County is bordered on the north by Indian River County, on the west by Okeechobee County, on the south by Martin County, and on the east by the Atlantic Ocean. It is approximately 572 square miles in size geographically. Incorporated in 1905, St. Lucie County is included in the Port St. Lucie, FL Metropolitan Statistical Area, which is also included in the Miami-Fort Lauderdale-Port St. Lucie, FL Combined Statistical Area. It is comprised of the City of Fort Pierce (county seat), City of Port St. Lucie and St. Lucie Village.

# Identification of Communities:

## INDIAN RIVER COUNTY COMMUNITIES

**Indian River County**, is made up of five districts and is governed by a five-member commission elected countywide. Within the county are five incorporated municipalities. Following is a brief summary of the major communities in Indian River County.

#### Vero Beach

The City of Vero Beach is the county seat and the largest incorporated municipality with an estimated population of more than 15,220. Greenery, open space, unspoiled beaches, and ocean vistas characterize this community which is the commercial and cultural center of the county. Originally a stop on the Florida East Coast Railroad, Vero Beach was incorporated in 1910. The city is under a council-manager form of government.

#### Sebastian

At the northern end of the county, Sebastian is a community of an estimated 22,000 people. It grew up around the fishing industry and today is enjoyed by residents as well as visitors for surfing, fishing, swimming, boating and other water-oriented activities. An incorporated city, Sebastian has the friendliness of a small town. It has a council-manager form of government.

#### Fellsmere

A rural town of an estimated 3,813 residents in northwestern Indian River County, Fellsmere was once a center for growing sugar cane and pineapple. Today, the community's economy is based on citrus crops and cattle. It is incorporated and has a council-mayor form of government.

#### **Indian River Shores**

Between ocean and river north of Vero Beach, Indian River Shores is an exclusive residential community with an estimated population of more than 3,901, many of whom are retired corporate executives. It is incorporated and has a council-manager form of government.

#### Orchid

Orchid, with its population of about 140, is a new, luxury, barrier island community. It is incorporated and has a council-manager form of government.

#### MARTIN COUNTY COMMUNITIES

Most of Martin County is unincorporated with Stuart being the largest municipality and the small communities of Ocean Breeze Park, Sewall's Point, and Jupiter Island being the only other incorporated municipalities. Martin County is very rural, although significant growth in terms of housing starts has taken place in the central sector of the county, particularly in Palm City and Hobe Sound. The three primary population centers of Stuart, Sewall's Point and Jupiter Island are along the eastern coastal corridor. Indiantown is the only community in the western part of the county and its population is small, largely migrant, and low-income. Martin County is known for its policies of controlled development – there is little urban or suburban sprawl and the result is limited overall population growth from year to year.

#### **OKEECHOBEE COUNTY COMMUNITIES**

The City of Okeechobee is the major population center in Okeechobee County with Fort Drum to the northwest being the only other small outlying town. This is a highly rural county.

#### PALM BEACH COUNTY COMMUNITIES

The largest city both in area and population in Palm Beach County is West Palm Beach, which covers 52 square miles and has an incorporated population of 101,668. Boca Raton is second with 85,413 residents, followed by Boynton Beach, 68,741, Delray Beach, 61,495, and Wellington, 57,514. The county's smallest town in population is Cloud Lake with 133 residents. The smallest municipalities in land area are Briny Breezes and Cloud Lake, both at .06 of a square mile.

#### ST. LUCIE COUNTY COMMUNITIES

The two largest cities in St. Lucie County are Fort Pierce and Port St. Lucie. Fort Pierce and St. Lucie County continue to lead the State of Florida in grapefruit production. Several large juice companies are based in St. Lucie, including Tropicana.

The following identifies the municipalities within each of our counties and their 60+ and 85+ populations as compared to the State.

#### POPULATION PERCENTAGES FOR THE 60+ AND 85+ AGE GROUPS BY PLACE IN PSA 9

The chart below compares the percentages of the 60+ and 85+ populations in each of the places in Planning and Service Area 9. The data is taken from the 2010 Census. Those cells highlighted in green indicate places with population percentages for the 60+ and 85+ age groups that exceed those of the State of Florida – 23.4% for the 60+ population and 2.3% for the 85+ population. It is apparent that our Planning and Service Area is rich in an aging population. For many of the places where the 60+ population percentage exceeds the State of Florida percentage, the 85+ population percentage also exceeds the State's. This may be an indicator of the success of these places to help seniors age in place.

INDIAN RIVER COUNTY	PERCENTAGE OF TOTAL POPULATION 60 YEARS OF AGE OR OLDER	PERCENTAGE OF TOTAL POPULATION 85 YEARS OF AGE OR OLDER
Fellsmere city	6.29%	0.23%
Florida Ridge CDP	27.01%	2.97%
Gifford CDP	34.61%	7.12%
Indian River Shores town	80.70%	7.10%
Orchid town	84.10%	1.45%
Roseland CDP	39.54%	4.14%
Sebastian city	34.22%	3.02%
South Beach CDP	57.61%	6.77%
Vero Beach city	35.95%	4.82%
Vero Beach South CDP	28.11%	2.87%
Wabasso CDP	33.00%	1.64%
Wabasso Beach CDP	71.02%	3.94%
West Vero Corridor CDP	66.14%	16.98%
Windsor CDP	63.28%	1.95%
Winter Beach CDP	26.90%	1.55%
MARTIN COUNTY	PERCENTAGE OF TOTAL POPULATION 60 YEARS OF AGE OR OLDER	PERCENTAGE OF TOTAL POPULATION 85 YEARS OF AGE OR OLDER
Hobe Sound CDP	39.02%	5.04%
Indiantown CDP	18.38%	1.73%
Jensen Beach CDP	33.19%	4.15%
Jupiter Island town	58.38%	9.67%
North River Shores CDP	38.10%	4.38%
Ocean Breeze Park town	75.77%	6.48%
Palm City CDP	33.85%	4.12%
Port Salerno CDP	32.16%	4.01%
Rio CDP	36.17%	4.15%
Sewall's Point town	32.41%	2.86%
Stuart City	31.91%	5.68%
OKEECHOBEE COUNTY	PERCENTAGE OF TOTAL POPULATION 60 YEARS OF AGE OR OLDER	PERCENTAGE OF TOTAL POPULATION 85 YEARS OF AGE OR OLDER

Cypress Quarters CDP	19.34%	1.56%
Okeechobee city	21.54%	3.24%
Taylor Creek CDP	37.60%	2.60%
PALM BEACH COUNTY	PERCENTAGE OF TOTAL POPULATION 60 YEARS OF AGE OR OLDER	PERCENTAGE OF TOTAL POPULATION 85 YEARS OF AGE OR OLDER
Acacia Villas CDP	11.24%	4.68%
Atlantis city	54.61%	7.88%
Belle Glade city	14.44%	0.81%
Boca Raton city	27.79%	3.51%
Boynton Beach city	26.58%	4.10%
Briny Breezes town	83.86%	8.15%
Cabana Colony CDP	15.01%	0.79%
Canal Point CDP	20.44%	1.91%
Cloud Lake town	24.44%	3.70%
Delray Beach city	30.22%	5.23%
Glen Ridge town	18.72%	2.28%
Golf village	80.56%	8.33%
Greenacres city	21.04%	2.58%
Gulf Stream town	46.06%	5.98%
Gun Club Estates CDP	14.05%	0.64%
Haverhill town	15.27%	0.75%
Highland Beach town	66.09%	8.59%
Hypoluxo town	32.50%	2.20%
Juno Beach town	59.19%	10.83%
Juno Ridge CDP	10.17%	0.97%
Jupiter town	26.50%	2.45%
Jupiter Farms CDP	17.22%	0.78%
Jupiter Inlet Colony town	45.75%	4.75%
Kenwood Estates CDP	11.07%	0.55%
Lake Belvedere Estates CDP	8.52%	0.30%
Lake Clarke Shores town	25.62%	2.37%
Lake Harbor CDP	44.44%	2.22%
Lake Park town	16.08%	1.45%
Lakewood Gardens CDP	8.64%	0.31%
Lake Worth city	15.66%	1.60%
Lantana town	18.66%	3.10%
Limestone Creek CDP	7.40%	0.59%
Loxahatchee Groves town	19.37%	1.04%
Manalapan town	54.43%	5.67%
Mangonia Park town	12.29%	0.37%
North Palm Beach village	36.75%	4.58%
Ocean Ridge town	48.32%	5.38%
Pahokee city	16.53%	1.40%
Palm Beach town	66.49%	12.35%
Palm Beach Gardens city	33.34%	3.50%
Palm Beach Shores town	49.47%	7.27%
Palm Springs village	17.37%	1.51%
Pine Air CDP	10.72%	0.49%
Plantation Mobile Home Park CDP	12.06%	0.32%
Riviera Beach city	20.33%	1.78%
Royal Palm Beach village	15.22%	1.59%

Royal Palm Estates CDP	11.34%	0.99%
San Castle CDP	15.67%	1.49%
Schall Circle CDP	11.19%	0.36%
Seminole Manor CDP	16.52%	0.84%
South Bay city	10.48%	0.66%
South Palm Beach town	70.79%	13.32%
Stacey Street CDP	2.80%	0.00%
Tequesta village	32.49%	3.66%
The Acreage CDP	12.16%	0.61%
Watergate CDP	13.46%	1.19%
Wellington village	16.06%	1.09%
Westgate CDP	8.50%	0.48%
West Palm Beach city	21.80%	2.56%
	PERCENTAGE OF TOTAL	PERCENTAGE OF TOTAL
	I ENCENTAGE OF TOTAE	I LICENTAGE OF TOTAL
	POPULATION 60 YEARS OF AGE OR	POPULATION 85 YEARS OF AGE
ST. LUCIE COUNTY		
ST. LUCIE COUNTY	POPULATION 60 YEARS OF AGE OR	POPULATION 85 YEARS OF AGE
	POPULATION 60 YEARS OF AGE OR OLDER	POPULATION 85 YEARS OF AGE OR OLDER
Ft. Pierce city	POPULATION 60 YEARS OF AGE OR OLDER 20.38%	POPULATION 85 YEARS OF AGE OR OLDER 2.26%
Ft. Pierce city Ft. Pierce North CDP	POPULATION 60 YEARS OF AGE OR OLDER 20.38% 22.21%	POPULATION 85 YEARS OF AGE OR OLDER 2.26% 0.88%
Ft. Pierce city Ft. Pierce North CDP Ft. Pierce South CDP	POPULATION 60 YEARS OF AGE OR OLDER           20.38%           22.21%           17.66%	POPULATION 85 YEARS OF AGE OR OLDER 2.26% 0.88% 2.35%
Ft. Pierce city Ft. Pierce North CDP Ft. Pierce South CDP Hutchinson Island South CDP	POPULATION 60 YEARS OF AGE OR OLDER           20.38%           22.21%           17.66%           79.95%	POPULATION 85 YEARS OF AGE OR OLDER 2.26% 0.88% 2.35% 7.75%
Ft. Pierce cityFt. Pierce North CDPFt. Pierce South CDPHutchinson Island South CDPIndian River Estates CDP	POPULATION 60 YEARS OF AGE OR OLDER           20.38%           22.21%           17.66%           79.95%           34.28%	POPULATION 85 YEARS OF AGE OR OLDER 2.26% 0.88% 2.35% 2.35% 7.75% 2.68%
Ft. Pierce cityFt. Pierce North CDPFt. Pierce South CDPHutchinson Island South CDPIndian River Estates CDPLakewood Park CDP	POPULATION 60 YEARS OF AGE OR OLDER           20.38%           22.21%           17.66%           9.95%           34.28%           30.76%	POPULATION 85 YEARS OF AGE OR OLDER 2.26% 0.88% 2.35% 2.68% 2.68% 3.80%
Ft. Pierce cityFt. Pierce North CDPFt. Pierce South CDPHutchinson Island South CDPIndian River Estates CDPLakewood Park CDPPort St. Lucie city	POPULATION 60 YEARS OF AGE OR OLDER           20.38%           22.21%           17.66%           9.95%           34.28%           30.76%           21.61%	POPULATION 85 YEARS OF AGE OR OLDER 2.26% 0.88% 2.35% 2.35% 2.68% 3.80% 1.84%

	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	PSA 9	Florida
2018							
Total 85+							
Population	7,377	7,746	894	60,092	8,686	84,795	562,037
2017							
85+							
Population	7,141	7,528	879	59,566	8.494	83,608	546,688
Percentage							
Increase	3.31%	2.90%	1.71%	0.88%	2.26%	1.42%	2.81%

A chart showing the growth in the 85+ population in each of our counties from 2017 to 2018 is shown below.

Though the growth rate for the 85+ population for our PSA as a whole is lower than the State's, Indian River and Martin counties all have a growth rate in the 85+ population that is higher than the State.

# Socio-Demographic and Economic Factors:

	Indi	an River	M	artin	Okee	chobee	Palm I	Beach	St.	Lucie	PS	A 9	Flor	ida
	# Age 60+	% of 60+ Popula -tion	# Age 60+	% of 60+ Popula- tion	# Age 60+	% of 60+ Popula- tion	# Age 60+	% of 60+ Popul a-tion	# Age 60+	% of 60+ Popula- tion	# Age 60+	% of 60+ Popula- tion	# Age 60+	% of 60+ Popula -tion
2018 Below Poverty Guide- line	4,644	8.0%	3,625	6.0%	1,575	16.0%	37,690	9.0%	8,900	10.0%	56,434	9.0%	546,721	10.0%
2017 Below Poverty Guide- line	4,631	8.3%	3,633	6.2%	1,669	16.7%	40,909	9.7%	8,025	9.5%	58,867	9.3%	581,824	10.9%
2018 Below 125% of Poverty Guide- line	6,794	12.0%	6,095	10.0%	1,990	20.0%	53,755	12.0%	12,875	15.0%	81,509	13.0%	791,825	14.0%
2017 Below 125% of Poverty Guide-														
line 2018	7,001	12.5%	6,208	10.7%	2,302	23.1%	57,971	13.7%	12,364	14.7%	85,846	13.6%	849,323	15.9%
Minori- ties Below Poverty Guide- line	1,189	2.0%	825	1.0%	215	2.0%	20,620	5.0%	4,780	6.0%	27,629	4.0%	365,495	6.0%
2017 Minori- ties Below Poverty Guide-														
line	1,016	1.8%	569	1.0%	166	1.7%	15,794	3.7%	3,055	3.6%	20,600	3.3%	279,061	5.2%

#### 60+ Below Poverty Level 2017 and 2018

The chart above shows that for our PSA as a whole and for all of our counties except Okeechobee the percentage of 60+ below poverty level is less than that of the State as of 2017. Okeechobee's 60+ population below poverty level has grown from 1,319 in 2015 to 1,669 in 2017. This is a 26.5% increase in 60+ below poverty level in Okeechobee over the two years from 2015-2017. However, for all of our counties both the number and the percentage of 60+ below poverty level has grown from 2015 -2017.

When it comes to the 60+ population below 125% of poverty level, our PSA as a whole and all of the counties in our service area have increases in both the number and the percentages of 60+ below 125% of poverty level from 2015 to 2017. PSA 9's percentages increased by 1.0%. - more than the State's increase of 0.6%. The

State's percentage of 15.9% of the 60+ population below 125% of poverty level still remains higher than all of our counties except Okeechobee which is 23.1%

Both the number and the percentage of minorities below poverty level has increased in three of our counties. Martin and Okeechobee Counties showed 0.1% and 1.4% decreases, respectively. The percentage of minorities below poverty level remains a smaller percentage than the State for all of our counties. The number and the percentage of minorities below 125% of poverty level has increased for Indian River, Martin, Palm Beach and St. Lucie counties. Okeechobee County showed a 2.7% decrease. The percentages for all counties remain below the percentage for the State as a whole. The following charts show the number of 60+ with self-care limitations and limitations of independent activities of daily living.

	Indian	River	Mar	tin	Okeec	hobee	Palm B	each	St. L	ucie	PSA	.9	Florida	
	# Age 60+	% of 60+ Popu- lation	# Age 60+	% of 60+ Popu- lation										
2018 Self Care Limitation	3,355	6.0%	2,765	5.0%	515	5.0%	24,070	6.0%	5,980	7.0%	36,685	6.0%	324,755	6.0%
2018 Inde- pendent Living Limitation	6,045	10.0%	5,040	8.0%	880	9.0%	42,445	10.0%	10,480	12.0%	64,890	10.0%	586,890	11.0%
2018 Total 60+	58,136		60,010		10,092		432,939		86,490		647,667		5,512,586	

2017 Self														
Care														
Limitation	3,577	3.5%	2,859	4.9%	635	6.4%	26,433	6.3%	5,857	6.9%	39,361	6.2%	355,162	6.7%
2017														
Inde-														
pendent														
Living														
Limitation	6,127	10.9%	5,133	8.8%	1,006	10.1%	45,846	10.8%	10,465	12.4%	68,577	10.9%	642,733	12.0%
2017														
Total 60+	56,082		58,153		9,972		422,605		84,352		631,164		5,334,036	

Comparing the 60+ populations in 2015 and 2017 Self –Care Limitations, percentages have decreased in three of five counties. Only Palm Beach and St. Lucie counties showed increases. With the exception of St. Lucie County, all other counties were below the state percentage.

In the area of Independent Living Limitations, only Martin, Okeechobee, and Palm Beach counties showed a decrease in percentages of the 60+ population. Okeechobee County showed the highest percentage decrease of 3.6%. Indian River and St. Lucie counties showed an increased percentage with the highest increase of .7% appearing in Indian River County. St. Lucie County, with 12.4% of the 60+ population with an Independent Living Limitation, was the only county above the state percentage.

The following compares the number of probable Alzheimer's cases in the last Area Plan report as compared with DOEA's 2017 County Profiles.

	Indiar	n River	Ma	rtin	Okeed	chobee	Palm B	each	St. L	ucie	PSA	9	Florida	
	Age 65+	% of 65+ Popu- lation	Age 65+	% of 65+ Popu- lation	Age 65+	% of 65+ Popu- lation	Age 65+	% of 65+ Popu- lation	Age 65+	% of 65+ Popu- lation	Age 65+	% of 65+ Popu- lation	Age 65+	% of 65+ Popu- lation
2018 Probable Alzheimer's Cases	6,669	15.0%	6,945	15.0%	985	13.0%	51,258	15.0%	8,721	13.0%	74,578	15.0%	553,865	13.0%
Total 65+	45,701		46,908		7,594		337,224		65,456		502,883		4,134,536	20.0%

### Probable Alzheimer's Cases 2017 and 2018

2017 Probable Azheimer's														
Cases	6,525	14.8%	6,825	15.0%	982	13.1%	51,027	15.5%	8,652	13.5%	74,011	15.1%	543,000	13.6%
Total 65+	44,106		45,606		7,524		329,789		64,086		491,111		4,000,571	

Planning and Service Area 9 has the highest number of Probable Alzheimer's cases for the 65+ population in the State as well as the highest percentage.

## Medicaid & Medicare Eligibility

	Indian			Palm			
	River	Martin	Okeechobee	Beach	St. Lucie	PSA 9	Florida
2018 60+							
Medicaid							
Eligible	3,775	2,691	1,527	38,483	9,286	55,762	723,483
2018 60+							
Dual Eligible	3,420	2,472	1,355	33,648	8,273	49,168	638,474
2017 60+							
Medicaid							
Eligible	3 <i>,</i> 469	2,600	1,425	37,248	8,804	53 <i>,</i> 546	688,257
2017 60+							
Dual Eligible	3,126	2,363	1,267	32,295	11,465	46,863	602,052

Both 60+ Medicaid Eligible and 60+ Dual Eligible populations have increased across all geographies.

## **Current Minority and Culturally Diverse Populations**

	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	PSA 9	Florida
2018 Total							
Minorities							
60+ as a % of							
60+							
Populations	10.0%	8.0%	14.0%	23.0%	25.0%	21.0%	31.0%

The chart below shows the minorities as a percentage of the 60+ population in PSA 9

2017 Total							
Minorities							
60+ as a % of							
60+							
Populations	8.8%	6.8%	11.5%	20.2%	21.5%	18.0%	27.2%

Though all counties show a minority percentage that is below that of the State, all have had increases in the minority 60+ population as a percent of the total 60+ population.

Other culturally diverse populations in our Planning and Service Area include Holocaust survivors and Native Americans.

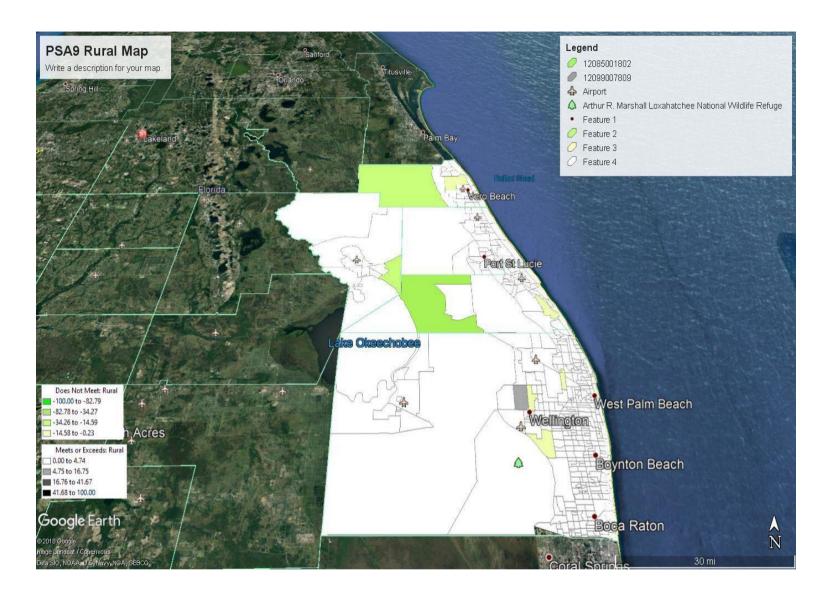
According to a June 3, 2014 article from the Sun-Sentinel, about 16,000 Holocaust survivors lived in Palm Beach, Broward and Miami-Dade counties as of about 10 years ago, the last time a survey was taken.

There are two Seminole Indian Reservations in our PSA.

<u>Fort Pierce Reservation</u>, a 50 acres site in <u>St. Lucie County</u>, taken into trust for the tribe in 1995 by the U.S. <u>Department of Interior</u>. The tribe has constructed a modern housing development, known as Chupco's Landing, and a community center for members.

Big Cypress Reservation, the largest territory, including 81.972 square miles.

A map showing the rural and urban areas in Planning and Service Area 9 and performance to targeting criteria for rural areas in each of our counties is shown below.



### **Limited English Proficiency**

The chart below compares those 60+ with Limited English Proficiency in 2017 as compared to 2015. As a PSA, we have had a higher increase in 60+ with Limited English Proficiency than the State. This is driven by Palm Beach and St. Lucie counties. Indian River, Martin, and Okeechobee counties all showed decreases in the number of persons 60+ with Limited English Proficiency.

	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	PSA 9	Florida
	1111021		ORECTIODEE	Deach	JL. LUCIE	FJA J	Tionua
2018 60+ with Limited English							
Proficiency	1,155	685	290	24,555	3,330	30,015	425,506

2017 60+ with Limited English							
Proficiency	919	657	342	25,564	3,216	30,698	452,454

2017-2018							
Total %							
Increase							
or Decrease	25.68%	4.26%	-15.20%	-3.95%	3.14%	-2.22%	-5.96%

All counties show percentage rate increases in the number of residents with limited English proficiency. PSA 9 numbers are higher than those of the State.

	GRANDPARENTS RESPONSIBLE FOR THEIR OWN GRANDCHILDREN									
	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	PSA 9	Florida			
2018	395	535	150	4,190	950	6,220	65,475			
2017	429	407	223	4,845	810	6,714	72,451			
2017-2018 Total % Increase or Decrease	-7.93%	31.45%	-32.73%	-13.52%	17.28%	-7.36%	-9.63%			

The chart above compares the number of grandparents responsible for their own grandchildren as of 2017 and as of 2018. The percentage has grown in 2 of 5 counties in our Planning and Service Area. Martin County showed a significant increase in this population.

#### Veterans

	Indian			Palm			
	River	Martin	Okeechobee	Beach	St. Lucie	PSA 9	Florida
2018							
Age 45 - 64	3,067	2,775	704	17,131	6,636	30,313	471,082
Age 65 - 84	6,940	6,218	1,491	32,093	10,769	57,511	616,816
Age 85+	2,881	3,059	257	17,014	3,223	26,434	153,731
Total	12,888	12,052	2,452	66,238	20,628	114,258	1,241,629
	_						
2017							
Age 45 - 64	3,134	2,845	725	17,891	6,773	31,368	483,239
Age 65 - 84	7,330	6,753	1,537	34,986	11,278	61,884	635,040
Age 85+	2,938	3,091	244	18,137	3,307	27,717	154,675
Total	13,402	12,689	2,506	71,014	21,358	120,969	1,272,954

% Increase or							
Decrease	6.63%	0.82%	-0.24%	10.65%	21.66%	10.68%	16.15%

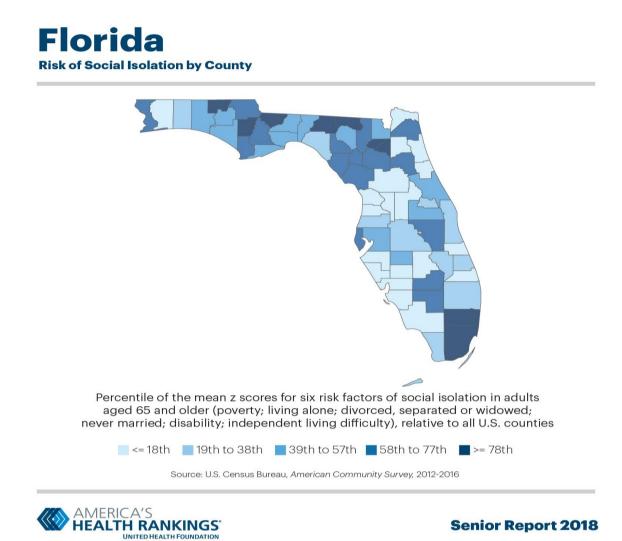
The number of veterans 85+ increased from 2015 to 2017 in every county except Okeechobee. For the State of Florida, the number of veterans 85+ increased. The number of veterans 65-84 also increased in every county except Okeechobee and St. Lucie.

	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	PSA 9	Florida
2018							
Total							
60+							
Popu-							
lation	58,136	60,010	10,092	432,939	86,490	647,667	5,512,586
2018							
60+							
Living							
Alone	13,345	14,515	1,990	102,615	17,840	150,305	1,141,814
2018							
60+ %							
Living							
Alone	22.95%	24.19%	19.72%	23.70%	20.63%	23.21%	20.71%
<b></b>	1	1					
2017							
Total							
60+							
Popu-							
lation	56,082	58,153	9,972	422,605	84,352	631,164	5,334,036
2017							
60+							
Living							
Alone	13,934	14,913	2,146	111,620	19,205	161,817	1,238,438
2017							
60+ %							
Living							
Alone	24.84%	25.64%	21.52%	26.41%	22.73%	25.63%	23.21%

The chart below compares the change in elders living alone from 2017 to 2018

Though the percentages of 60+ Living Alone have remained similar from 2015 to 2017 the numbers of those 60+ Living Alone has increased in every county in our PSA.

The map below compares the risk of social isolation for the counties in our Planning and Service Area as compared to other counties in the State of Florida.



Population projections for various ethnicities for each of our counties from 2017-2020, 2020-2030, and from 2030 to 2040 are shown in Appendix A. This information is from BEBR Population Projections by Age, Sex, Race, and Hispanic Origin for Florida and Its Counties, 2020-2045, With Estimates for 2017. The data show.....

The Housing Cost Burden for seniors in our PSA is outlined below. The data compares the 2018 DOEA County Profiles and the 2017 DOEA County Profiles.

2018 D	OEA County Profile			
	Elder	Percent of	Elder	Percent of
	Households	Households	Households	Households
	Owner-	Owner-	Renter-	Renter-
County	Occupied	Occupied	Occupied	Occupied
Indian River	23,668	13%	4,264	35%
Martin	25,599	12%	3,024	31%
Okeechobee	4,112	17%	561	26%
Palm Beach	176,701	22%	28,367	39%
St. Lucie	34,709	13%	4,343	29%
PSA 9	264,789	19%	40,559	37%
Florida	2,014,693	16%	411,212	38%

Households With Cost Burden Above 30% and Income Below 50% Area Median Income (65+)

2017 DOEA County Profiles						
	Elder	Percent of all				
County	Households	Households				
Indian River	27,932	16.2%				
Martin	28,623	13.8%				
Okeechobee	4,673	17.7%				
Palm Beach	205,068	24.5%				
St. Lucie	39,052	14.7%				
PSA 9	305,348	21.4%				
Florida	2,425,905	19.5%				

For all of our counties the number of households with a cost burden above 30% and income below 50% of the area median income has increased from 2015 to 2017 for the 65+ population.

The National Council On Aging Elder Index - 2016 for each of our counties along with the HHS Poverty level is outlined below

	Florida, Indian River County					
	Single Elder			Elder Couple		
Expenses/Monthly and Yearly Totals	Renter, one bedroom	Owner w/ Mortgage	Owner w/o Mortgage	Renter, one bedroom	Owner w/ Mortgage	Owner w/o Mortgage
Housing	\$802	\$1,282	\$535	\$802	\$1,282	\$535
Food	\$257	\$257	\$257	\$471	\$471	\$471
Transportation	\$307	\$307	\$307	\$472	\$472	\$472
Miscellaneous	\$292	\$292	\$292	\$440	\$440	\$440
Health Care (Poor)	\$568	\$568	\$568	\$1,136	\$1,136	\$1,136
Health Care (Good)	\$361	\$361	\$361	\$722	\$722	\$722
Health Care (Excellent)	\$270	\$270	\$270	\$540	\$540	\$540
Index Per Month (Poor Health)	\$2,226	\$2,706	\$1,959	\$3,321	\$3,801	\$3,054
Index Per Month (Good Health)	\$2,019	\$2,499	\$1,752	\$2,907	\$3,387	\$2,640
Index Per Month (Excellent Health)	\$1,928	\$2,408	\$1,661	\$2,725	\$3,205	\$2,458
Index Per Year (Poor Health)	\$26,712	\$32,472	\$23,508	\$39,852	\$45,612	\$36,648
Index Per Year (Good Health)	\$24,228	\$29,988	\$21,024	\$34,884	\$40,644	\$31,680
Index Per Year (Excellent Health)	\$23,136	\$28,896	\$19,932	\$32,700	\$38,460	\$29,496
% of National Average (Poor Health)	97%	95%	101%	98%	96%	101%
% of National Average (Good Health)	95%	94%	100%	96%	95%	100%
% of National Average (Excellent Health)	95%	93%	100%	96%	94%	99%
% of HHS Poverty Level (Poor Health)	214%	260%	188%	236%	270%	217%
% of HHS Poverty Level (Good Health)	194%	240%	168%	206%	240%	187%
% of HHS Poverty Level (Excellent Health)	185%	231%	160%	193%	227%	174%

Source: Elder Index. (2019). The Elder Index™ [Public Dataset]. Boston, MA: Gerontology Institute, University of Massachusetts Boston. Retrieved from ElderIndex.org

	Florida, Martin County					
	Single Elder			Elder Couple		
Expenses/Monthly and Yearly Totals	Renter, one bedroom	Owner w/ Mortgage	Owner w/o Mortgage	Renter, one bedroom	Owner w/ Mortgage	Owner w/o Mortgage
Housing	\$873	\$1,528	\$586	\$873	\$1,528	\$586
Food	\$257	\$257	\$257	\$471	\$471	\$471
Transportation	\$227	\$227	\$227	\$349	\$349	\$349
Miscellaneous	\$283	\$283	\$283	\$420	\$420	\$420
Health Care (Poor)	\$578	\$548	\$548	\$1,096	\$1,096	\$1,096
Health Care (Good)	\$346	\$346	\$346	\$692	\$692	\$692
Health Care (Excellent)	\$260	\$260	\$260	\$520	\$520	\$520
Index Per Month (Poor Health)	\$2,188	\$2,833	\$1,901	\$3,209	\$3 <i>,</i> 854	\$2,922
Index Per Month (Good Health)	\$1,986	\$2,631	\$1,699	\$2,805	\$3 <i>,</i> 450	\$2,518
Index Per Month (Excellent Health)	\$1,900	\$2,545	\$1,613	\$2,633	\$3,278	\$2,346
Index Per Year (Poor Health)	\$26,256	\$33,996	\$22,812	\$38,508	\$46,248	\$35,064
Index Per Year (Good Health)	\$23,832	\$31,572	\$20,388	\$33,660	\$41,400	\$30,216
Index Per Year (Excellent Health)	\$22,800	\$30,540	\$19,356	\$31,596	\$39,336	\$28,152
% of National Average (Poor Health)	95%	99%	98%	95%	98%	97%
% of National Average (Good Health)	94%	98%	97%	93%	97%	95%
% of National Average (Excellent Health)	94%	98%	97%	93%	97%	95%
% of HHS Poverty Level (Poor Health)	210%	272%	183%	228%	273%	207%
% of HHS Poverty Level (Good Health)	191%	253%	163%	199%	245%	179%
% of HHS Poverty Level (Excellent Health)	183%	245%	155%	187%	233%	166%

	Florida, Okeechobee County					
	Single Elder			Elder Couple		
Expenses/Monthly and Yearly Totals	Renter, one bedroom	Owner w/ Mortgage	Owner w/o Mortgage	Renter, one bedroom	Owner w/ Mortgage	Owner w/o Mortgage
Housing	\$655	\$1,058	\$319	\$655	\$1,058	\$319
Food	\$257	\$257	\$257	\$471	\$471	\$471
Transportation	\$274	\$274	\$274	\$422	\$422	\$422
Miscellaneous	\$239	\$239	\$239	\$381	\$381	\$381
Health Care (Poor)	\$548	\$548	\$548	\$1,096	\$1,096	\$1,096
Health Care (Good)	\$346	\$346	\$346	\$692	\$692	\$692
Health Care (Excellent)	\$260	\$260	\$260	\$520	\$520	\$520
Index Per Month (Poor Health)	\$1,973	\$2,376	\$1,637	\$3,025	\$3,428	\$2,689
Index Per Month (Good Health)	\$1,771	\$2,174	\$1,435	\$2,621	\$3,024	\$2,285
Index Per Month (Excellent Health)	\$1,685	\$2,088	\$1,349	\$2,449	\$2 <i>,</i> 852	\$2,113
Index Per Year (Poor Health)	\$23,676	\$28,512	\$19,644	\$36,300	\$41,136	\$32,268
Index Per Year (Good Health)	\$21,252	\$26,088	\$17,220	\$31,452	\$36,288	\$27,420
Index Per Year (Excellent Health)	\$20,220	\$25,056	\$16,188	\$29,388	\$34,224	\$25,356
% of National Average (Poor Health)	86%	83%	85%	89%	87%	89%
% of National Average (Good Health)	84%	81%	82%	87%	85%	86%
% of National Average (Excellent Health)	83%	81%	81%	86%	84%	85%
% of HHS Poverty Level (Poor Health)	190%	228%	157%	215%	243%	191%
% of HHS Poverty Level (Good Health)	170%	209%	138%	186%	215%	162%
% of HHS Poverty Level (Excellent Health)	162%	201%	130%	174%	202%	150%

	Florida, Palm Beach County					
	Single Elder			Elder Couple		
Expenses/Monthly and Yearly Totals	Renter, one bedroom	Owner w/ Mortgage	Owner w/o Mortgage	Renter, one bedroom	Owner w/ Mortgage	Owner w/o Mortgage
Housing	\$1,145	\$1,568	\$671	\$1,145	\$1,568	\$671
Food	\$257	\$257	\$257	\$471	\$471	\$471
Transportation	\$240	\$240	\$240	\$369	\$369	\$369
Miscellaneous	\$300	\$300	\$300	\$435	\$435	\$435
Health Care (Poor)	\$523	\$523	\$523	\$1,046	\$1,046	\$1,046
Health Care (Good)	\$331	\$331	\$331	\$662	\$662	\$662
Health Care (Excellent)	\$254	\$254	\$254	\$508	\$508	\$508
Index Per Month (Poor Health)	\$2,465	\$2,888	\$1,991	\$3,466	\$3,889	\$2,992
Index Per Month (Good Health)	\$2,273	\$2,696	\$1,799	\$3,082	\$3,505	\$2,608
Index Per Month (Excellent Health)	\$2,196	\$2,619	\$1,722	\$2,928	\$3,351	\$2,454
Index Per Year (Poor Health)	\$29,580	\$34,656	\$23,892	\$41,592	\$46,668	\$35,904
Index Per Year (Good Health)	\$27,276	\$32,352	\$21,588	\$36,984	\$42,060	\$31,296
Index Per Year (Excellent Health)	\$26,352	\$31,428	\$20,664	\$35,136	\$40,212	\$29,448
% of National Average (Poor Health)	107%	101%	103%	102%	99%	99%
% of National Average (Good Health)	107%	101%	103%	102%	98%	98%
% of National Average (Excellent Health)	108%	101%	104%	103%	99%	99%
% of HHS Poverty Level (Poor Health)	237%	277%	191%	246%	276%	212%
% of HHS Poverty Level (Good Health)	218%	259%	173%	219%	249%	185%
% of HHS Poverty Level (Excellent Health)	211%	252%	165%	208%	238%	174%

	Florida, St. Lucie County					
	Single Elder			Elder Couple		
Expenses/Monthly and Yearly Totals	Renter, one bedroom	Owner w/ Mortgage	Owner w/o Mortgage	Renter, one bedroom	Owner w/ Mortgage	Owner w/o Mortgage
Housing	\$873	\$1,326	\$507	\$873	\$1,326	\$507
Food	\$257	\$257	\$257	\$471	\$471	\$471
Transportation	\$227	\$227	\$227	\$349	\$349	\$349
Miscellaneous	\$265	\$265	\$265	\$399	\$399	\$399
Health Care (Poor)	\$533	\$533	\$533	\$1,066	\$1,066	\$1,066
Health Care (Good)	\$333	\$333	\$333	\$666	\$666	\$666
Health Care (Excellent)	\$249	\$249	\$249	\$498	\$498	\$498
Index Per Month (Poor Health)	\$2,155	\$2,608	\$1,789	\$3,158	\$3,611	\$2,792
Index Per Month (Good Health)	\$1,955	\$2,408	\$1,589	\$2,758	\$3,211	\$2,392
Index Per Month (Excellent Health)	\$1,871	\$2,324	\$1,505	\$2,590	\$3,043	\$2,224
Index Per Year (Poor Health)	\$25,860	\$31,296	\$21,468	\$37,896	\$43,332	\$33,504
Index Per Year (Good Health)	\$23,460	\$28,896	\$19,068	\$33,096	\$38,532	\$28,704
Index Per Year (Excellent Health)	\$22,452	\$27,888	\$18,060	\$31,080	\$36,516	\$26,688
% of National Average (Poor Health)	94%	91%	92%	93%	92%	92%
% of National Average (Good Health)	92%	90%	91%	91%	90%	90%
% of National Average (Excellent Health)	92%	90%	90%	91%	90%	90%
% of HHS Poverty Level (Poor Health)	207%	251%	172%	224%	256%	198%
% of HHS Poverty Level (Good Health)	188%	231%	153%	196%	228%	170%
% of HHS Poverty Level (Excellent Health)	180%	223%	145%	184%	216%	158%

<sup>1</sup>The Social Security Administration reports that:

- The average monthly benefit paid to a retired worker in 2015 was \$1,342.00 amounting to \$16,104.00 per year.
- Among the elderly beneficiaries, 48% of married couples and 71% of unmarried persons receive 50% or more of the income from Social Security.
- Among the elderly beneficiaries, 21% of married couples and about 43% of unmarried persons rely on Social Security for 90% or more of their income.

The monthly maximum Federal Social Security payment amounts to \$733 for an eligible individual and \$1,100 for an individual with an eligible spouse.

#### <sup>1</sup> https://www.ssa.gov/news/press/factsheets/basicfact-alt.pdf

In every county in PSA 9 the Index is over 150% of poverty level meaning that those below this amount must choose between housing, healthcare, food, and transportation. The data earlier in this report indicated that there were more than 85,846 persons 60+ below 125% of poverty level.

## Economic and Social Resources:

#### **Economic Contribution**

In its report <u>The Net Impact of Retirees on Florida's State and Local Budgets</u> the Bureau of Economic and Business Research of the University of Florida reported that, "Although retirees contribute essentially the same per capita revenue to state and local governments in Florida as other adults (roughly \$33 more per person, before adjusting revenues to equal expenditures), their per capita expenses are significantly lower. A chart from the report is displayed below.

Category	Adults Age 65 and up	Adults Age 18-64
Sales and Gross Receipts Revenue*	\$1,609	\$1,846
Property Tax Revenue	\$2,379	\$1,96
All other Revenue	\$6,255	\$6,397
Total Revenue**	\$10,244	\$10,209
Education Expenses	\$437	\$3,360
Health & Hospital Expenses	\$1,766	\$1,385
Transportation Expenses	\$638	\$953
Police & Corrections Expenses	\$401	\$1,178
All Other Expenses	\$4,152	\$4,152
Total Expenditures**	\$7,394	\$11,028
Net Benefit**	\$2,850	-\$818

Summary Table: Revenues and Expenditures to State and Local Governments for Retirees and Non-retirees

\*Sales and Gross Receipts revenue also include several other sales tax categories (e.g. beverage tax, gasoline tax, etc.)

#### \*\*Totals may not sum correctly due to roundingxt Here>

With 100,000 seniors 60+ moving to Florida each year this can have a significant economic impact. The inmigration data and projections for growth in the senior population for each of our counties are listed below.

# INDIAN RIVER COUNTY ECONOMIC AND SOCIAL RESOURCES

The information below is from the 2018 Community Needs Assessment conducted by The Economic Opportunities Council of Indian River County. Indian River County's population, currently 154,383, has grown steadily by approximately two percent per year. Historically, agriculture and tourism were the county's largest industries. These are now complimented by an increasing number of firms in the health care and information technology industries along with a steady stream of light manufacturing jobs. Population Total Population ......154,383 Person per Household ......2.46 Median Age **Income and Wages** Per Capita Personal Income ...... \$50.977 Median Household Income ...... \$46,749 Average Annual Wage ..... \$39,624 Unemployment Rate (2017) ...... 4.9% Gender Racial Mix Total Population ......154,383 Non-Hispanic White ......134,313 Non-Hispanic Black .....14,666 Hispanic Origin .....17,404

There are two public housing complexes located north of the city of Vero Beach, the county seat for Indian River County. The Indian River County offers many income restricted apartment options. Presently, there are (6) six target areas (Fellsmere, Central Vero and South Vero, Wabasso, Gifford, and Sebastian) with a large number of families that qualify as economically disadvantaged, with many residents of the county living in substandard housing conditions. A surge of growth has come to the City of Fellsmere, thereafter two large apartment complexes were built in the city. The new apartment complexes and new homes provide a better living condition for the residents. Indian River County Trends -The most common occupations are management, professional, and related occupations, 32%. Sales and office occupations, 26%, and service occupations, 9%. Approximately 78% of workers in Vero Beach, Florida work for companies, 10.4% work for the government, ands 7% are self-employed. The leading industries in Indian River County, Florida are retail, educational, health and social services, 19%, arts, entertainment, recreation, accommodation and food services, 14% and retail trade is 13%.

Programs that enhance the quality of life for Indian River County seniors include those at the Gifford Community Center and Senior Resource Association. The Gifford Community Center hosts a BSK program. The Beyond Special K Program serves adults and senior citizens by providing educational, social, recreational, and cultural activities on a daily basis. This program allows the participants to interact with each other in a caring, supportive and friendly environment. Activities include: computer classes, low impact exercises, QiGong breathing & stretching, educational workshops, bible study, field trips, arts/crafts, socialization, senior care respite and iInter-generational activities.

Senior Resource Association's Silver Tones choral group began in 2007 with the vision of providing older adults (55+) with a meaningful musical outlet that encourages their unique talents and provides a service to the community.

## MARTIN COUNTY ECONOMIC AND SOCIAL RESOURCES

The June 2019 chart below from the Florida Legislature Office of Economic and Demographic Research outlines the major industries in Martin County.

Employment by Industry Number of	Martin County	Florida	Percent of All	Martin County	Florida
Establishments 2017			Establishments 2017		
All industries	6,322	679,976	All industries	6,322	679,976
Natural Resource & Mining	69	5,274	Natural Resource & Mining	1.1%	0.8%
Construction	776	68,218	Construction	12.3%	10.0%
Manufacturing	251	20,585	Manufacturing	4.0%	3.0%
Trade, Transportation and Utilities	1,210	139,467	Trade, Transportation and Utilities	19.1%	20.5%
Information	61	10,989	Information	1.0%	1.6%
Financial Activities	621	72,393	<b>Financial Activities</b>	9.8%	10.6%
Professional & Business Services	1,352	159,259	Professional & Business Services	21.4%	23.4%
Education & Health Services	623	72,778	Education & Health Services	9.9%	10.7%
Leisure and Hospitality	555	55,767	Leisure and Hospitality	8.8%	8.2%
Other Services	669	55,357	Other Services	10.6%	8.1%
Government	52	6,037	Government	0.8%	0.9%

The following information is from the Martin County Economic Development Corporation Website. Martin County Population Statistics

Population & Growth	Population
2019 Projected Total Population	23,711
2014 Projected Total Population	24,199
2010 Census Total Population	24,505
July 2014 Certified Population Estimate	23,714
Urban/Rural Representation	Population
2010 Census Total Population: Urban	5,361
2010 Census Total Population: Rural	19,144

# Martin County Income Statistics

2014 Estimated Median Family Income	\$48,828
2019 Projected Median Household Income	\$38,937
2014 Projected Median Household Income	\$33,968
2014 Estimated Median Worker Earnings	\$28,093
2019 Projected Per Capita Income	\$20,929
2014 Projected Per Capita Income	\$19,295
2014 Estimated Total Population with income below poverty level	5,358 (22.5%)

The Kane Center offers classes in fitness, technology, art, dance, brain fitness, AARP Smart Driver and foreign languages.

# OKEECHOBEE COUNTY ECONOMIC AND SOCIAL RESOURCES

The information below is from the 2018 Community Needs Assessment conducted by The Economic Opportunities Council of Indian River County.

There are four low-income housing apartment complexes, which contain 229 affordable apartments for rent in Okeechobee, Florida. Many of these rental apartments are income based housing with about 34 apartments that set rent based on your income. Often referred to as "HUD apartments", there are zero Project-Based Section 8 subsidized apartments in Okeechobee. 343 other low-income apartments do not have rental assistance but are still considered affordable housing for low-income families.

**Economic Trends** - Okeechobee has an unemployment rate of 5.6%. The US average is 5.2%. Okeechobee has seen the job market decrease by -0.8% over the last year. Future job growth over the next ten years is predicted to be 32.8%, which is lower than the US average of 38.0%. The sales tax rate for Okeechobee is 7.0%. The US average is 6.0%. The income tax rate for Okeechobee is 0.0%. The US average is 4.6%.

There are many lodges, campgrounds and hiking trails around Lake Okeechobee. The Seminole Casino Brighton is in Okeechobee County. Okeechobee Senior Services hosts many activities for seniors. These include: clothing drives; walk-a-marathon; veteran's presentation; line dancing; cancer forum; health & safety fair; Tai Chi; Food to Seniors in Need; Seniors Against Crime; Senior World Series; computer classes; and Celebrate National Children's Book Day with Headstart Children.

The Lake Okeechobee Rural Health Network (LORHN) operates in this region and others. The mission of LORHN is to improve access to quality health care for residents of Glades, Hendry, Okeechobee, Martin and Palm Beach Counties and stimulate the financial viability of providers and communities within the Network through planning and coordinated utilization of limited healthcare.

The Lake Okeechobee Rural Health Network, Inc. (LORHN) was formed in 1994 under F.S. Chapter 381 (Public Health) Section 0406. LORHN is one of nine Rural Health Networks in Florida, with the common goal of ensuring that all rural residents have access to a continuum of affordable health care, and to champion the efficient and effective delivery of health care services in rural areas, via the integration of public and private resources, and the coordination of health care providers.

LORHN's services include Community Health Workers, care coordination panels, health literacy education, and professional development and training.

## PALM BEACH COUNTY ECONOMIC AND SOCIAL RESOURCES

The 2018 Palm Beach County Snapshot below from the Palm Beach County Business Development Board reflects both economic and social resources as well as population characteristics.



2040 Dolla	- Beech Cours	ntv Snapshot
711X Bain		

2018 Paim Beach County Shapshot			
Area in Square Miles:	2,578	Population	
w/o Lake Okeechobee (miles <sup>2</sup> )	1,974	2016 ACS (American Community Survey)	1,443,810
Average Max. Temp.:	83 (f)	2010 Census	1,320,134
Average Low Temp.:	67 (f)		
Average Temp.:	75 (f)	Population Projections	
Average Annual Percipitation:	62 (in.)	2020	1,465,944
Time Zone:	Eastern	2030	1,619,094
		2040	1,735,114
Meeting Facilities			
Resorts/Hotels/Lodging Facilities	200	Race (2016 ACS)	
Resorts/Hotels with Meeting Space	50	Total Population	1,443,810
Total Rooms	17,000	White	806,060
Convention Center		Black or African American	262,233
Total Meeting Space (s.f.)	148,000	Hispanic (of any race)	309,949
Total Space (s.f.)	350,000	Amer. Indian & Alaska Native	867
		Asian	38,309
Medical (2016)		Native Hawaiian/Pacific Islander	449
Hospitals	34	Some other race	3,406
Physicians' Offices	1,992	Two or more races	22,537
Dentists' Offices	756		
<b>_</b> , , ,		Sex & Age (2016 ACS)	000 444
Financial (2017)		Male	698,414
Banks	55	Female	745,396
Branch Banking Offices	455	Under 5	74,578
Deposits (millions)	\$ 50,628	5-14 years	155,270
		15-19 years	81,177
Labor Force (2016 avg.)	740 540	20-34 years	251,216
Labor Force	710,513	35-44 years	164,543
Employment	676,285	45-59 years	291,552
Unemployment Rate	4.80%	60-74 years	254,547
Total Nanagriaultural Employment (theorem da)	600.1	75+ years	170,927
Total Nonagricultural Employment (thousands)	608.1	Median age	44.7
Goods Producing Construction	53.5 34.3		
Manufacturing	34.3 19.1	Housing (2016 ACS) Total housing units	683,543
Service Providing	554.6	Occupied housing units	536,446
Wholesale Trade	23.4	Vacant housing units	147,097
Retail Trade	23.4 79.7	Homeowner vacancy rate	2.4
Trans., Warehousing & Utilities	12.3	Rental vacancy rate	9.7
Information	10.9	Average household size	2.65
Financial Activities	39.8	Average household size	2.00
Finance and Insurance	23.7	Economic (2016 ACS)	
Professional and Business Services	110.0	County Average Wage (2016)	\$51,843
Pro., Scientific & Tech. Services	46.3	Median Family Income	\$70,930
Mngt. of Companies & Enterprises	11.0	Per Capita Income	\$35,732
Administrative and Waste Services	52.7	Median Earnings For Male	\$00,10L
Education and Health Services	96.9	Full-Time, Year-Round Workers	\$45,116
Leisure and Hospitality	86.2	Median Earnings For Female	÷,
Accommadation & Food Services	68.0	Full-Time, Year-Round Workers	\$39,032
Other Services	32.7		<i></i>
		Education (2016 ACS)	
Sources: The Florida Department of Economic Opportunity, US Census Bure	au American	Enrollment (K-12)	209,950
Community Survey 2016, Florida Demographic Estimating Conference Febru	ary 2017, Federal	Education attainment - 25 years+	1,054,130
Deposit Insurance Corporation Summary of Deposits June 2017, Palm Beach and Visitor's Bureau	County Convention	% Bachelors degree or higher	35.0%

Business Development Board of Palm Beach County, Inc.

www.bdb.org

The Volen Center provides a variety of educational and enriching opportunities and stimulating discussion. These include lecture series, philosophical and current event discussions, and computer classes. Socialization and leisure activity are plentiful at the Volen Center where everyone makes new friends and has fun doing so! Regular activities include:

- Bridge and bingo
- Card and board games
- Baking and crafts
- Exercise and gardening
- Ice cream socials and themed parties
- Entertainment and dances
- Field trips and community outings

The Volen Center brings together individuals of all ages for rewarding and joyful experiences that span generations. Older adults and children have the opportunity for daily interaction. Creating community, the Volen Center benefits the whole family.

#### Services for seniors at Palm Beach County's Division of Senior services include:

**ACTIVITIES/PROGRAMS**: Book discussion groups, arts and crafts, creative writing and language classes, drawing, china and one-stroke painting, ceramics, wood carving, quilting, crochet, knitting, mahjong, bridge, cards, billiards and bingo.

**HEALTH PROMOTION**: Health education classes and screenings on preventive health issues, blood pressure clinics, an annual Health and Safety Fair.

**TRAVEL**: Day trips and luncheons are organized to local restaurants and venues.

LIBRARY: Book Mobile provides a library of books and language CD's; as well as on-site library.

**RECREATION/FITNESS**: Fitness and recreation classes, dance classes and chair exercises.

**TAX AIDE PROGRAM**: In conjunction with AARP, provide free income tax completion & filing for seniors.

**SPECIAL EVENTS**: Dances, crafts, birthday and holiday events, sing-a-longs and on site entertainment; as well as Defensive Driving classes.

MorseLife Health System, a nationally recognized provider of health care, housing and support services for seniors and their families operates in Palm Beach County. Services include: independent living, assisted living, memory care, home health care, short term rehab, long term care, PACE and Hospice.

Alzheimer's Community Care provides seven Core Services to families in Palm Beach, Martin and St. Lucie counties to help them navigate their specific journey with Alzheimer's disease and related neurocognitive disorders. These include: Alzheimer's Care and Service Centers, Family Nurse Consultants., Professional and Community Education, 24-hour crisis line, case management, ID locator bracelet, and advocacy.

# St. LUCIE COUNTY ECONOMIC AND SOCIAL RESOURCES The chart below from the St. Lucie Economic Development council shows the major employers in St. Lucie County



# St. Lucie County Major Employers

Company Name	Employees	Product / Service	Location
School Board of St Lucie County	5,564	Education	Fort Pierce
Indian River State College*	2,338	Higher education	Fort Pierce
awnwood Regional Medical Ctr & Heart Institute	1,615	Healthcare services	Fort Pierce
Teleperformance	1,600	Call center	Port St. Lucie
City of Port St Lucie	1,164	City government	Port St. Lucie
Wal-Mart Distribution Center	890	Dry goods distribution center	Fort Pierce
Cleveland Clinic Martin Health	850	Healthcare services	Stuart
St. Lucie Medical Center	850	Healthcare services	Port St. Lucie
St. Lucie County	797	County government	County wide
Florida Power & Light Company	772	Electric utility	Port St. Lucie
Change Healthcare	549	Call center	Port St. Lucie
Convey Health Solutions	450	Call center	Fort Pierce
St. Lucie County Fire District	434	Fire protection	Fort Pierce
New Horizons of the Treasure Coast	408	Healthcare services	County wide
Maverick Boat Co Inc	406	Boat manufacturer	Fort Pierce
Blue Goose Construction / Growers	400	Agriculture / Contractors	Fort Pierce
Pursuit Boats	367	Boat manufacturer	Fort Pierce
MAXIMUS	354	Call Center	Fort Pierce
City of Fort Pierce	337	City government	Fort Pierce
Treasure Coast Hospice	282	Healthcare services	County wide
Fort Pierce Utilities Authority	275	Utilities	Fort Pierce
Fropicana Products Inc	258	Fruit juice manufacturer	Fort Pierce
Jnited States Postal Service	235	Post Office	Fort Pierce
A-1 Roof Trusses	228	Truss manufacturer	Fort Pierce
City Electric Supply / TAMCO	225	Electrical products manufacturing	Port St. Lucie
St. Lucie Battery & Tire	220	Auto services	Fort Pierce
Treasure Coast Newspapers	215	Newspaper publishing	Port St. Lucie
JSDA, US Horticultural Research Lab	210	Agricultural research	Fort Pierce
FAU's Harbor Branch Oceanographic Institute	190	Research organization	Fort Pierce
Club Med Sandpiper Bay	180	Resort hotel	Port St. Lucie
Natalie's Orchid Island Juice Company	177	Fruit juices manufacturer	Fort Pierce
PGA Golf Club	177	Recreation	Port St. Lucie
Southern Eagle Distributing	163	Beer distributor	Fort Pierce
Keiser University	139	Higher education	Port St. Lucie
Remetronix	132	Medical equipment installation / de-installation	Port St. Lucie
ABC Medical	121	Headquarters	Port St. Lucie
Naste-Pro of Florida, Inc.	121	Waste disposal	Fort Pierce
Egan & Co	120	Agriservices	Fort Pierce
Torrey Pines Institute for Molecular Studies	117	Research / life sciences	Port St. Lucie
East Coast Truss	115	Truss manufacturer	Fort Pierce
Allied Universal Corp.	103	Manufacturing	Fort Pierce
Nilfisk Pressure Pro	95	Manufacturing	Fort Pierce
Atlantic Precision	93	Manufacturing	Port St. Lucie
CareNow Urgent Care	92	Healthcare services	County wide
	1		

# The information below is from the St. Lucie County Economic Development Council website

DEMOGRA	APHICS OF ST. LUCI	E VS. REGION AND U.	S. POPULATION	
Description of Parameters	St. Lucie Co.	Treasure Coast*	Florida Average	U.S. Average
Population (2016)**	298,563	657,085	28,612,439	323,127,513
Population Growth (2010-2016)	10.3%	9.1%	9.6%	4.7%
Size of Workforce	136,550	290,993	-	
Source: 2016 Population Estimate as **The vintage year (e.g., V2016) refe not comparable.	•		). Different vintage years	of estimates are
Jobs by Age Group:				
Age 24 and <	8,333	23,095	968,329	-
Age 25 - 54	46,479	123,011	5,334,850	-
Age 55 and older	6,154	45,665	1,903,309	-
Median Age (2015)	44.8	47.1	41.9	37.8
Education Attainment:				
High School Only	17,854	48,433	1,957,342	-
Two-Year / Some College	20,664	55,593	2,667,162	-
Four-Year and Above College	15,513	41,741	1,806,180	-
Median Household Income (in 2016	o dollars) 2010-2014			
	\$45,282	\$45,155	\$49,426	\$55,322

\*Region - Includes Indian River, St. Lucie, Okeechobee and Martin Counties.

The region is home to a variety of life sciences companies, research institutions and biotech firms including Torrey Pines Institute for Molecular Studies, recently selected as a Center for National Cancer Institute NExT Program, USDA Agricultural & Horticultural Research Lab, Florida Atlantic University's Harbor Branch Oceanographic Institute, Scripps Research and the Maxx Planck Institute.

The Council on Aging of St. Lucie offers many social and recreational activities that include line dancing, computer classes, ceramics, cards, bingo, coffee and games, art, and social time.

## Description of Service System:

#### HEALTH CARE AND LONG TERM CARE

The number of providers for the health care and long term care delivery systems for each of the counties in PSA 9 is shown below. The data was gathered from the Agency for Health Care Administration as of May 26, 2016.

	INDIAN	U		PALM	ST.
	RIVER	MARTIN	OKEECHOBEE	BEACH	LUCIE
Adult Day Care	2	2	0	23	3
Adult Family Care Homes	0	0	0	21	15
Ambulatory Surgical Centers	11	3	1	34	7
Home Health Agencies	22	12	4	211	26
<ul> <li>Medicare/Medicaid Dual Certified</li> </ul>	2	1	0	44	3
- Medicare Certified Only	10	6	2	73	15
Nurse Registries	6	11	2	133	10
Homemaker and Companion Service Companies	9	12	2	142	31
Home Medical Equipment Provider	10	10	3	51	11
Portable X-Ray	1	0	0	4	0
Assisted Living Facilities	23	11	1	156	65
Hospitals	3	3	1	17	4
Hospitals with Skilled Nursing Units	1	0	0	0	0
End-Stage Renal Disease Center	3	1	1	34	6
Rural Health Clinic	0	0	0	4	0
Hospice	1	1	1	3	1
Community Mental Health - Partial Hospitalization Program	0	1	0	1	0
Comprehensive Outpatient Rehabilitation Facility	0	0	0	10	0
Residential Treatment Facility	0	0	0	6	1
Intermediate Care Facility for the Developmentally Disabled	0	1	0	1	2
Nursing Home	6	7	1	55	9
Licensed Medical Doctors	430	465	50	4551	435
Licensed Registered Nurses	2066	2622	331	17860	4069

#### Medically Underserved 65+

The total 65+ Medically Underserved Populations are shown below for each of our counties and the PSA as a whole. Data compares the 2017 DOEA County Profiles and the 2018 DOEA County Profiles.

2018	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	PSA 9
Total Medically Underserved	4,479	0	1,479	67,647	9,250	82,855

2017	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	PSA 9
Total Medically Underserved	12,187	2,279	2,474	29,861	20,919	67,720

The total medically underserved for the PSA as a whole has increased driven mainly by growth in Indian River and St. Lucie counties.

The service array from our contracted providers is listed below for each of the six Community Care Service Areas in PSA 9

AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC. SERVICE ARRAY - INDIAN RIVER COUNTY Febr							
ERVICES	IIIC1	IIIC2	IIIB	IIID	IIIE	IIIES	IIIEG
DULT DAY CARE			~		~		
DULT DAY HEALTH CARE							
ASIC SUBSIDY							
AREGIIVER TRAINING/SUPPORT (INDIVIDUAL)					~		1
AREGIIVER TRAINING/SUPPORT (GROUP)					✓		√
ASEAIDE							
ASE MANAGEMENT							1
CHORE			~			~	
CHORE (ENHANCED)			-				
CHRONIC DISEASE SELF-MANAGEMENT							
COMPANIONSHIP			~				
CONGREGATE MEALS	~		-				
CONGREGATE MEALS MANAGED CARE							-
CONGREGATE MEALS - BREAKFAST	•						
	1						-
ON GREGATE MEALS (SCREEN ING)	•						
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL							+
OUNSELING (GERONTOLOGICAL) - GROUP			-				
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUA	AL.		×		×		✓
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP			✓		~		~
DUCATION/TRAINING - INDIVIDUAL							<u> </u>
DUCATION/TRAINING - GROUP					~		✓
MERGENCY ALERT RESPONSE			~				
MERGEN CY HOME EN ERGY ASSISTANCE							
NHAN CE WELLNES							
SCORT							
INANCIAL RISK REDUCTION - MAINTENANCE AND ASSESSMENT							
IEALTH SUPPORT							
IOME DELIVERED MEALS		✓					
IOME DELIVERED MEALS - BREAKFAST							
IOME HEALTH AIDE							-
IOMEMAKER			~				-
NTERPRETER/TRANSLATING			~				
IOUSING IMPROVEMENT			-				
EGAL ASSISTANCE			~			1	~
ATERIAL AID			· ·			· ·	<u> </u>
			•			<u> </u>	+
ATTER OF BALANCE							
/EDICATION MANAGEMENT							
IUTRITION EDUCATION	~	1					
IUTRITION COUNSELING	~	~					
DCCUPATIONAL THERAPY							
OT HER SERVICES							
DUTREACH	~	~					
PERSONAL CARE			~				
PEST CONTROL INITIATION							
EST CONTROL INITIATION (ENHANCED)							
EST CONTROL MAINTENANCE							
PEST CONTROL RODENT							1
PHYSICAL THERAPY							Τ
OWERFUL TOOLS FOR CAREGIVERS		1					1
RESPITE - IN HOME		1	~		~		1
ESPITE IN-FACILITY		1	✓		· ·		1
ODENT CONTROL INITIATION							+
CREENING & ASSESSMENT		1	~		~	~	
HOPPING ASSISTANCE		l .					+
							+
ITTER							~
PEECH THERAPY							<u> </u>
PECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES						√	<u> </u>
AI CHI, MOVING FOR BETTER BALANCE							<b>I</b>
RANSPORTATION RANSPORTATION - MANAGED CARE			✓ ✓				

ERVICES	CCE	HCE ✓	ADI	EHEA
DULT DAY CARE DULT DAY HEALTH CARE	•	•		
ASIC SUBSIDY		✓		+
AREGIVER TRAINING/SUPPORT (INDIVIDUAL)				+
AREGIIVER TRAINING/SUPPORT (GROUP)				+
ASE AIDE	√	✓	1	+
ASEMANAGEMENT	✓	~	✓	<u> </u>
HORE	√			1
HORE (EN HANCED)	√			1
HRONIC DISEASE SELF-MANAGEMENT				
OMPANIONSHIP	✓			
ONGREGATE MEALS				
ONGREGATE MEALS MANAGED CARE				
ONGREGATE MEALS - BREAKFAST				
ONGREGATE MEALS (SCREENING)				
OUNSELING (GERONTOLOGICAL) - INDIVIDUAL	1			4
OUNSELING (GERONTOLOGICAL) - GROUP				4
OUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	✓			<b>_</b>
OUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP				<u> </u>
DUCATION/TRAINING-INDIVIDUAL				<b></b>
DUCATION/TRAINING - GROUP				<b></b>
MERGENCY ALERT RESPONSE	✓			<u> </u>
MERGENCY HOME ENERGY ASSISTANCE				<u> </u>
N HAN CE WELLN ES				<u> </u>
SCORT				
INANCIAL RISK REDUCTION - MAINTENANCE AND ASSESSMENT				
IEALTH SUPPORT				
IOME DELIVERED MEALS	<b>√</b>			
IOME DELIVERED MEALS - BREAKFAST				
IOME HEALTH AIDE	· ·			
	*			
N TERP RETE R/TRANS LATI NG				+
EGAL ASSISTANCE	✓			+
IATERIALAID				+
MATTER OF BALANCE				+
IEDICATION MANAGEMENT	✓			+
IUTRITION EDUCATION				
IUTRITION COUNSELING				1
OCCUPATIONAL THERAPY				1
OTHER SERVICES				1
DUTREACH				
ERSONAL CARE	√			
EST CONTROL INITIATION	√			
EST CONTROL INITIATION (EN HAN CED)	√			
EST CONTROL MAINTENANCE	✓			
EST CONTROL RODENT				
HYSICAL THERAPY				
OWERFUL TOOLS FOR CAREGIVERS				
ESPITE - IN HOME	✓		1	
ESPITE IN-FACILITY	✓		✓	
ODENT CONTROL INITIATION	✓			
CREENING & ASSESSMENT				1
HOPPING ASSISTANCE				<u> </u>
ITTER				<b>_</b>
PEECH THERAPY				<u> </u>
PECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES		√		<b>_</b>
AI CHI, MOVING FOR BETTER BALANCE				──
RANSPORTATION				──
RANSPORTATION - MANAGED CARE				

SERVICES	IIIC1	IIIC2	IIIB	IIID	IIIE	IIIES	IIIEG
ADULT DAY CARE					√	. <u></u>	
ADULT DAY HEALTH CARE			4				
BASIC SUBSIDY							
CAREGIIVER TRAINING/SUPPORT (INDIVIDUAL)					√		√
CAREGIIVER TRAINING/SUPPORT (GROUP)					√		√
CASE AIDE							
CASE MANAGEMENT							
CHORE							
CHORE (ENHANCED)							
CHRONIC DISEASE SELF-MANAGEMENT				√			
COMPANIONSHIP			√				
CONGREGATE MEALS	√						
CONGREGATE MEALS MANAGED CARE	√						
CONGREGATE MEALS - BREAKFAST	√						
CONGREGATE MEALS (SCREENING)	√						
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL							
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL			√		√		√
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP			√		√		√
EDUCATION/TRAINING - GROUP					√		√
EMERGENCY ALERT RESPONSE			√				
EMERGENCY HOME ENERGY ASSISTANCE							
ENHANCE WELLNES				√			
HOME DELIVERED MEALS		√					
HOME DELIVERED MEALS - BREAKFAST		√					
HOMEMAKER			√				
LEGAL ASSISTANCE			√			√	√
MEDICATION MANAGEMENT							
NUTRITION EDUCATION	√	√					
NUTRITION COUNSELING	√	√					
DUTREACH	√	√	√				
PERSONAL CARE			√			-	
PEST CONTROL INITIATION							
PEST CONTROL INITIATION (ENHANCED)							
PEST CONTROL MAINTENANCE							
PEST CONTROL RODENT INITIATION							
POWERFUL TOOLS FOR CAREGIVERS				√			
RESPITE - IN HOME			4				
RESPITE IN-FACILITY							
SCREENING & ASSESSMENT		✓	√		√		√
SPECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES						√	
TAI CHI, MOVING FOR BETTER BALANCE				√			
RANSPORTATION			√				
TRANSPORTATION - MANAGED CARE	1	1	√				

Programs and services offered directly by the Area Agency on Aging of Palm Beach /Treasure Coast, Inc. include Information/Referral, Screening/Assessment, Intake, Outreach, Serving Health Insurance Needs of Elders, Elder Rights, and the Foster Grandparent Program.

SERVICES	CCE	HCE	ADI	EHEAP
ADULT DAY CARE		HCE	ADI	EREAP
ADULT DAY HEALTH CARE	· ·			
BASIC SUBSIDY		1		
CAREGIIVER TRAINING/SUPPORT (INDIVIDUAL)		•		
CAREGIIVER TRAINING/SUPPORT (GROUP)				
CASE AIDE		1	✓	
CASE MANAGEMENT	· ·	•	, ,	
CHORE			·	
CHORE (ENHANCED)				
CHRONIC DISEASE SELF-MANAGEMENT				
COMPANIONSHIP	✓			
CONGREGATE MEALS				
CONGREGATE MEALS				
CONGREGATE MEALS MANAGED CARE				
CONGREGATE MEALS - BREAKFAST				
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL				
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL				
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	•			
EDUCATION/TRAINING - GROUP				
EMERGENCY ALERT RESPONSE				
EMERGENCY HOME ENERGY ASSISTANCE	•			
ENHANCE WELLNES				•
HOME DELIVERED MEALS	✓			
HOME DELIVERED MEALS - BREAKFAST	•			
HOMEMAKER				
LEGAL ASSISTANCE				
MEDICATION MANAGEMENT	· ·			
NUTRITION EDUCATION	•			
NUTRITION COUNSELING				
OUTREACH				
PERSONAL CARE				
PERSONAL CARE	· ·			
PEST CONTROL INITIATION (ENHANCED)	· ·			
PEST CONTROL INITIATION (EMPANCED)	· · · · · · · · · · · · · · · · · · ·			
PEST CONTROL MAINTENANCE				
POWERFUL TOOLS FOR CAREGIVERS				
RESPITE - IN HOME			✓	
RESPITE - IN HOIME	•	1	• •	
SCREENING & ASSESSMENT		,	· ·	
SPECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES				
TAI CHI, MOVING FOR BETTER BALANCE	•			
TRANSPORTATION				
TRANSPORTATION - MANAGED CARE				

Intake, Outreach, Serving Health Insurance Needs of Elders, Elder Rights, and the Foster Grandparent Program.

			C. SERVICE ARR				ebruary 25,
SERVICES	IIIC1	IIIC2	IIIB	IIID	IIIE	IIIES	IIIEG
ADULT DAY CARE			√		√		
ADULT DAY HEALTH CARE			√		√		
BASIC SUBSIDY							
CAREGIIVER TRAINING/SUPPORT (INDIVIDUAL)							✓
CAREGIIVER TRAINING/SUPPORT (GROUP)							✓
CASE AIDE							
CASE MANAGEMENT							
CHORE			√				
CHORE (ENHANCED)			√				
CHRONIC DISEASE SELF-MANAGEMENT				√			
COMPANIONSHIP			√				[
CONGREGATE MEALS	√						
CONGREGATE MEALS (SCREENING)	√						
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL							
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL							
EMERGENCY ALERT RESPONSE			1				
EMERGENCY HOME ENERGY ASSISTANCE							
ENHANCE WELLNES				✓			
HOME DELIVERED MEALS		√					
HOME HEALTH AIDE			1				
HOMEMAKER			√				
LEGAL ASSISTANCE			1			✓	✓
MATERIAL AID			1				
MEDICATION MANAGEMENT							
NUTRITION EDUCATION	√	√					
NUTRITION COUNSELING	√	1					
DUTREACH	√	1	1				
PERSONAL CARE			1				
PEST CONTROL INITIATION							
PEST CONTROL INITIATION (ENHANCED)							
PEST CONTROL MAINTENANCE							
PEST CONTROL RODENT INITIATION							
POWERFUL TOOLS FOR CAREGIVERS				1			
RESPITE - IN HOME			1		✓		
SCREENING & ASSESSMENT		1	√		√		✓
SITTER							✓
SPECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES							
TAI CHI, MOVING FOR BETTER BALANCE				1			
RANSPORTATION			1				

Health Insurance Needs of Elders, Elder Rights, and the Foster Grandparent Program.

AREA AGENCY ON AGING OF PALM				ebruary 25, 2
ERVICES	CCE	HCE	ADI	EHEAP
ADULT DAY CARE	√			
ADULT DAY HEALTH CARE				
BASIC SUBSIDY		✓		
CAREGIIVER TRAINING/SUPPORT (INDIVIDUAL)				
CAREGIIVER TRAINING/SUPPORT (GROUP)				
CASE AIDE	✓	✓	✓	
CASE MANAGEMENT	√	✓	√	
CHORE	√			
CHORE (ENHANCED)	√			
CHRONIC DISEASE SELF-MANAGEMENT				
COMPANIONSHIP				1
CONGREGATE MEALS				
CONGREGATE MEALS (SCREENING)				
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	√			
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	√			
MERGENCY ALERT RESPONSE	√			
MERGENCY HOME ENERGY ASSISTANCE				✓
INHANCE WELLNES				
IOME DELIVERED MEALS	√			
IOME HEALTH AIDE				
IOMEMAKER	√			
EGAL ASSISTANCE	√			
MATERIAL AID				
MEDICATION MANAGEMENT	√			
NUTRITION EDUCATION				
NUTRITION COUNSELING				
DUTREACH				
PERSONAL CARE	√			
PEST CONTROL INITIATION	√			
PEST CONTROL INITIATION (ENHANCED)	√			
PEST CONTROL MAINTENANCE	√			
PEST CONTROL RODENT INITIATION	1			
OWERFUL TOOLS FOR CAREGIVERS				1
RESPITE - IN HOME	1		✓	
CREENING & ASSESSMENT				1
ITTER			-	
PECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES	✓	✓		
AI CHI, MOVING FOR BETTER BALANCE				1
RANSPORTATION			-	

Programs and services offered directly by the Area Agency on Aging of Palm Beach /Treasure Coast, Inc. include Information/Referral, Screening/Assessment, Intake, Outreach, Serving Health Insurance Needs of Elders, Elder Rights, and the Foster Grandparent Program.

SERVICES	IIIC1	IIIC2	IIIB	IIID	IIIE	IIIES	IIIEG
ADULT DAY CARE			✓		✓		
BASIC SUBSIDY							<u> </u>
CAREGIIVER TRAINING/SUPPORT (INDIVIDUAL)					<b>√</b>		✓
CAREGIIVER TRAINING/SUPPORT (GROUP)					✓		✓
CASE AIDE							
CASE MANAGEMENT							
CHORE			✓			✓	
CHORE (ENHANCED)			✓			✓	
CHRONIC DISEASE SELF-MANAGEMENT				✓			
COMPANIONSHIP			✓				
CONGREGATE MEALS	✓						
CONGREGATE MEALS MANAGED CARE	✓						
CONGREGATE MEALS (SCREENING)	✓						
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL							
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - IND	IVIDUAL		✓		✓		✓
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GRO	DUP		1		✓		✓
EDUCATION/TRAINING - GROUP							✓
EMERGENCY ALERT RESPONSE							
EMERGENCY HOME ENERGY ASSISTANCE							
ENHANCE WELLNES				√			
ESCORT							
HOME DELIVERED MEALS		√					
HOME HEALTH AIDE			✓				
HOMEMAKER			✓				
LEGAL ASSISTANCE			✓			✓	✓
MEDICATION MANAGEMENT							
NUTRITION EDUCATION	✓	√					
NUTRITION COUNSELING	✓	√					
OTHER SERVICES							
OUTREACH	✓	✓	✓				
PERSONAL CARE			✓				
PEST CONTROL INITIATION							
PEST CONTROL INITIATION (ENHANCED)							
PEST CONTROL MAINTENANCE	1			1	1		<u> </u>
PEST CONTROL RODENT INITIATION		1		1			1
POWERFUL TOOLS FOR CAREGIVERS				√	✓		
RESPITE - IN HOME			1		<ul> <li>✓</li> </ul>		
RESPITE IN-FACILITY						1	
SCREENING & ASSESSMENT		✓	✓		✓	✓	✓
SITTER			· ·			· ·	· ·
SPECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES						✓	† · ·
TAI CHI, MOVING FOR BETTER BALANCE				✓		<u> </u>	
*Zip codes 33067,33424, 33425, 33426, 33427, 33428, 33429,	22/21 22/21	22422 224	24 22425 2		22444 22	145 22446 -	22449
21p codes 33067,33424, 33425, 33426, 33427, 33428, 33428, 33429, 33464, 33472, 33473, 33474, 33481, 33482, 33482, 33483, 33484, 334	,		,	,	, 33444, 334	++J, 33440, 3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
				. include Info			

AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC. SERVICE ARRAY - PALM BEACH COUNTY AREA A* February 25, 2016							
·	T						
SERVICES	CCE	HCE	ADI	EHEAP			
ADULT DAY CARE	✓	✓					
ASIC SUBSIDY		✓					
CAREGIIVER TRAINING/SUPPORT (INDIVIDUAL)	✓	✓	√				
CAREGIIVER TRAINING/SUPPORT (GROUP)	· .						
CASE AIDE	✓	✓	✓				
CASE MANAGEMENT	✓	✓	✓				
CHORE	√	✓					
CHORE (ENHANCED)	✓	✓					
CHRONIC DISEASE SELF-MANAGEMENT							
COMPANIONSHIP	✓						
CONGREGATE MEALS							
CONGREGATE MEALS MANAGED CARE							
CONGREGATE MEALS (SCREENING)							
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	✓	✓	✓				
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - IND	ol ✓		✓				
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GRO	DUP						
DUCATION/TRAINING - GROUP							
MERGENCY ALERT RESPONSE	✓						
MERGENCY HOME ENERGY ASSISTANCE				√			
INHANCE WELLNES							
SCORT	✓						
IOME DELIVERED MEALS	✓	✓					
IOME HEALTH AIDE							
IOMEMAKER	✓	✓					
EGAL ASSISTANCE	✓						
	✓						
JUTRITION EDUCATION							
NUTRITION COUNSELING	√						
DTHER SERVICES							
DUTREACH							
PERSONAL CARE	✓	✓					
PEST CONTROL INITIATION	· ✓	•					
PEST CONTROL INITIATION (ENHANCED)	· ✓						
PEST CONTROL MAINTENANCE	· ·						
PEST CONTROL MAINTENANCE	· ·						
OWERFUL TOOLS FOR CAREGIVERS							
	✓		√				
RESPITE - IN HOME	▼ ✓	✓	✓ ✓				
	•	•	•				
CREENING & ASSESSMENT							
	✓	✓					
PECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES	<b>✓</b>	×		<b> </b>			
AI CHI, MOVING FOR BETTER BALANCE							
Zip codes 33067,33424, 33425, 33426, 33427, 33428, 33429,	-		-	-			
3437, 33444, 33445, 33446, 33448, 33464, 33472, 33473, 33							
Programs and services offered directly by the Area Agency on Agency and Serveral Screening (Assocrament Intake Outroach	-						
nformation/Referral, Screening/Assessment, Intake, Outreach, ights, and the Foster Grandparent Program.	serving Health	i insurance N	Reeus of Elde	iis, Elüer			

DULT DAY CARE DULT DAY HEALTH CARE ASIC SUBSIDY AREGIIVER TRAINING/SUPPORT (INDIVIDUAL) AREGIIVER TRAINING/SUPPORT (GROUP) ASE MANAGEMENT HORE HORE HORE HORE HORE DUSELSE SELF-MANAGEMENT DMPANIONSHIP DNGREGATE MEALS DUNSELING (GERONTOLOGICAL) - INDIVIDUAL DUNSELING (GERONTOLOGICAL) - GROUP DUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL DUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP DUCATION/TRAINING - INDIVIDUAL DUCATION/TRAINING - GROUP MERGENCY HOME ENERGY ASSISTANCE NHANCE WELLNES	×		✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓	<pre>////////////////////////////////////</pre>		× ×	<i>•</i>
ASIC SUBSIDY AREGIVER TRAINING/SUPPORT (INDIVIDUAL) AREGIVER TRAINING/SUPPORT (GROUP) SSE MANAGEMENT HORE HORE (ENHANCED) HORE (ENHANCED) HORD (GERONTOLOGICAL) - INDIVIDUAL DUNSELING (GERONTOLOGICAL) - INDIVIDUAL DUNSELING (GERONTOLOGICAL) - GROUP DUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL DUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP DUCATION/TRAINING - INDIVIDUAL DUXCATION/TRAINING - GROUP MERGENCY ALERT RESPONSE MERGENCY HOME ENERGY ASSISTANCE	×		✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓	✓ ✓	× 		✓ 
AREGIIVER TRAINING/SUPPORT (INDIVIDUAL) AREGIIVER TRAINING/SUPPORT (GROUP) ASE MANAGEMENT HORE HORE (ENHANCED) HRONIC DISEASE SELF-MANAGEMENT DMPANIONSHIP DONGEGATE MEALS DUNSELING (GERONTOLOGICAL) - INDIVIDUAL DUNSELING (GERONTOLOGICAL) - GROUP DUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL DUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP DUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP DUNSTING - INDIVIDUAL DUNSTING - INDIVIDUAL DUCATION/TRAINING - INDIVIDUAL DUCATION/TRAINING - GROUP WERGENCY HOME ENERGY ASSISTANCE	×		✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓           ✓	· · · · · · · · · · · · · · · · · · ·	× 		¥
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DUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL DUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP DUCATION/TRAINING - INDIVIDUAL DUCATION/TRAINING - GROUP WERGENCY ALERT RESPONSE WERGENCY HOME ENERGY ASSISTANCE			1				
DUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP DUCATION/TRAINING - INDIVIDUAL DUCATION/TRAINING - GROUP WERGENCY ALERT RESPONSE WERGENCY HOME ENERGY ASSISTANCE					v		1
DUCATION/TRAINING - INDIVIDUAL DUCATION/TRAINING - GROUP WERGENCY ALERT RESPONSE WERGENCY HOME ENERGY ASSISTANCE			· ·		1		• ✓
DUCATION/TRAINING - GROUP MERGENCY ALERT RESPONSE MERGENCY HOME ENERGY ASSISTANCE				1	*		*
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VERGENCY HOME ENERGY ASSISTANCE		1	ļ.,	ł			1
			✓	ł			
NHANCE WELLNES				<u> </u>			
			<u> </u>	✓			
SCORT			✓				
NANCIAL RISK REDUCTION - MAINTENANCE AND ASSESSMENT							
EALTH SUPPORT							
OME DELIVERED MEALS		1					
OME HEALTH AIDE			1				
OMEMAKER			1				
ITERPRETER/TRANSLATING			1				
OUSING IMPROVEMENT			1			✓	
GAL ASSISTANCE						1	
ATERIALAID			1			✓	
ATTER OF BALANCE				1			
EDICATION MANAGEMENT							
UTRITION EDUCATION		✓					
UTRITION COUNSELING		√					
CCUPATIONAL THERAPY							
THER SERVICES							
ERSONAL CARE			1				
EST CONTROL INITIATION							
EST CONTROL INITIATION (ENHANCED)							
EST CONTROL MAINTENANCE							
EST CONTROL RODENT							
HYSICAL THERAPY		1	1	1			
DWERFUL TOOLS FOR CAREGIVERS		1		1	1		
ESPITE - IN HOME			1		· ✓		
SPITE IN HOME		+	<u>`</u>		· · · · · · · · · · · · · · · · · · ·		
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HOPPING ASSISTANCE		1	<u> </u>	1		╂────┤	1
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		1					
PECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES			l	<b>,</b>		✓	
AI CHI, MOVING FOR BETTER BALANCE		· · · ·	· · ·	✓		ļ	
RANSPORTATION rograms and services offered directly by the Area Agency on Aging of Palm Beach /Treasure		√	✓				

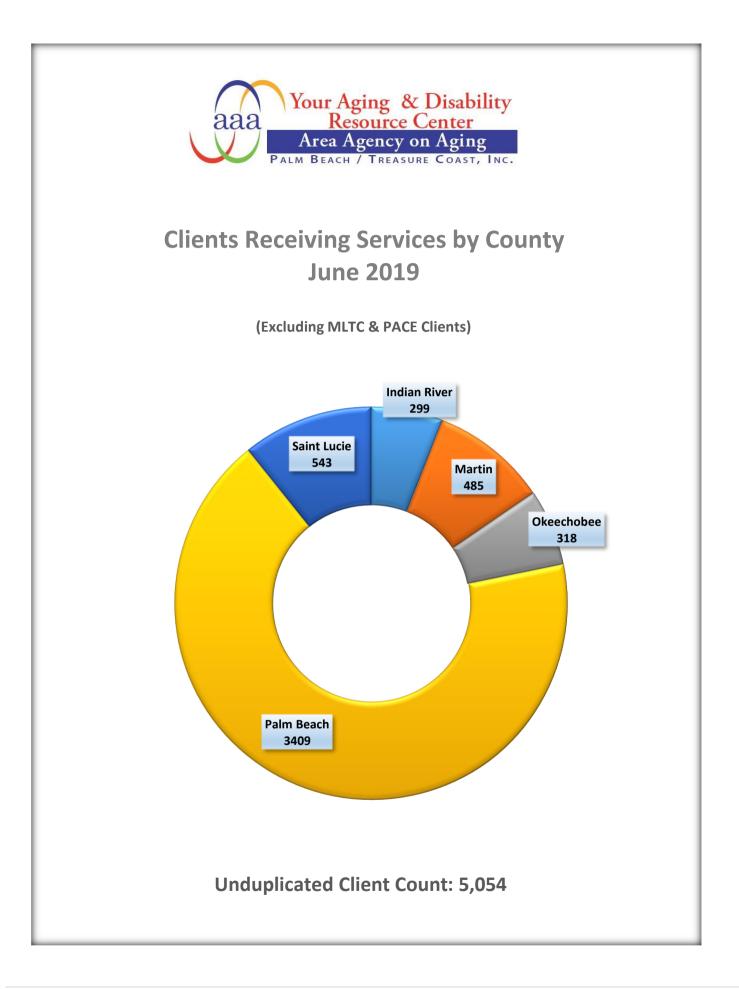
ERVICES	CCE	HCE	ADI	LSP	EHEAP
DULT DAY CARE	✓	1			
DULT DAY HEALTH CARE	✓				
ASIC SUBSIDY		1			
AREGIIVER TRAINING/SUPPORT (INDIVIDUAL)	✓				
AREGIIVER TRAINING/SUPPORT (GROUP)	✓				
ASE MANAGEMENT	✓	✓	√		
HORE	✓				
HORE (ENHANCED)	√				
HRONIC DISEASE SELF-MANAGEMENT					
OMPANIONSHIP	✓				
ONGREGATE MEALS					
OUNSELING (GERONTOLOGICAL) - INDIVIDUAL	√				
OUNSELING (GERONTOLOGICAL) - GROUP					
OUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	√				
OUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP		İ			1
DUCATION/TRAINING - INDIVIDUAL			✓		
DUCATION/TRAINING - GROUP		İ			1
MERGENCY ALERT RESPONSE	✓				
MERGENCY HOME ENERGY ASSISTANCE		1	1 1		1
NHANCE WELLNES					
SCORT	✓				
INANCIAL RISK REDUCTION - MAINTENANCE AND ASSESSMENT	√				
EALTH SUPPORT	<b>√</b>				
OME DELIVERED MEALS	✓				
OME BELIVERED MERKED	· · ·				
OMEMAKER	✓	1		✓	
VTERPRETER/TRANSLATING					
OUSING IMPROVEMENT	√		1		
EGAL ASSISTANCE	1				
IATERIAL AID	· · · · · · · · · · · · · · · · · · ·				
IATTER OF BALANCE					
IEDICATION MANAGEMENT	1				
IUTRITION EDUCATION					
UTRITION COUNSELING	1				
OCCUPATIONAL THERAPY	· · · · · · · · · · · · · · · · · · ·				
THER SERVICES	· · · · · · · · · · · · · · · · · · ·				
ERSONAL CARE	· · · · · · · · · · · · · · · · · · ·	1		✓	
EST CONTROL INITIATION	· · ·			•	
EST CONTROL INITIATION (ENHANCED)	· · · · · · · · · · · · · · · · · · ·				
EST CONTROL MAINTENANCE	· · · · · · · · · · · · · · · · · · ·				
EST CONTROL MAINTENANCE	· · ·				
HYSICAL THERAPY	· · · · · · · · · · · · · · · · · · ·				
OWERFUL TOOLS FOR CAREGIVERS					
ESPITE - IN HOME		1	✓		
ESPITE IN FACILITY	·		· ·		
HOPPING ASSISTANCE	✓	1			
ITTER			<u> </u>		
PEECH THERAPY	✓	ł	<u>↓</u>		}
	· · · · · · · · · · · · · · · · · · ·		<u> </u>		
PECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES		ł	╂───┤		ł
AI CHI, MOVING FOR BETTER BALANCE			┨────┤		
RANSPORTATION		L			L
rograms and services offered directly by the Area Agency on Aging of Palm Beach /Treas Isurance Needs of Elders, Elder Rights, and the Foster Grandparent Program.	ure Coast, Inc. include Informatic	on/Referral, Screeni	ng/Assessment, In	itake, Outreach, Se	rving Health

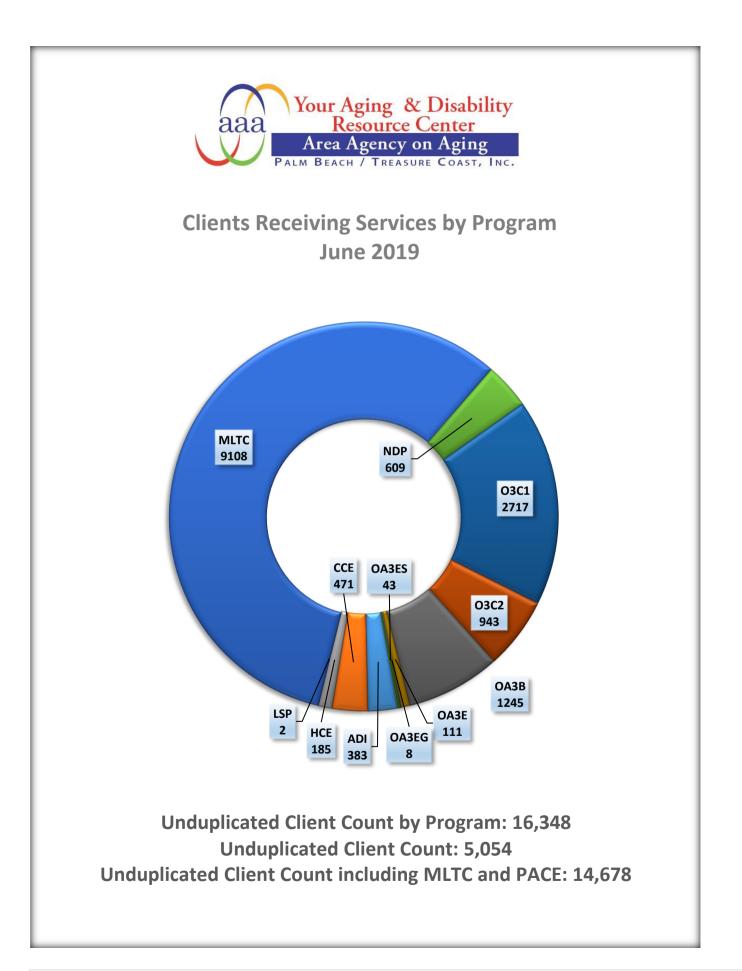
SERVICES	IIIC1	IIIC2	IIIB	IIID	IIIE	IIIES	IIIEG
ADULT DAY CARE							
BASIC SUBSIDY							
CAREGIIVER TRAINING/SUPPORT (INDIVIDUAL)					✓		✓
CAREGIIVER TRAINING/SUPPORT (GROUP)					✓		✓
CASE AIDE							
CASE MANAGEMENT							
CHORE							
CHORE (ENHANCED)							
CHRONIC DISEASE SELF-MANAGEMENT				1			
COMPANIONSHIP							
CONGREGATE MEALS	1						
CONGREGATE MEALS MANAGED CARE	1						
CONGREGATE MEALS (SCREENING)	√						
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL							
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL			✓		√		
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP			✓		✓		
DUCATION/TRAINING - GROUP					✓		
MERGENCY ALERT RESPONSE			1				
EMERGENCY HOME ENERGY ASSISTANCE							
ENHANCE WELLNES				1			
HOME DELIVERED MEALS		✓					
HOMEMAKER			✓				
EGAL ASSISTANCE			✓			✓	1
MATTER OF BALANCE							
NUTRITION EDUCATION	✓	1					
NUTRITION COUNSELING		1					
DUTREACH	1	1	✓				
PERSONAL CARE			✓				
PEST CONTROL INITIATION							
PEST CONTROL INITIATION (ENHANCED)							
PEST CONTROL MAINTENANCE							
PEST CONTROL RODENT INITIATION							
POWERFUL TOOLS FOR CAREGIVERS				1			
RESPITE - IN HOME			✓		✓		1
RESPITE IN-FACILITY			1		1		
CREENING & ASSESSMENT		1	1		1	1	1
ITTER		1	1	İ	1		1
PECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES		1	1	1	1	1	1
AI CHI, MOVING FOR BETTER BALANCE		1	1	1	1		1
RANSPORTATION		1	~	1	1	1	1
RANSPORTATION - MANAGED CARE		1	, ,	1			1

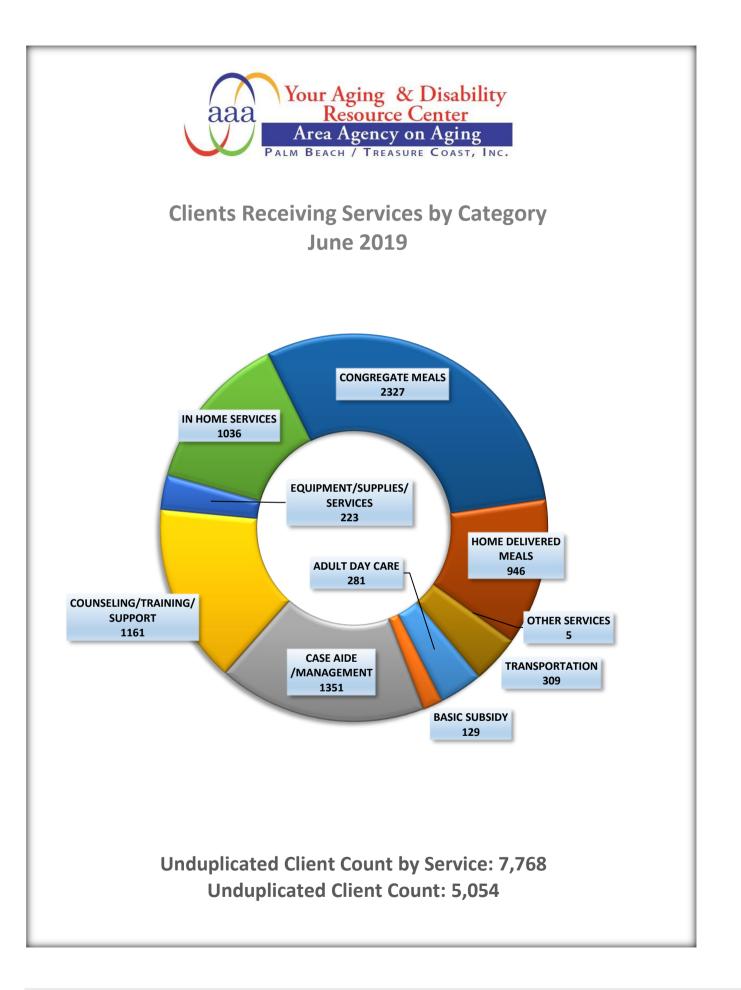
SERVICES	CCE	HCE	ADI	EHEAF
ADULT DAY CARE	√	HEL		
BASIC SUBSIDY		✓		
CAREGIIVER TRAINING/SUPPORT (INDIVIDUAL)				
CAREGIIVER TRAINING/SUPPORT (GROUP)				
CASE AIDE	1	✓	✓	
CASE MANAGEMENT	1	✓	✓	
CHORE	1			
CHORE (ENHANCED)	✓			
CHRONIC DISEASE SELF-MANAGEMENT				
COMPANIONSHIP	√			
CONGREGATE MEALS				
CONGREGATE MEALS MANAGED CARE				
CONGREGATE MEALS (SCREENING)				
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	√			
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	✓			
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - GROUP				
EDUCATION/TRAINING - GROUP				
EMERGENCY ALERT RESPONSE	√			
EMERGENCY HOME ENERGY ASSISTANCE				✓
ENHANCE WELLNES				
HOME DELIVERED MEALS	✓			
HOMEMAKER	√			
LEGAL ASSISTANCE	√			
MATTER OF BALANCE	√			
NUTRITION EDUCATION				
NUTRITION COUNSELING				
OUTREACH				
PERSONAL CARE	√			
PEST CONTROL INITIATION	√			
PEST CONTROL INITIATION (ENHANCED)	✓			
PEST CONTROL MAINTENANCE	√			
PEST CONTROL RODENT INITIATION	√			
POWERFUL TOOLS FOR CAREGIVERS				
RESPITE - IN HOME	✓	1	√	
RESPITE IN-FACILITY			4	
SCREENING & ASSESSMENT				
SITTER				
SPECIALIZED MEDICAL EQUIPMENT, SERVICES AND SUPPLIES	√	✓	4	
TAI CHI, MOVING FOR BETTER BALANCE				
TRANSPORTATION				
TRANSPORTATION - MANAGED CARE				

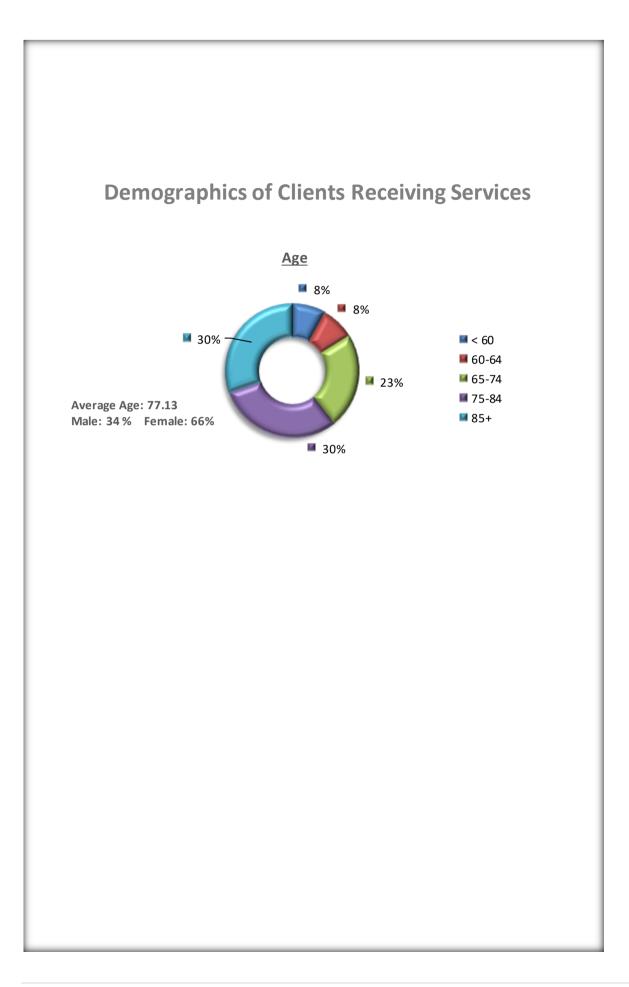
The contracted providers that deliver the services above include: Alzheimer's Community Care, Inc.; Council on Aging of Martin County, Inc.; Council on Aging of St. Lucie County, Inc.; Critical Signal Technologies, Palm Beach County Division of Senior Services; Florida Rural Legal Services, Inc.; M.D. Home Health, LLC; MorseLife Care Management and Counseling; Okeechobee Senior Services; Palm Tran; Ruth and Norman Rales Jewish Family Services, Senior Resource Association, and The Volen Center. Title IIID services are provided directly by Your ADRC as is the Title IIIE service Powerful Tools for Caregivers.

The following charts portray an overall snapshot of the PSA, including the number of registered services provided and the number of clients served in each county. The charts delineate active clients by county, program and service. The demographics of the clients receiving and waiting for services is also provided. All data is taken from CIRTS and is as of June 2019.









PSA 9 currently has 8 SMMC LTC providers. The number of clients enrolled for each as of September 3, 2019 is listed below. This makes for a total of 114,575 Statewide Medicaid Managed Care Long Term Care clients enrolled in PSA 9 as of September 3, 2019.

	Coventry	Florida	Humana Medical	Molina
	Healthcare of FL,	Community Care	Health Plan, Inc.	Healthcare, Inc.
	Inc.			
# of Clients	4,174	7,490	28,089	2924

	Simply Healthcare	Sunshine State	United Healthcare	Wellcare of
	Plans, Inc.	Health Plan, Inc.	of Florida, Inc.	Florida, Inc.
# of Clients	8,339	43,929	11,536	8,094

In addition to transportation provided by our OAA contracted providers, the transportation service delivery systems listed below are from the Florida Commission for the Transportation Disadvantaged 2018 Annual Performance Report.

2017-2018 CTC System Information

COUNTY	OPERATING	COORDINATOR'S	ORGANIZATION	NETWORK TYPE
	ENVIRONMENT	NAME	ТҮРЕ	
Indian River	Urban	Senior Resource	Private Non-Profit	Partial Brokerage
		Association, Inc.		
Martin	Urban	Medical	Private For-Profit	Complete Brokerage
		Transportation		
		Management, Inc.		
Okeechobee	Rural	MV Contract	Private For-Profit	Complete Brokerage
		Transportation		
Palm Beach	Urban	Palm Beach County	County	Partial Brokerage
St. Lucie	Urban	St. Lucie B.O.C.C.	County	Complete Brokerage

### Legal Services

PSA 9 has two pro bono legal aid services for the area. Legal Aid Society of Palm Beach County serves Palm Beach County. Florida Rural Legal Services serves the other four counties and has offices in Belle Glade, West Palm Beach, and Fort Pierce. Services specific to the elderly are outlined below.

### Legal Aid Society

Legal Aid Society provides legal advice and representation to Palm Beach County residents who are 60 years of age or older and have been the victims of abuse and exploitation by relatives, merchants or others. Staff handles Social Security, Medicare and housing matters and offers special assistance to grandparents raising grandchildren.

**Public Guardianship** – Legal Aid Society offers a full range of guardianship and legal services to indigent, adjudicated incapacitated elders who are without family or friends care for or assist them.

Additional services for seniors are listed below.

### Abuse and Exploitation:

- · Representation of victims of domestic violence to obtain protective orders against abusers
- Exploitation by family member

### **Housing Issues:**

- Landlord Tenant
- Public/subsidized housing
- Eviction Defense

### Health and Public Benefits:

- Food Stamps
- SSI and Social Security
- Medicaid
- Medicare
- Managed Care and Long-Term Care

### **Consumer Issues:**

- Foreclosure Defense
- Bankruptcy (to save home)
- Debt Collection Defense
- Defending Garnishment of Social Security and Wages

### Naturalization Project:

- Assistance to individuals seeking citizenship to qualify for public benefits
- Assistance with medical and fee waivers

### Public Guardianship Project:

This project provides a full range of guardianship and legal services to indigent, adjudicated incapacitated individuals who are without family or friends to care for or assist them. The project's goal is to enhance the quality of life for these persons while respecting their personal dignity and right to self-determination.

### **Veterans Advocacy Project:**

The LASPBC Veteran's Advocacy Project (LASPBC VAP), funded by the Retirement Research Foundation, was created to assist Palm Beach County's Senior veteran population and those least connected to existing service networks, such as widows and family members of elderly veterans.

### Florida Rural Legal Services

Florida Rural Legal Services provides a wide-range of free civil legal advice and representation to seniors ages 60 and over. Florida Rural Legal Services lawyers and staff handle many different legal issues for seniors, including consumer problems, family matters, elder abuse, access to healthcare, public benefits issues, housing problems and future planning (wills, living wills, health care proxies, powers of attorney, Medicaid planning, and more).

Florida Rural Legal Services can arrange home visits for clients who are homebound or in a hospital or a nursing home. In addition, Florida Rural Legal Services staff will try to provide information and referrals for legal problems that they do not offer services for.

### Role in Interagency Collaborative Efforts:

The Area Agency on Aging of Palm Beach/Treasure Coast, Inc. participates in a multitude of collaborative efforts across the PSA. These include initiatives directed toward transportation, healthy living, elder rights, wellness and more. The chart below reflects these collaborations and identifies the focus areas.

Area Served	Community	Focus Area	Department
	Organization		
Palm Beach County	Palm Beach County Community Services	Participate in Senior Forums, provide data and information on senior needs to Planning Department. Complete the Senior portion of the Health and Human Services Indicator Report. Provide input to Senior RFP	Consumer Care & Planning
	Palm Beach County Government		Executive Office
Palm Beach County	Countywide Community Rievitalization Team	Share information with local communities and Palm Beach County Departments regarding Your ADRC services. Learn from local residents of their community needs	Consumer Care and Planning
Palm Beach County	Palm Beach County CHIP Advisory Council	Ensure strategies to address senior needs are included in the Community Health Improvement Plan	Consumer Care and Planning
Palm Beach County	Palm Beach County Respite Coalition	Share Your ADRC Resources with Community Providers. Learn of additional resources for the REFER database	Consumer Care and Planning
Palm Beach County	Homeless and Housing Alliance Palm Beach County	Collaboration with all agencies that provide resources for homelessness and housing with in the Palm Beach County network.	Helpline Consumer Care and Planning
Palm Beach County	HHA Unmet Needs Committee- focus on Seniors	Identify and look for solutions to the unmet needs of affordable senior housing and homelessness	Helpline Consumer Care and Planning
Martin County	Martin County CHIP Advisory Council	Ensure strategies to address senior needs are included in the Community Health Improvement Plan	Consumer Care and Planning
St. Lucie County	United Way of St. Lucie County	Input regarding senior and caregiver needs for Healthy Vision RFP	Consumer Care & Planning
Boynton Beach Zip Code 33435 and Surrounding Area	Healthier Boynton Beach	Family Caregiving	Consumer Care & Planning
St. Lucie County	St. Lucie County Department of Health	Address Senior Needs for Community Health Needs Assessment and Community Health Improvement Plan Participate in Age-Friendly Community Initiative	Consumer Care & Planning

Area Served	Community Organization	Focus Area	Department		
St. Lucie County	St. Lucie Chamber of	Networking. Information for Area	Consumer Care and Planning		
	Commerce	Plan Socio and Economic Profile			
Palm Beach and	Health Council of	Input to Community Needs	Consumer Care & Planning		
Martin Counties	Southeast Florida	Assessment to reflect the needs of			
		seniors and caregivers			
Palm Beach	Palm Beach County	Participation in Future of Medicine	Communications/		
County	Medical Society	Summit/educating physicians on	Charitable Giving		
		resources for senior patients and			
		caregivers			
All cities within	Palm Beach County	Outreach/Legislative updates/ and	Consumer Care & Planning		
Palm Beach	League of Cities	Advocacy			
County who are					
Members					
Martin, St. Lucie,	Treasure Coast	Outreach/Legislative updates/ and	Consumer Care &		
Indian River and	League of Cities	Advocacy	Planning/Advisory Council		
Okeechobee			Advocacy Chair		
Counties					
Palm Beach,	WPB Veterans	Veterans Independence Program	Organizational Integrity		
Martin, St. Lucie,	Affairs Medical				
Indian River and	Center				
Okeechobee					
Counties					
Palm Beach,	AARP Florida	State of FL. Senior Day	Charitable Giving		
Martin, St. Lucie,					
Indian River and		Sponsorships			
Okeechobee					
Counties					
Palm Beach	Nonprofits First	Accreditation/Compliance	Executive Office (filled in by Lee)		
Palm Beach	School District of	Mentoring/Tutoring youth Pre-K to	Foster Grandparent		
	Palm Beach County	3rd grade.			
Okeechobee	Okeechobee School	Mentoring/Tutoring youth Pre-K to	Foster Grandparent		
	Board	3rd grade.			
St. Lucie	School Board of St.	Mentoring/Tutoring youth Pre-K to	Foster Grandparent		
	Lucie County	3rd grade.			
Martin	School Board of	Mentoring/Tutoring youth Pre-K to	Foster Grandparent		
	Martin County	3rd grade.			
	Palm Beach		Consumer Care & Planning		
	Habilitation				
Select areas of	American	Learn the need of youth caregivers,	Consumer Care & Planning		
Palm Beach	Association of	inform them of resources, and			
County	Caregiving Youth	advocate for OAA funding for them			
			Communications/		
		Support of and participation in	Charitable Giving		
		annual conference and education			
		on resources			
Palm Beach	Community Partners	Senior Housing Needs	Consumer Care & Planning		
County					

Area Served	Community Organization	Focus Area	Department		
Palm Beach County	Lewis Realty Group,	Senior Housing Needs	Consumer Care & Planning		
Palm Beach Riviera Beach- Pal Community De		Participation in Health Fairs – Delivery of Innervation (Evidence Based Programs)	Healthy Living		
Palm Beach	Century Village	Delivery of Innervation (Evidence Based Programs)	Healthy Living		
Palm Beach	Villa Franciscan - Riviera Beach	Participation in Health Fairs – Delivery of Innervation (Evidence Based Programs)	Healthy Living		
Palm Beach	Royal Palm Beach Cultural Ctr.	Participation in Health Fairs – Delivery of Innervation (Evidence Based Programs)	Healthy Living		
St. Lucie	Florida Department of Health in St. Lucie	Participation in the Community Health Improvement Plan – Possible coordination of CDSM & DSMP trainings- pending availability of funding	Consumer Care and Planning Healthy Living		
St. Lucie	Madison Vines Senior Community	Delivering intervention on Fall Prevention, Living Healthy and DSMP	Healthy Living		
St. Lucie	Your Plate Health & Wellness Ctr.	Collaboration for presentations and workshops delivery	Healthy Living		
Palm Beach, Martin, St. Lucie, Indian River & Okeechobee Counties	ILS -Independent Living Systems	Care Transition agreement	Healthy Living		
Palm Beach County	JFK MEDICAL CENTER	Fall Prevention, Healthy Living Interventions & Initiatives – Collaborations with Senior Educational Events	Healthy Living		
Palm Beach County	Deliver the Dream	Agreement (MOU) created for the delivery of PTC Program	Healthy Living		
Palm Beach	Brookdale - West	Fall Prevention, Healthy Living Interventions & Initiatives – Collaborations with Senior Educational	Healthy Living		
Okeechobee County	Hospice of Okeechobee	Agreement (MOU) created for the delivery of PTC Program	Healthy Living		
Palm Beach	Accountable Care Organization (ACO)	Presentation on Care Transition program	Healthy Living		
Martin County	Council on Aging Martin County	Agreement (MOU) created for the delivery of PTC Program	Healthy Living		

Area Served	Community Organization	Focus Area	Department		
Palm Beach, Martin, St. Lucie, Indian River & Okeechobee	Department of Children and Families	Medicaid and Food Stamp applications	Helpline		
Counties Palm Beach	MorseLife/PACE	Referrals for PACE program for Medicaid Probable clients	Helpline		
	VP government and Provider Relations		Healthy Living		
Palm Beach, Martin and St. Lucie	WellMed Charitable Giving Foundation	Crisis Fund for Seniors	Helpline		
Palm Beach, Martin, St. Lucie, Indian River & Okeechobee Counties	CARES 9A and 9B	Collaboration on Home and Community Based Medicaid cases	Helpline		
Palm Beach, Martin, St. Lucie, Indian River & Okeechobee Counties	211	Collaboration benefits for seniors to include: Elder Crisis Outreach and Sunshine Calls	Helpline		
Okeechobee	United Way of Lee, Hendry, Glades and Okeechobee	Free Medicare Services, Outreach and Advocacy	SHINE		
Vero Beach	Indian River Senior Collaborative	Board Member; Addressing Senior needs in the community and filling gaps.	SHINE		
St Lucie & Martin	CRC (Community Rescource Collaborative)	Member; Outreach and delivering needed services to the St Lucie and Martin County senior residents	SHINE		
Martin & St Lucie	Treasure Coast Health Coalition	Member; Outreach and promotion of health information to St Lucie and Martin senior residents.	SHINE		
Palm Beach	Encorepbc	Finding employment, volunteer and entrepreneurial opportunities for older adults	Human Resources		
Palm Beach	AARP Foundation	Senior employment program	Human Resources		
Okeechobee County	Children's Services of Okeechobee County	FGP	Foster Grandparent Program		
Palm Beach County	United Way of Palm Beach County	FGP	Foster Grandparent Program		
Martin County	Council on Aging Martin County	Agreement (MOU) created for the delivery of PTC Program	Healthy Living		
Palm Beach	Sacred Heart Catholic Church	Agreement (MOU) created for the delivery of PTC Program	Healthy Living		
Palm Beach, Martin, St. Lucie,	L.O.T. Health Services, Inc.	Agreement created for the delivery care transition care	Healthy Living		

Area Served	Community Organization	Focus Area	Department
Indian River & Okeechobee Counties			
Palm Beach The Jerome Gold Center For Behavioral Healt		Care Transitions – Mental Health Portion	Healthy Living
St. Lucie	Florida Health Networks (FHN)	Agreement created to serve WellMed patient with fall prevention interventions	Healthy Living
Palm Beach	American Parkinson Disease Ass.	Trained individuals for the PTC program	Healthy Living
Palm Beach, Martin, St. Lucie, Indian River & Okeechobee Counties	Catholic Charities	Collaboration by training and delivery of PTC, MOB, CDSMP & DSMP through their parish Nurses program	Healthy Living
Palm Beach	Great Charity Challenge- Ziegler Family Foundation	Received funding for the training of PEARLS instructors	Healthy Living
Martin County	Children's Service Council	Agreement for the use of their facility for the purpose of training and delivering workshops	Healthy Living
Palm Beach, Martin, St. Lucie, Indian River & Okeechobee Counties	SMMCLTC Partner Meeting	Collaboration with CARES/DCF/Medicaid Long term care plans and PACE	Helpline
Palm Beach	P.B. Economic Crime Unit	Economic crime	Elder Rights
Palm Beach/Treasure Coast	Better Business Bureau	Unscrupulous business practices, exploitation, advocacy for victims	Elder Rights
Palm Beach/Treasure Coast	International Association of Financial Crimes Investigators (IAFCI)	Financial Crimes/Fraud Intel	Elder Rights
Treasure Coast	Treasure Coast Advocates for Seniors	Navigating the system of services available to seniors and their caregivers	Advisory Council/ Elder Rights
Treasure Coast	19th Judicial Circuit Victims Rights Coalition	Provide community resources and financial assistance to crime victims. Promote awareness of victim issues/victim rights. Host Victim Rights Week events.	Elder Rights
Palm Beach County	State Attorney's Office – 15 <sup>th</sup> Judicial Circuit	Elder Abuse Task Force	Elder Rights

Area Served	Community	Focus Area	Department
	Organization		
Palm	Caregiver Media;	Supporting, participating and	Communications/Healthy
Beach/Treasure	Fearless Caregiver	educating caregivers on available	Living/Helpline
Coast	Conferences	resources	
Palm Beach	PBC Emergency	Support the disaster preparedness	Emergency Management
County	Management	and recovery efforts of the county	Coordinator
Palm	Alzheimer's	Support, participation and	Communications/
Beach/Treasure	Community Care	education for seniors and caregivers	Charitable Giving
Coast			
Palm Beach	Palm Beach Chamber	Awareness and education	Communications/
	of Commerce		Charitable Giving

Your ADRC participates on the United way of Palm Beach County's Hunger Relief Advisory Committee and Senior Hunger Relief Committee. This allows staff to advocate for the needs of seniors, share information regarding home-delivered meals waiting lists and SNAP participation rates, as well as educate community partners regarding services offered by Your ADRC.

Staff participate with both the Florida Department of Health in Palm Beach County and Florida Department of Health in St. Lucie County to assist with planning for Age-Friendly Public Health Systems.

Staff participates in the Indian River County Senior Collaborative to provide information regarding seniors and caregivers and to support the Indian River County Age-Friendly Initiative.

Staff participate in and make presentations to the Palm Beach County Countywide Community Re-vitalization Team meetings to learn of local community needs and share information on resources.

Staff attend 211's monthly Interagency Meetings to learn of new resources and to share information regarding Your ADRC's services.

Elder Rights collaborates with the Office of the Attorney General, County Departments of Consumer Affairs, Florida Office of Financial Regulation, Seniors vs. Crime, legal service providers, local task forces and national aging networks to discuss challenges, identify solutions, and locate resources.

### SWOT Development Process Description:

The SWOT development began with input from all of staff. This input was reviewed and added to by both Your ADRC's Advisory Council and Board of Directors. It was included with the portions of the Area Plan posted with the notice of public hearing on August 19, 2019 for public comment.

### Strengths:

### **COMMUNITY RELATIONSHIPS**

• The ADRC has solid relationships with many community partners who comprise a huge network.

### STAFF

- The ADRC has a strong, diverse, compassionate, resilient, adaptable, empathetic, and creative staff that are multi-lingual, skilled, dedicated, knowledgeable, and passionate about the people they serve. They are committed to the organization's mission and to serving all diverse needs regardless of financial situation or cultural barriers.
- ADRC staff are skilled leaders on senior issues in the five counties served and are seen as experts regarding community resources available for seniors, caregivers, and persons with disabilities.
- The ADRC has long- term and committed senior management staff with strong institutional knowledge.
- The Helpline is excellent.

### VOLUNTEERS

• The ADRC has a strong, passionate, dedicated and well-educated volunteer base and a dedicated, committed, and resilient Board of Directors, Foundation Chair, and Advisory Council who all want to see the Agency succeed and overcome current challenges.

### INHERENT

- The ADRC has an established mission and strong core values.
- The ADRC has built a solid reputation based upon a proven track record.
- The ADRC has strong backing from the DOEA.
- The ADRC's programs are incredible and invaluable to so many. When people do learn about the Agency, they are overwhelmed, grateful and helped so much.

### ENVIRONMENT

- The unique role of the Area Agency on Aging of Palm Beach/Treasure Coast was established in the Federal Older Americans Act, and the Agency has been designated by the State of Florida as an Aging and Disability Resource Center.
- The ADRC is the only organization of its kind in the five-county service area and is centrally located within the service area.
- The ADRC is the only organization serving as the access point for Managed Long Term Care in Planning and Service Area 9.

### PERFORMANCE

- The ADRC offers a valuable and diverse array of impactful services for persons of all ages.
- The service provided by the Helpline is a major strength.
- DOEA has recognized some of the ADRC's services as best practices within the State.
- ADRC services have been recognized for minimizing isolation for seniors in the community.
- The Advocacy Committee makes a difference at the State level and keeps Advisory Council members informed.
- The ADRC fills a critical need in the community with skilled professionals and educated volunteers.

### SUPPORT

- The ADRC provides a supportive, familial, collaborative environment for staff that includes educational opportunities and in-service training based upon resources available and flexible work/life balance.
- The ADRC has great processes in place to help staff maintain success.

### Weaknesses:

### FUNDING

- The ADRC lacks sufficient funds to meet the needs of all clients.
- The ADRC relies on outside funding and this funding is restricted by contractual requirements.

### STAFF

- There is staff turnover due to inability to offer competitive pay and few opportunities for advancement for some positions.
- Volunteer turnover.

### MANAGEMENT

- There is a small number of representatives on the Advisory Council.
- There are not enough Board Members at this time and there is inadequate representation for all the counties we serve.

### **COMMUNITY AWARENESS**

- The name, Area Agency on Aging/Aging Disability Resource Center, can be confusing to the community.
- Little marketing is occurring, and there is a lack of current marketing materials.
- The ADRC lacks greater public awareness including broad-based visibility and social media presence. The Agency is under-publicized as an entity and many people still don't know of the Agency.
- There is not enough outreach to veterans.
- There needs to be more communication to the community that we are performing well.
- Public relations is weak.
- Need more community engagement.
- The events and statistics are excellent but there needs to be more communication about these through avenues that the public will access.
- The frontline workers (i.e. Helpline Medicaid Staff- SHINE) need to have greater exposure to community providers perhaps even actual onsite visits.

### ACCESSIBILITY

- The ADRC is only open 8:00 AM 5:00 PM Monday through Friday.
- The ADRC has underserved communities.

### SERVICES

• The REFER database is not user friendly.

### **Opportunities:**

- There is an opportunity to build upon staff's current community contacts.
- There are many organizations in the community with which the ADRC can partner.
- Our ADRC database can be built upon to include family caregivers, clients, community, state and federal stakeholders, and senior organizations.
- The areas covered by Planning and Service Area 9 contain very affluent senior populations.
- There is not a lot of competition from other organizations providing the same programming.
- The ADRC is experiencing a new start with a good foundation and a new CEO who will start a new phase for the organization allowing the ADRC to be seen in a new light. This provides an opportunity to be innovative and to do things leaner and more efficient.
- The Veteran's Independence Program provides an opportunity for an additional funding stream.
- Additional news releases provide an opportunity to enhance community standing and relationships.
- There is an opportunity to obtain local foundation grant support.
- There is an opportunity to increase fundraising.
- Developing something tangible to show potential Board members can help to recruit new Board members.
- There is an opportunity to expand advocacy, the Helpline service, Veterans services and to grow the Foster-Grandparent program.
- There is an opportunity to use law firm volunteers to staff outreach presentations on elder abuse.
- Website information on topics such as scams provide an opportunity for outreach and publicity.
- There is an opportunity to Increase the "<u>varied</u>" professions on the Advisory Council.
- The assets of strong staff, strong Board, and strong Advisory Council will allow the ADRC to move forward.
- Volunteer engagement.
- Build upon the good reputation in community as well as long-standing relationship with community partners.

### Threats:

- The ADRC is threatened by natural disasters such as hurricanes, floods, etc.
- The ADRC covers a large geographic area.
- There is not adequate state and federal funding to serve the seniors and caregivers that need to be served. All of the services require funding and the political environment is not always open to addressing the funding levels.
- The ADRC does not have diversified grant sources.
- The ADRC, as are all organizations, is vulnerable to hackers.

- Not having a physical presence in the community i.e. attending open houses etc. reduces the opportunities for funding. Though some of this is being done, it needs to increase.
- Public's lack of awareness of who we are and what we do.
- Legislative changes outside of the ADRC's control.

### Performance and Targeted Outreach

### Performance Analysis:

				60+ Total	Population for	Population of Indicator as	Number	Number Served and Screened in	Dorformon	Meets or Exceeds			Number of Served and Screened
					Indicator	Percent of Total	Served and	Category/Indicato	Performan ce	Standard?	Super Exceeds	Standard Plus 10%	Required to Meet
Year	- PSA -	County 🔽	Indicator 🗸	Population		Percent of Total	Screened 🖵		e	Stanuarur		-	Standard
2017	9	Indian River	Below Poverty Level*	56,082	4,631	9%	813	248	31%	Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	73
2017	9	Indian River	Limited English Proficiency	56,082	919	2%	813	32	4%	Meets or Exceeds	SUPER Exceeds	-	16
2017	9	Indian River	Living Alone	56,082	13,933	25%	813	394	49%	Meets or Exceeds	-	Standard Plus 10%	203
2017	9	Indian River	Low Income Minority*	56,082	1,016	2%	813	75	10%	Meets or Exceeds	SUPER Exceeds	-	16
2017	9	Indian River	Minority	56,082	4,941	9%	813	155	20%	Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	73
2017	9	Indian River	Probable Alzheimer's Cases	56,082	6,525	12%	813	171	22%	Meets or Exceeds	-	Standard Plus 10%	98
2017	9	Indian River	Rural	56,082	871	2%	813	7	1%	Meets or Exceeds	-	-	16
2017	9	Martin	Below Poverty Level*	58,153	3,633	7%	787	171	22%	Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	55
2017	9	Martin	Limited English Proficiency	58,153	657	2%	787	16	3%	Meets or Exceeds	-	-	16
2017	9	Martin	Living Alone	58,153	14,913	26%	787	341	44%	Meets or Exceeds	-	Standard Plus 10%	205
2017	9	Martin	Low Income Minority*	58,153	569	1%	787	51	7%	Meets or Exceeds	SUPER Exceeds	-	æ
2017	9	Martin	Minority	58,153	3,957	7%	787	110	14%	Meets or Exceeds	SUPER Exceeds	-	55
2017	9	Martin	Probable Alzheimer's Cases	58,153	6,825	12%	787	174	23%	Meets or Exceeds	-	Standard Plus 10%	94
2017	9	Martin	Rural	58,153	2,165	4%	787	14	2%	Does Not Meet	-	-	31
2017	9	Okeechobee	Below Poverty Level*	9,972	1,669	17%	391	120	31%	Meets or Exceeds	-	Standard Plus 10%	66
2017	9	Okeechobee	Limited English Proficiency	9,972	342	4%	391	10	3%	Meets or Exceeds	-	-	16
2017	9	Okeechobee	Living Alone	9,972	2,147	22%	391	139	36%	Meets or Exceeds	-	Standard Plus 10%	86
2017	9	Okeechobee	Low Income Minority*	9,972	166	2%	391	22	6%	Meets or Exceeds	SUPER Exceeds	-	æ
2017	9	Okeechobee	Minority	9,972	1,149	12%	391	55	15%	Meets or Exceeds	-	-	47
2017	9	Okeechobee	Probable Alzheimer's Cases	9,972	982	10%	391	68	18%	Meets or Exceeds	-	-	39
2017	9	Okeechobee	Rural	9,972	2,635	27%	391	51	14%	Does Not Meet	-	-	106
2017	9	Palm Beach	Below Poverty Level*	422,605	40,909	10%	7919	2505	32%	Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	792
2017	9	Palm Beach	Limited English Proficiency	422,605	25,564	7%	7919	1440	19%	Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	554
2017	9	Palm Beach	Living Alone	422,605	111,620	27%	7919	2974	38%	Meets or Exceeds	-	Standard Plus 10%	2,138
2017	9	Palm Beach	Low Income Minority*	422,605	15,794	4%	7919	1545	20%	Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	317
2017	9	Palm Beach	Minority	422,605	85,561	21%	7919	3150	40%	Meets or Exceeds	-	Standard Plus 10%	1,663
2017	9	Palm Beach	Probable Alzheimer's Cases	422,605	51,027	13%	7919	1694	22%	Meets or Exceeds	-	-	1,029
2017	9	Palm Beach	Rural	422,605	2,061	1%	7919	28	1%	Meets or Exceeds	-	-	79
2017		PSA 9	Below Poverty Level*	631,164	58,868	10%	11392	3568	32%	Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	1,139
2017	9	PSA 9	Limited English Proficiency	631,164	30,697	5%	11392	1659	15%	Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	570
2017	-	PSA 9	Living Alone	631,164	161,818	26%	11392	4450	40%	Meets or Exceeds	-	Standard Plus 10%	2,962
2017	9	PSA 9	Low Income Minority*	631,164	20,601	4%	11392	1988	18%	Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	456
2017	-	PSA 9	Minority	631,164	113,739	19%	11392	4055		Meets or Exceeds	-	Standard Plus 10%	2,164
2017		PSA 9	Probable Alzheimer's Cases	631,164	74,011	12%	11392	2406	22%	Meets or Exceeds	-	Standard Plus 10%	1,367
2017	9	PSA 9	Rural	631,164	11,236	2%	11392	118	2%	Meets or Exceeds	-	-	228
2017	-	St. Lucie	Below Poverty Level*	84,352	8,025	10%	1482	524	36%	Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	148
2017		St. Lucie	Limited English Proficiency	84,352	3,216	4%	1482	161		Meets or Exceeds	SUPER Exceeds	-	59
2017	-	St. Lucie	Living Alone	84,352	19,204	23%	1482	602		Meets or Exceeds	-	Standard Plus 10%	341
2017		St. Lucie	Low Income Minority*	84,352	3,055	4%	1482	295		Meets or Exceeds	SUPER Exceeds	Standard Plus 10%	59
2017		St. Lucie	Minority	84,352	18,131	22%	1482	585	40%		-	Standard Plus 10%	326
2017	9	St. Lucie	Probable Alzheimer's Cases	84,352	8,652	11%	1482	300	21%	Meets or Exceeds	-	Standard Plus 10%	163
2017	9	St. Lucie	Rural	84,352	3,280	4%	1482	18	2%	Does Not Meet	-	-	59

The table above shows that our PSA met, exceeded, or super-exceeded performance requirements for all indicators. When evaluating at a county level, all indicators were met or exceeded except for rural in Okeechobee, St. Lucie, and Martin counties. These indicators do not include clients whose services are reported aggregately – i.e. legal services, counseling and emergency alert response systems.

### Targeted Outreach Plan:

## Your ADRC's and providers' planned outreach activities at the county and PSA levels to address the identified service needs of targeted populations are listed below.

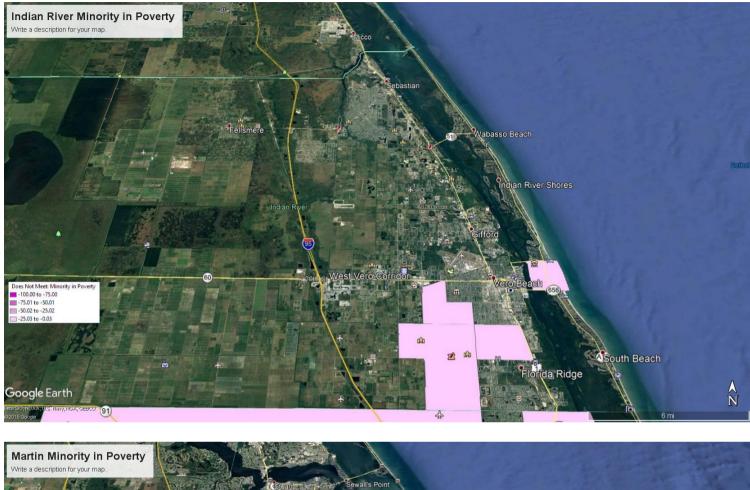
In 2018 we met with Okeechobee Senior Services and pointed out the two opportunities for outreach in the map below. One is Okeechobee County – Census Tract 9104.01 – 36.42 square miles – 1,074 60+ residents. There is only one confirmed 55+ community in the census tract - Ancient Oaks. It appears as though there are about 500 Mobile Homes in the community. Okeechobee Senior Services has done previous outreach to this area and will continue to outreach to this area.

The other rural opportunity for outreach in Okeechobee is Blue Cypress Golf & RV Resort. The address is 13801 US Highway 441, Okeechobee 34974. 98% of the residents are over the age of 55. However the majority of the residents are seasonal and of higher income which could indicate why previous outreach has not resulted in much increase from this area.

In 2018 we held our Senior Forum in Okeechobee providing an overview of the services available through all Area Agency providers and allowing the participants to have one-on-one discussions with the Helpline and providers. Staff attended the Fearless Caregiver Conference in Okeechobee in September 2018 in order to share information on services available. Okeechobee Senior Services participated in the 11<sup>th</sup> Annual Okeechobee Health and Safety Festival in January 2018 and the FP&L Power to Save Program in May 2018. In March of 2018 they presented to the participants of the Foster Grandparent Program and answered one-on-one questions. Okeechobee Senior Services outreached to more than 220 persons in 2018. Our advisory council member who is a resident of Okeechobee is helping with the outreach.

#### Soogle Earth Pro X <u>....</u> <u>File Edit View Tools Add H</u>elp ▼ Search 🔲 🛠 🖉 작 🐼 🛎 🔍 📳 🖂 🖺 📧 Sign in Search N Get Directions History ▼ Places PSA 9 - Lives Alone PSA 9 - Alzheimer's Probable 🖻 🖬 PSA 9 - Limited English PSA 9 - Lim Temporary Places PSA 9.kmz SOLA Logo ODEA Logo ODEA 2 PA 9 Rural Meets or Exceeds" Does Not Meet" Minority in Poverty × Census Tract 9104.01 "Meets or Exceeds" "Does Not Meet" Census Tract 9104.01 Limited English "Meets or Exceeds" "Does Not Meet" 12093910401 Census Tract 9104.01 Okeechobee County GEOID Geography Okcechobec Geography County PSA Total Population: All Aged Total Population: 60+ Percentage Point Difference: 85+ Percentage Point Difference: Minority Percentage Point Difference: Poverty Percentage Point Difference: Minority in Poverty Percentage Point Difference: Minority in Poverty "Does Not Meet" Lives Alone "Meets or Exceeds" "Does Not Meet" Does Not Meet" S5 and Older 0 9 3295 1074 Taylor Creek 34.24 -5.56 8.51 -4.23 "Meets or Exceeds" -\* \* Q 🔳 Lavers Labels Primary Database Primary Database Prostand Labels Propulated Places O Islands Geographic Features Water Bodies Percentage Point Difference: Lives Alone Percentage Point Difference: LEP Percentage Point Difference: Rural 27.46 -0.8 -48.46 Does Not Meet: Rural -100.00 to -75.02 -75.03 to -50.00 -25.01 to -0.01 Places Places Photos Roads Image: Roads (98) © 2018 Google Terrain Image Landsat / Copernicus 0 ft 🛛 eye alt 48326 ft 🔘 2 1984 27º10'22.49" N 80º41'54.26" W elev

Using DOEA's GIS Mapping we have identified the following three opportunities to outreach to low-income minorities in poverty. We will share this information with our contracted providers for outreach in 2020.







In Palm Beach County we will use the following DOEA GIS map to facilitate outreach to older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction.



## A Summary of the types of community events/activities, dates and locations, and number of anticipated participants for each county within the PSA.

In Indian River County Senior Resource Association plans to be present at most- if not all Community Health Fairs and events. Below is an example of the types of events they will be present at during 2020:

- Monthly Indian River County Chamber of Commerce Networking Events
- Monthly Sebastian Chamber of Commerce Networking Events
- Monthly Main Street Vero Beach- Coffee with the Mayor City Updates
- Monthly Community Service Alliance Meetings
- Monthly Isles of Vero Senior Panel
- Monthly Home Instead Caregiver Support Group
- Monthly IRC Veterans (all organizations) Meeting
- IRC County Commission Meetings
- Diabetes Head to Toe- Health Fair (January 2020)
- Silverstones' Valentines Seasonal Concert (February 2020)
- Learning Alliance Book Distribution at Transit Hub (February 2020)
- Parkinson's Awareness Conference (February 2020)
- Day of Hope Caregiver Conference (February 2020)
- St. Francis Manor Health & Wellness Fair (February 2020)
- SRA March for Meals Campaign (March 2020)
- Vista Royale Health & Business Expo (March 2020)
- AAUW Senior Expo (March 2020)
- Silvertones' Spring Seasonal Concert (April 2020)
- VNA Caregiver Conference (April 2020)
- Encompass Health Rehab Hospital Health Fair & Stroke Conference (May 2020)
- American Red Cross Hangar Party (May 2020)
- Salvation Army Hurricane Expo (June 2020)
- Transit Travel Training- North County (June 2020)
- Silvertones' Summer Concert Series
- State of The County Address (July 2020)
- Transit Travel Training- Brackett Library (July 2020)
- Total Home Health Downsizing Expo (August 2020)
- TCCH Community Health Fair (August 2020)
- Transit Travel Training- IRC Main Library (August 2020)
- Community Service Alliance Family Fall Festival (October 2020)
- Symposium on Poverty, Health, & Hurtrition (November 2020)
- Sebastian Elks Holiday & Heart Health Fair (December 2020)
- SRA Santa for Seniors Campaign (December 2020)
- Silvertones' Winter Seasonal Concert (December 2020)

All of Ruth and Norman Rales outreach sites are located in the high needs areas populated by large senior populations. Sites have been chosen to reach the greatest number of caregivers in the community as well as professionals that serve these populations that may refer clients to the Caregiver Resources & Respite program. Outreach conducted in the community include visits to churches, synagogues, doctor's offices, National Parkinson's Foundation, Rotary Clubs, large senior residential communities. Consistent outreach also takes place at the

Weisman Delray Community Center, which is visited by 350 seniors every weekday. Program flyers and brochures are consistently available at the Center and are distributed in the community.

Following are the events planned in 2020 in the rural county of Okeechobee by our contracted provider Okeechobee Senior Services.

- Health & Safety Expo (January), Agri-Civic Center, hundreds of participants
- Speckled Perch Festival and Parade (March), Veteran's Park, hundreds of participants
- 4<sup>th</sup> of July Celebration/Adam Bryant Minimal Regatta (July), Agri-Civic Center, thousands of participants
- Fearless Caregiver Conference (September), Indian River State College Okeechobee, 60-70 participants.

In Martin County, the Council on Aging of Martin County has the following events planned for late 2019 and early 2020.

- August 10- Parkinson's Power: 100 participants
- August 28-Lunch & Learn, Dr. Lara Fix- 5 participants
- September 10- Health Fair @ Allegro-200 participants
- September 11-Martin County Interagency Annual Fair-60 participants
- October 8<sup>th</sup>- Presentation with St. Christopher's of Hobe Sound-50 participants
- November 13-Caregiver Celebration-125 participants
- December 4- Poinsettia Power- 250 participants
- January 2020- Indiantown Congregate Meal Site-25 participants
- January 2020-House of Hope-30 participants
- February 2020-Log Cabin Congregate Meal Site-27 participants
- February 2020-Presentation with Martin County Interagency Coalition-55 participants
- March 2020-East Stuart Congregate Meal Site-20 participants
- April 2020-Port Salerno Congregate Meal Site-7 participants
- May 2020-Villa Assumpta-15 participants

## \*\*\* Additional Events will be planned throughout 2020 and will be included on our semi-annual Outreach Report.

In South Palm Beach County our contracted provider, The Volen Center, conducts quarterly training and outreach seminars at community locations. On average, they reach about 1,000 community members throughout the year.

In St. Lucie County our contracted provider, Council on Aging of St. Lucie, has several outreach activities that are anticipated in 2020. Some are listed below:

- Spanish Lakes Health Fair (Port St. Lucie) February 100 participants minimally expected.
- Senior Solutions of the Treasure Coast (location not known), March 200 participants minimally expected.
- Kings Isle Health Fair (Port St. Lucie) April 100 participants minimally expected.
- Treasure Coast Business Summit (Port St. Lucie) May 250 participants minimally expected.
- Hurricane EXPO (Port St. Lucie) June 300 participants minimally expected.
- Unity in Our Community (Fort Pierce) July 100 participants minimally expected.
- It is difficult to predict dates and times of other outreach opportunities in the community 6 to 12 months in advance.

A description of strategies to address the unique needs (outside of the OAA targeting indicators) of the PSA at the county and community level (e.g. transportation for individuals in rural and/or isolated areas, access to SNAP and other food assistance for low income individuals, etc.)

- In Indian River County, Senior Resource Association is working with public offices and other social nonprofits to increase the outreach to persons in the more rural areas of the county.
- Senior Resource Association operates the GoLine public transit system that is designed to get you where you to need to go within Indian River County at no cost. Their fixed route buses provide service along 15 routes throughout Vero Beach, Sebastian, South County, Fellsmere, and Ft. Pierce. There are stops located outside all major shopping centers, grocery stores, both hospitals, Department of Children and Families, most non-profits including local shelters, Hope for Families center, The Source, Women's Refuge, United Against Poverty, to name a few. Transportation routes are continuously analyzed and revised.
- For those who are unable to use the fixed route system Senior Resource Association also operates the Community Coach, which is a door-to-door transit system for eligible riders with no other means of transportation. Community Coach accommodates riders who use wheelchairs, walkers, canes, services animals, and other mobility aids. Riders can schedule rides and commute to any location within the county.
- For homebound seniors who face isolation and starvation, Senior Resource Association offers Meals on Wheels, the daily delivery of a hot nutritional meal and wellness check. If the Meals on Wheels recipient is also in need of particular items they are able to bring additional food in collaboration with the local food pantry
- Close collaboration with Senior Resource Association's in-home service vendors works to address the difficulty in providing services to some of these areas.
- Senior Resource Association is spearheading the Senior Collaborative which in collaboration with United Way is aimed to become the primary source of information and resource connections for Indian River County seniors.

For Martin County Seniors requiring transportation the Council on Aging of Martin County refers them to the County provider, MV. If warranted, based on an individual's medical needs, MV will provide door-to-door service upon verification by a physician. For individuals receiving services under the government grants, and requiring a companion when traveling, transportation can be provided in conjunction with companion services. The Council on Aging of Martin County currently contracts with 5 vendors in the community able to provide this service.

In response to the critical needs of caregivers evidenced by local data, Ruth & Norman Rales Jewish Family Services (JFS) has developed the Caregiver Resources & Respite Program (Caregiver R&R). The program is free to the public and is comprised of the following strategies:

- 1. Weekly caregiver workshops that address the physical, emotional, and practical challenges faced by caregivers;
- 2. Concurrent respite care to enable caregivers to participate in program;
- 3. Caregiver Support Groups;
- 4. Alzheimer's Café for caregivers and the family members they care for;
- 5. On-site weekly outreach hours at the Weisman Delray Community Center for one-on-one discussions and support from the Director of Caregiver R&R;

- 6. Educational workshops;
- 7. Access to other JFS programs and services including food pantry, subsidized Meals On Wheels, assistance with applying for benefits including SNAP, case management, emergency financial assistance, counseling, support groups, and socializations.
- 8. Referrals to community resources
- 9. Community Outreach

Anytime Okeechobee Senior Services receives an inquiry regarding transportation services within the rural county of Okeechobee they make the caller aware of the Community Transportation Coordinator, and offer to assist with the application process if needed. They also make all of their clients aware of this service at the time of intake. In addition, at the time of assessment and reassessment Okeechobee Senior Services inquires as to whether qualified clients have applied for, or renewed with SNAP to insure they are receiving the benefits they qualify for. Okeechobee Senior Services staff keeps an up to date list of food pantries that they provide upon request. They also distribute the vouchers for the monthly bulk food distribution by the Treasure Coast Food Bank.

In South Palm Beach County, our contracted provider, The Volen Center, provides an array of services for unique and particular needs. They have specialized transportation vehicles equipped with lifts to allow individuals in wheelchairs and who have difficulty using steps to comfortably board their vehicles. The Volen Center offers a scholarship program for individuals on the ADRC waitlist for services to receive Adult Day Care allowing them to pay 75% reduction in the cost of care to allow these families to access the important service as they wait to access care.

In St. Lucie County our contracted provider, Council on Aging of St. Lucie's Treasure Coast Connector Public Transit and Community Transit continue to address additional routes to meet St. Lucie County growing needs. New bus stops include Sabal Palms Plaza in Fort Pierce and additional stops near Ohio Avenue in Fort Pierce which includes (34950) a very high needs target area. New routes on 25<sup>th</sup> Street will connect the Council on Aging of St. Lucie's 2 intermodal facilities from Fort Pierce to Port St. Lucie in 2020, which will meet many senior needs in the community.

# For each of the targeted populations our contracted providers outreach/education activities are described below as is the outreach/education conducted by Your ADRC.

# For all of the targeted populations, the Council on Aging of Martin County (COAMC) has the following planned outreach/education activities:

- COAMC plans Lunch & Learn sessions with local physicians each month to educate the physicians and the staff on available resources for the seniors they provide services to. They are encouraged to refer seniors with the greatest needs including economic, social, residing in rural areas, disabled, limited English proficiency, and memory disorders.
- Presentations are planned with all the congregate meal sites to educate the individuals attending on how to access community resources and obtain services through the government grants.
- COAMC will collaborate with the local Community Health Centers and Health Departments to participate in planned Health Fairs
- COAMC will seek out local churches in the areas identified with the greatest needs and plan presentations to educate the pastors and their members on available senior resources.

- COAMC plans multiple informational/educational events throughout the year in our Kane Center, inviting seniors and members of the Martin County community to attend.
- COAMC recently obtained funding to implement a Martin County HUGS program. This is an initiative to
  create a community of dementia friendly businesses, citizens, hospitals, governments, first responders,
  and agencies where those living with dementia and their caregivers can be acknowledged and treated with
  respect and dignity. Our Program Development & Outreach Coordinator plans several events and training
  sessions with providers, businesses and community agencies throughout Martin County. During these
  events education on senior resources are provided.
- COAMC hosts two Free Caregiver Support Groups each month. During the sessions, information is provided to the participants on available senior resources.

# For all of the targeted populations Okeechobee Senior Services has the following planned outreach/education activities:

### Okeechobee Senior Services, has the following activities to reach older individuals in rural Okeechobee County:

- Booths at the events listed below:
  - Health & Safety Expo (January), Agri-Civic Center, hundreds of participants
  - - Speckled Perch Festival and Parade (March), Veteran's Park, hundreds of participants
  - 4<sup>th</sup> of July Celebration/Adam Bryant Minimal Regatta (July), Agri-Civic Center, thousands of participants
  - Fearless Caregiver Conference (September), Indian River State College Okeechobee, 60-70 participants
- Periodic submissions to the Community Events section of the local newspaper.
- Event/ activities announcements on the local Radio station.
- Brochures in English and Spanish placed at the County Health Department.
- Senior Services web pages on the County website, which describe services available, and how to access them.
- Reach out to trailer parks in the area to request permission to post flyers.

### Outreach and education to older individuals residing in rural areas

### Senior Resource Association's has the following activities to reach older individuals in rural areas in Indian River County:

- Partnering with the Area Agency on Aging (AAA)
- Accessible transportation for all community (i.e. GoLine & Community Coach)
- Support and Services provided to individuals homes
- Printed information about services place in all hospitals and health clinics
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- Needs assessment
- All information on all services available online via website, social media, & youtube
- Information available on Community Calendars
- Attending Community Networking groups in rural areas
- Speaking Engagements at local service clubs

Using the targeting performance analysis and GIS mapping, Your Aging and Disability Resource Center works with those providers who do not meet the standard for outreach to rural areas to identify for them additional opportunities or to discuss and learn that the area may not have sufficient numbers of seniors to impact the targeting indicator.

Outreach and education to older individuals with greatest economic need (with attention to low-income older individuals; including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas.

In Indian River County Senior Resource Association has the following activities to reach individuals with the greatest economic need:

- Partnering with the Area Agency on Aging (AAA)
- Support and Services provided to individuals homes
- Printed information about services place in all hospitals and health clinics
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- All information on all services available online via website, social media, & youtube

In South Palm Beach County Ruth and Norman Rales Jewish Family Services outreach initiatives and distribution of program information informs older individuals with the greatest economic need about their services. In addition, transportation to and from programs is provided by Rales Rides, a free door-to-door transportation program. All services are free of charge so that low-income, poverty stricken individuals can access the full scope of assistance available.

Also in South Palm Beach County The Volen Center completes outreach in areas where census data shows low income areas.

### Outreach and education to older individuals with greatest social need (with attention to lowincome older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas).

In Indian River County, Senior Resource Association has the following activities to reach individuals with the greatest social needs:

- Partnering with the Area Agency on Aging (AAA)
- Support and Services provided to individuals homes
- Printed information about services place in all hospitals and health clinics
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)

In South Palm Beach County, Ruth and Norman Rales Jewish Family Services Caregiver Resources & Respite program takes place at the Weisman Delray Community Center, which offer numerous social, educational, cultural and creative activities. Program participants are free to access any of the programs at the center. Outreach in the community and consistent distribution of materials ensures that seniors in need are aware of the programs and can easily access the center through free transportation.

Also in South Palm Beach County, The Volen Center completes outreach in areas where census data shows low income areas. Examples of these sites from the previous year is in Appendix B.

In St. Lucie County, our contracted provider, Council on Aging of St. Lucie (COASL) distributes brochures throughout St. Lucie County to guarantee that all residents know what resources are available to them. Areas where *older individuals residing in rural areas* are focused on. The Community Needs Index assists in the process for ensuring the provision of outreach and education. CoASL reaches consumers, and potential consumers, by making its services known in St. Lucie County. This is accomplished by providing resources to meet our senior's needs.

### Outreach and education to older individuals with disabilities.

In Indian River County Senior Resource Association has the following activities to reach individuals with disabilities:

- Partnering with the Area Agency on Aging (AAA)
- Partnering with the ARC
- Printed information about services place in all hospitals and health clinics
- Support and Services provided to individuals homes
- Information and referral resources available at doctors' offices- primary and neurologist
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- All information on all services available online via website, social media, & youtube

Free door-to-door transportation through the Rales Rides program enables seniors with disabilities to access program and services in South Palm Beach County.

Also in South Palm Beach County The Volen Center completes outreach in areas where census data shows where highest concentration of seniors reside. Examples of these sites from the previous year is in Appendix B.

In St. Lucie County, our contracted provider the Council on Aging of St. Lucie (COASL) distributes brochures throughout St. Lucie County to guarantee that all residents and all of the targeted populations know what resources are available to them. Areas where *older individuals with severe disabilities may reside in* are focused on. The Community Needs Index assists in the process for ensuring the provision of outreach and education. The Council on Aging of St. Lucie reaches consumers, and potential consumers, by making its services known in St. Lucie County. This is accomplished by providing resources to meet the senior's needs in the service area.

For all of our counties we have data by zip code of the 60+ population with ADL and IADL limitations. We will use this along with DOEA's GIS mapping to identify areas of high concentrations of seniors with disabilities and organizations that we can partner with to distribute information.

### Outreach and education to older individuals with Limited English Proficiency (LEP) ability.

In Indian River County, Senior Resource Association has the following activities to reach individuals with Limited English Proficiency

- Partnering with the Area Agency on Aging (AAA)
- Printed information about services place in all hospitals and health clinics
- Support and Services provided to individuals homes

- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- All information on all services available online via website, social media, & youtube

Your ADRC's contracted provider, Ruth and Norman Rales Jewish Family Services staff speak Spanish, Russian, and Hebrew.

Also in South Palm Beach County The Volen Center completes outreach in areas where census data shows Hispanic and other ethnicities reside. Examples of these sites from the previous year is in Appendix B.

In St. Lucie County, our contracted provider the Council on Aging of St. Lucie (COASL) distributes brochures throughout St. Lucie County including brochures in *Spanish and Creole*, to guarantee that all residents know what resources are available to them. Areas where *older individuals with limited English proficiency may reside in* are focused on. The Community Needs Index assists in the process for ensuring the provision of outreach and education. CoASL reaches consumers, and potential consumers, by making its services known in St. Lucie County. This is accomplished by providing resources to meet our senior's needs.

## Outreach and education to older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction.

In Indian River County, Senior Resource Association has the following activities to reach older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction.

- Partnering with the Area Agency on Aging (AAA)
- Partnering with Alzheimer's Association
- Partnering with Alzheimer's & Parkinson's Association
- Printed information about services place in all hospitals and health clinics
- Support and Services provided to individuals homes
- Information and referral resources available at doctors' offices- primary and neurologist
- Caregiver sensitivity training on Alzheimer's and Dementia
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- All information on all services available online via website, social media, & youtube

In South Palm Beach County Ruth and Norman Rales Jewish Family Services provides minimal cost respite care to individuals with Alzheimer's disease, dementia, and other neurological disorders, while their caregiver/family member, takes part in the Caregiver Resources & Respite program.

Also in South Palm Beach County The Volen Center completes outreach in areas where census data shows where highest concentration of seniors reside. Examples of these sites from the previous year is in Appendix B.

In St. Lucie County, our contracted provider the Council on Aging of St. Lucie (COASL) distributes brochures throughout St. Lucie County to guarantee that all residents know what resources are available to them. Areas where *older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction may reside in* are focused on. The Community Needs Index assists in the process for ensuring the

provision of outreach and education. CoASL reaches consumers, and potential consumers, by making its services known in St. Lucie County. This is accomplished by providing resources to meet our senior's needs.

Your ADRC plans to partner with Alzheimer's Association for the use of their mobile unit in rural areas to ensure the provision of outreach to this population.

### Outreach and education to older individuals at risk of institutional placement.

## In Indian River County, Senior Resource Association has the following activities to reach older individuals at risk of institutional placement:

- Partnering with the Area Agency on Aging (AAA)
- Printed information about services place in all hospitals and health clinics
- Support and Services provided to individuals homes
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- All information on all services available online via website, social media, & youtube

Educating caregivers about how to care for loved ones with dementia, and how to make sure that are also taking care of themselves and enables caregivers and their loved ones to age in place. The complete continuum of care available for seniors at our contracted provider, Ruth and Norman Rales Jewish Family Services, provides a multitude of program and services aimed at helping seniors live healthy, happy and productive lives so that they can age in their homes.

Also in South Palm Beach County The Volen Center completes outreach in areas where census data shows where highest concentration of seniors reside. Examples of these sites from the previous year is in Appendix B.

In St. Lucie County, our contracted provider the Council on Aging of St. Lucie (COASL) distributes brochures throughout St. Lucie County to guarantee that all residents know what resources are available to them. Areas where *older individuals at risk for institutional placement may reside in* are focused on. The Community Needs Index assists in the process for ensuring the provision of outreach and education. CoASL reaches consumers, and potential consumers, by making its services known in St. Lucie County. This is accomplished by providing resources to meet our senior's needs.

# Outreach and education to caregivers of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction.

In Indian River County, Senior Resource Association has the following activities to reach caregivers of older individuals with Alzhiemer's disease and related disorders with neurological and organic brain dysfunction:

- Partnering with the Area Agency on Aging (AAA)
- Printed information about services place in all hospitals and health clinics
- Support Groups and referral resources
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- All information on all services available online via website, social media, & youtube

The Caregiver Resource & Respite Program operated by our contracted provider Ruth and Norman Rales Jewish Family Services is specifically designed to help caregivers of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction.

Also in South Palm Beach County The Volen Center completes outreach in areas where census data shows where highest concentration of seniors reside. Examples of these sites from the previous year is in Appendix B.

In St. Lucie County, our contracted provider the Council on Aging of St. Lucie (COASL) distributes brochures throughout St. Lucie County to guarantee that all residents know what resources are available to them. Areas where *caregivers of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction may reside in* are focused on. The Community Needs Index assists in the process for ensuring the provision of outreach and education. CoASL reaches consumers, and potential consumers, by making its services known in St. Lucie County. This is accomplished by providing resources to meet our senior's needs.

## Outreach and education to grandparents or older individuals who are relative caregivers who provide care for children with severe disabilities.

In Indian River County, Senior Resource Association has the following activities to reach grandparents or older individuals who are relative caregivers who provide care for children with severe disabilities:

- Partnering with the Area Agency on Aging (AAA)
- Printed information about services place in all hospitals and health clinics
- Support Groups and referral resources
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- All information on all services available online via website, social media, & youtube

Our contracted provider, Ruth and Norman Rales Jewish Family Services has a Special Needs program, which includes financial assistance, case management, and other services for individuals with special needs and their families.

Also in South Palm Beach County The Volen Center completes outreach in areas where census data shows where highest concentration of seniors reside. Examples of these sites from the previous year is in Appendix B.

In St. Lucie County, our contracted provider the Council on Aging of St. Lucie (COASL) distributes brochures throughout St. Lucie County to guarantee that all residents know what resources are available to them. Areas where *Grandparents or older individuals who are relative caregivers who provide care for children with severe disabilities may reside in* are focused on. The Community Needs Index assists in the process for ensuring the provision of outreach and education. CoASL reaches consumers, and potential consumers, by making its services known in St. Lucie County. This is accomplished by providing resources to meet our senior's needs.

Your ADRC participates on the Palm Beach County Respite Coalition with many agencies who serve children with severe disabilities. We use this opportunity to share information regarding sitter services, legal services, and counseling services available to grandparents or older individuals who are relative caregiver who provide care for children with severe disabilities.

Your ADRC participates in Healthier Boynton Beach's Community Conversations where we share information to family caregivers of our services and meet with caregivers one-on-one to discuss their needs. We also invite our

contracted providers to make presentations at the Healthier Boynton Beach Steering Committee so that through collective impact the entire service area can become aware of services available to them.

### Outreach and education to caregivers who are older individuals with greatest social need.

### In Indian River County, Senior Resource Association conducts the following actitivies:

- Partnering with the Area Agency on Aging (AAA)
- Printed information about services place in all hospitals and health clinics
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- All information on all services available online via website, social media, & youtube

In South Palm Beach County the Caregiver Resources & Respite program operated by our contracted provider Ruth and Norman Rales Jewish Family Services takes place at the Weisman Delray Community Center, which offers numerous social, educational, cultural and creative activities. Program participants are free to access any of the programs at the center.

Also in South Palm Beach County The Volen Center completes outreach in areas where census data shows where highest concentration of seniors reside. Examples of these sites from the previous year is in Appendix B.

In St. Lucie County, our contracted provider the Council on Aging of St. Lucie (COASL) distributes brochures throughout St. Lucie County to guarantee that all residents know what resources are available to them. Areas where *caregivers who are older individuals with greatest social need may reside in* are focused on. The Community Needs Index assists in the process for ensuring the provision of outreach and education. CoASL reaches consumers, and potential consumers, by making its services known in St. Lucie County. This is accomplished by providing resources to meet our senior's needs.

# Outreach and education to caregivers who are older individuals with greatest economic need (with attention to low-income older individuals.)

In Indian River County, Senior Resource Association conducts the following activities:

- Partnering with the Area Agency on Aging (AAA)
- Printed information about services place in all hospitals and health clinics
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- All information on all services available online via website, social media, & youtube

Our contracted provider Ruth and Norman Rales Jewish Family Services provides many services free of charge so that low-income, poverty stricken individuals can access the full scope of assistance available.

Also in South Palm Beach County The Volen Center completes outreach in areas where census data shows where highest concentration of seniors reside. Examples of these sites from the previous year is in Appendix B.

In St. Lucie County, our contracted provider the Council on Aging of St. Lucie (COASL) distributes brochures throughout St. Lucie County to guarantee that all residents know what resources are available to them. Areas where *caregivers who are older individuals with greatest economic need (with particular attention to low-*

*income older individuals may reside in are* focused on. The Community Needs Index assists in the process for ensuring the provision of outreach and education. CoASL reaches consumers, and potential consumers, by making its services known in St. Lucie County. This is accomplished by providing resources to meet our senior's needs.

## Outreach and education to caregivers who are older individuals who provide care to individuals with disabilities, including children with disabilities.

In Indian River County Senior Resource Association conducts the following activities:

- Partnering with the Area Agency on Aging (AAA)
- Partnering with the ARC
- Speaking engagements/ outreach to where older adults gather (example: congregate meals sites, senior housing facilities, mobile home parks, churches, community centers, public libraries, senior health fairs, local markets)
- All information on all services available online via website, social media, & youtube

In addition to their Caregiver Resources & Respite Program, caregivers can access the full scope of services our contracted provider Ruth and Norman Rales Jewish Family Services, which includes services for individuals with special needs and their families.

Also in South Palm Beach County The Volen Center completes outreach in areas where census data shows where highest concentration of seniors reside. Examples of these sites from the previous year is in Appendix B.

In St. Lucie County, our contracted provider the Council on Aging of St. Lucie (COASL) distributes brochures throughout St.Lucie County to guarantee that all residents know what resources are available to them. Areas where *caregivers who are older individuals who provide care to individuals with severe disabilities, including children with severe disabilities may reside in* are focused on. The Community Needs Index assists in the process for ensuring the provision of outreach and education. CoASL reaches consumers, and potential consumers, by making its services known in St. Lucie County. This is accomplished by providing resources to meet our senior's needs

### Unmet Needs and Service Opportunities

This section defines the significant unmet needs for services and how the AAA will address gaps in service.

### Access to Services:

#### Abuse, Neglect, and Exploitation

In analyzing the senior exploitation data within our PSA near \$8 million was exploited from seniors 60+ last year. The tables below reflect the reported client money loss by zip code for the 60+ population in our PSA. The data is as reported by participating law enforcement agencies to Your ADRC for the period July 1, 2018 through June 30, 2019.

	32948	32958	32960	32962	32963	32966
Financial Crime Victims 60+ Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	2	5	16	20	8	24
Reported Client Money Loss	\$0	\$1,666	\$17,452	\$92,366	\$2,600	\$9 <i>,</i> 881
	32967	32968		I		I
Financial Crime Victims 60+						
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	17	6				
Reported Client Money Loss	\$8 <i>,</i> 846	\$8,777				

### **INDIAN RIVER COUNTY**

### **MARTIN COUNTY**

	33469	33475	34954	34956	34957	34990
Financial Crime Victims 60+ Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	9	1	1	5	27	40
Reported Client Money Loss	\$58,312	\$1,400	\$4,000	\$1,320	\$85,021	\$110,416
	34994	34996	34997	34998		
Financial Crime Victims 60+						
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	44	12	61	1		
Reported Client Money Loss	\$61,255	\$904 <i>,</i> 455	\$172,151	\$16,600		

### **OKEECHOBEE COUNTY**

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	34972	34974
Financial Crime Victims 60+ Assisted by Your ADRC Elder Rights		
7/1/18-6/30/19	19	55
Reported Client Money Loss	\$5,511	\$139,330

# PALM BEACH COUNTY

	FALIVIL					
	22404	22.622	22404	22405	22405	22407
	33401	33403	33404	33405	33406	33407
Financial Crime Victims 60+						
Assisted by Your ADRC Elder Rights	10		_	_		~ ~ ~
7/1/18-6/30/19	12	33	5	7	20	24
Reported Client Money Loss	\$16,726	\$28,356	\$1,181	\$3,026	\$13,212	\$336,472
	33408	33409	33410	33411	33412	33413
Financial Crime Victims 60+						
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	4	24	46	53	5	14
Reported Client Money Loss	\$82,520	\$131,060	\$291 <i>,</i> 820	\$113,429	\$1,315	\$13,214
	33414	33415	33417	33418	33426	33428
Financial Crime Victims 60+						
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	30	37	44	53	1	31
Reported Client Money Loss	\$274,566	\$172,381	\$115,943	\$141,308	\$0	\$352,437
	33429	33430	33431	33432	33433	33434
Financial Crime Victims 60+						
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	1	17	1	2	49	30
Reported Client Money Loss	\$0	\$7,965	\$0	\$510	\$598,591	\$48,701
	33435	33436	33437	33438	33444	33445
Financial Crime Victims 60+						
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	2	30	63	1	45	77
Reported Client Money Loss	\$719	\$84,456	\$221,720	\$1,200	\$68,606	\$256,556
	33446	33449	33454	33455	33458	33460
Financial Crime Victims 60+				[		
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	74	5	1	27	10	53
Reported Client Money Loss	\$518,025	\$5 <i>,</i> 950	\$2,900	\$37,644	\$1,569	\$88,426
·	33461	33462	33463	33467	33470	33472
Financial Crime Victims 60+						
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	23	14	53	62	13	18
Reported Client Money Loss	\$50,869	\$9 <i>,</i> 340	\$139,408	\$267,528	\$29,960	\$362,105
i	33473	33476	33477	33478	33482	33483
Financial Crime Victims 60+						
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	6	12	3	7	1	54
Reported Client Money Loss	\$41,001	\$11,308	\$2,127	, \$12,105	\$400	\$295,606
	33484	33487	33493	33496	<b>33498</b>	
Financial Crime Victims 60+					00-150	
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	57	8	4	19	15	
						1
Reported Client Money Loss	\$239,895	\$24,334	\$28	\$107,264	\$14,388	1

	34945	34947	34949	34950	34952	34953
Financial Crime Victims 60+ Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	1	2	1	6	3	2
Reported Client Money Loss	\$300	\$0	\$1,400	\$2,260	\$525	\$600,000
	34982	34983	34984			
Financial Crime Victims 60+						
Assisted by Your ADRC Elder Rights						
7/1/18-6/30/19	2	1	4			
Reported Client Money Loss	\$8,198	\$7,000	\$5 <i>,</i> 720			

# **ST. LUCIE COUNTY**

To address these needs Your ADRC's Elder Rights department provides direct assistance to older crime victims (ages 60+) and adults with disabilities through the Office of the Attorney General's Victims of Crime Act (VOCA) funding. This funding allows, Your ADRC helps crime victims file Victim's Compensation Claims if they suffered a theft, property damage, or other covered losses. Your ADRC has served over 65,000 senior victims of crime since establishing the Elder Rights department in 2003.

In addition to providing traditional VOCA assistance, the Elder Rights department also provides Intensive Services for older people who have experienced multiple crimes, or who are particularly vulnerable due to a cognitive, mental health, or physical condition or disability, or an expressed inability to respond to and recover from the crime on their own.

The information above is shared at community meetings to raise the awareness of this problem. Both staff and providers participate in the Indian River Senior Collaborative which has this issue as part of both their vision and advocacy initiatives

Strategies in Goal #4 of this Area Plan include planned efforts for community education/outreach; trainings to community professionals serving older adults on how to recognize and report signs of abuse, neglect and financial exploitation; and quarterly publications and/or social media communications to educate community professionals who work with older adults about current issues related to fraud, scams, identity theft, and other types of crimes.

The SHINE department is providing counseling, education, and presentations to the community to assist in the cost avoidance and prevention of Medicare insurance fraud.

# Counties or communities with limited access to transportation

The information below is taken from the Florida Commission for Transportation Disadvantage 2018 Annual Performance Report. It compares the number of trips by passenger in 2015 with that of 2017. For Martin, Palm

Beach and St. Lucie counties the number of trips for the elderly went down. For Indian River, Palm Beach and St. Lucie counties the number of trips for the disabled went down as well.

2017-2018	ELDERLY	CHILDREN	LOW INCOME	DISABLED	LOW INCOME/ DISABLED	OTHER	TOTAL
INDIAN RIVER CO.	62,017	0	0	2,048	9,896	1,138	75,099
MARTIN CO.	16,045	3,120	0	8,800	8,000	14,261	50,226
PALM BEACH CO.	385,483	43,628	221,233	452,520	22,191	133	1,125,188
OKEECHOBEE CO.	5,559	0	2,143	131	849	153	8,835
ST. LUCIE CO.	83,287	6,850	35,517	10,970	102,547	0	239,171
PSA 9							

# TRIPS BY PASSENGER

#### TRIPS BY PASSENGER

2015-2016	ELDERLY	CHILDREN	LOW INCOME	DISABLED	LOW INCOME/ DISABLED	OTHER	TOTAL
INDIAN RIVER CO.	31,624	604	10	4,599	35,344	2,526	74,707
MARTIN CO.	46,405	588	5,756	7,347	4,867	21,393	86,356
PALM BEACH CO.	558,136	17,716	300,123	363,872	35,930	5,770	1,281,547
OKEECHOBEE CO.	4,706	84	5,965	0	0	503	11,258
ST. LUCIE CO.	97,299	10,584	31,561	6,158	118,328	1,586	265,516
PSA 9	738,170	29,576	343,415	381,976	194,469	31,778	1,719,384

The following information from the same report reflects trips by purpose. There were significant increases in trips for the purpose of life sustaining/other in all counties except Okeechobee. Palm Beach County and St. Lucie County had significant decreases in trips for nutritional purposes.

Recognizing that Statewide Medicaid Managed Care Long Term Care does not cover congregate meals, our providers, when receiving appropriate referrals, have used their OAA dollars to provide congregate meals and transportation to congregate meals sites for Statewide Medicaid Managed Care Long Term Care clients.

2017-2018	MEDICAL	EMPLOYMENT	EDUCATION/TRAINING	NUTRITIONAL	LIFE- SUSTAINING/ OTHER	TOTAL
INDIAN RIVER CO.	24,550	486	31,614	131	18,318	75,099
MARTIN CO.	8,359	2,916	27,738	485	10,728	50,226
PALM BEACH CO.	162,837	293,914	220,637	48,851	398,949	1,125,188
OKEECHOBEE CO.	6,173	620	0	1,071	971	8,835
ST. LUCIE CO.	41,504	49,340	63,765	7,728	76,834	239,171
PSA 9						

TRIPS BY PURPOSE

### TRIPS BY PURPOSE

2015-2016	MEDICAL	EMPLOYMENT	EDUCATION/TRAINING	NUTRITIONAL	LIFE- SUSTAINING/ OTHER	TOTAL
INDIAN RIVER CO.	19,077	4,635	36,971	46	13,978	74,707
MARTIN CO.	21,854	1,055	54,479	46	8,922	86,356
PALM BEACH CO.	193,780	301,473	420,037	81,212	285,045	1,281,547
OKEECHOBEE CO.	5,022	1,616	0	1,675	2,945	11,258
ST. LUCIE CO.	47,273	49,046	79,571	79,332	10,294	265,516
PSA 9	287,006	357,825	591,058	162,311	321,184	1,719,384

Your ADRC's Consumer Care and Planning department participations on local transportation boards in all counties of the Planning and Service Area to advocate for the needs of seniors and suggest solutions.

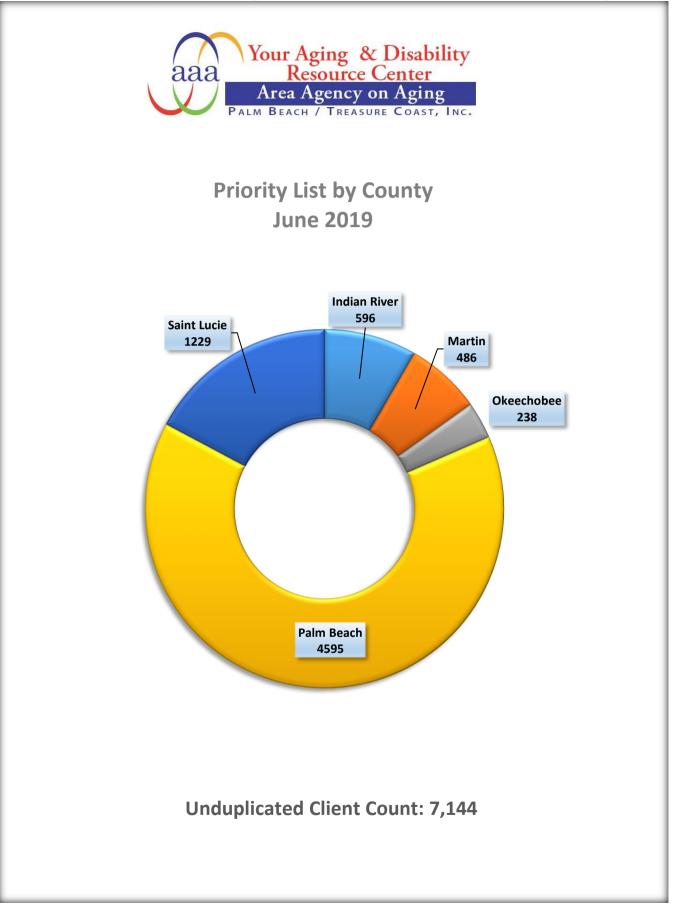
### Counties or communities with limited access to significant supportive services

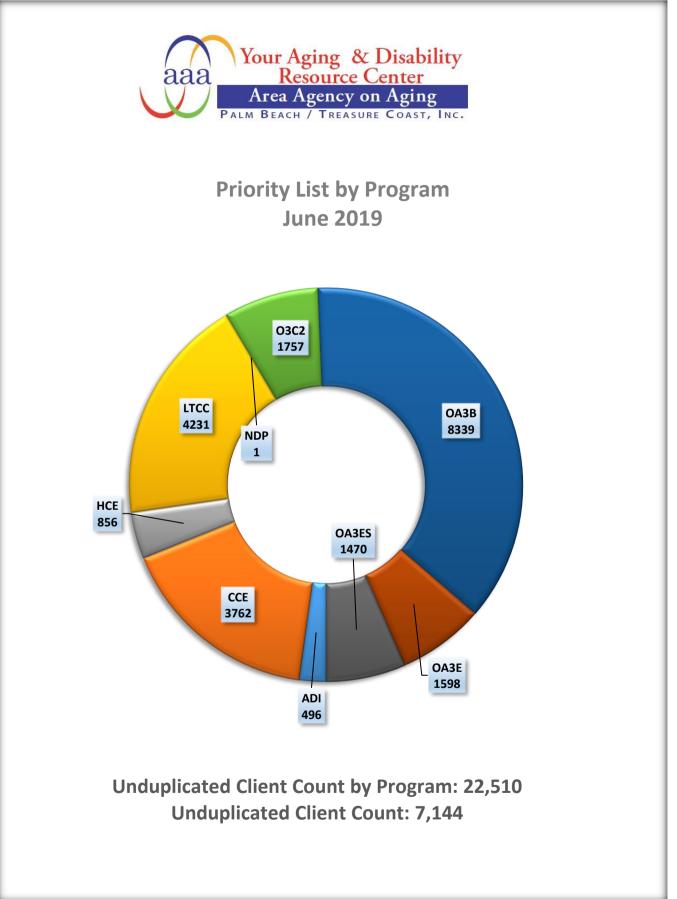
DOEA's 2016 Elder Needs Assessment indicates that across all groups, the proportions of elders who "always" received the help they needed were small. Notably, the minority (18%), low-income (14%), and rural (13%) subgroups, on average, reported "always" receiving the assistance they needed with ADLs compared to elders surveyed statewide (11%). This trend, however, does not continue with regard to IADLs; for IADLs, the minority (12%) and low-income (11%) subgroups, on average, reported "always" receiving the assistance they needed with ADLs soften compared to rural elders (15%) and elders surveyed statewide (13%).

211 operates the Elder Crisis Outreach program in Palm Beach County but not in the Treasure Coast. The ADRC has obtained grant money to provide short term case management and funding to address short term crisis situations.

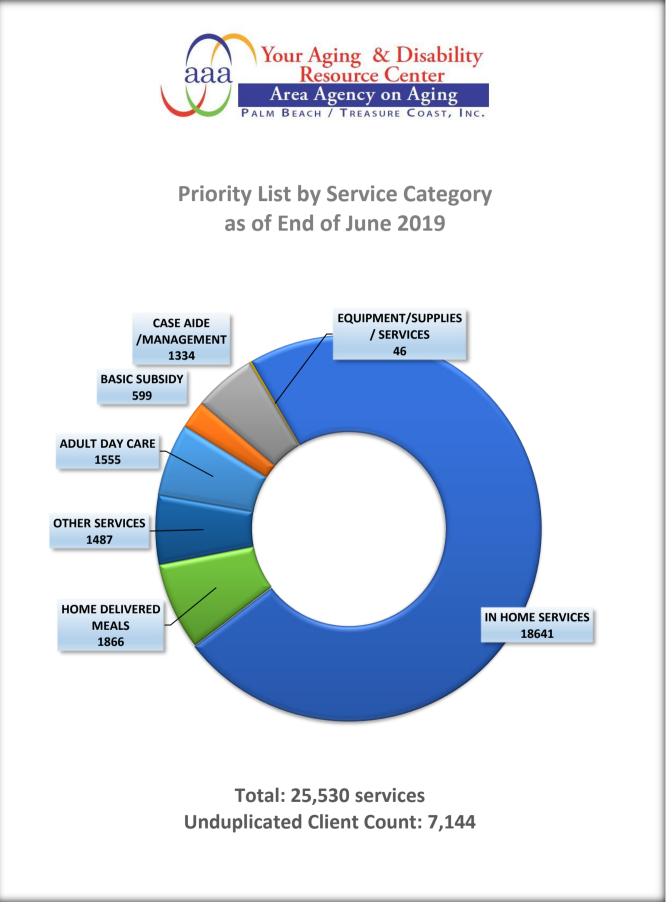
In Okeechobee County there is no Adult Day Care Center. Okeechobee only has one Assisted Living Facility.

The number of clients by county waiting for services as of June 2019 is shown on the following chart.





The number of clients waiting for service by service category is shown below.



## Counties or communities with limited availability of and/or access to legal assistance

PSA 9's two legal assistance providers are accessible to all counties within our service areas. Both have made staff available when necessary to travel to clients' homes. Both have programs beyond those that our agency funds. Both providers participate with our organization in the development and implementation of our Older Floridians Legal Assistance Program Action Plan.

### Counties or communities with limited access to social services agencies

Both 211 and our Helpline provide information and referral services throughout our Planning and Service Area. As the Executive Summary describes, our Helpline handled our 170,000 calls last year. Martin County's 2016 Community Health Improvement Plan includes efforts for Education and Awareness of Existing Health and Human Services. Goal 1 of the Plan is to "Use a Collaborative Approach to Promote and Foster an Environment of Community Awareness in Martin County." We will participate in both the Community Health Assessments and Community Health Improvement Plans development in all our counties to share information on senior and caregiver needs and to provide input to suggested strategies for improvement.

Treasure Coast Advocates for Seniors works diligently to provide relevant resources to seniors and caregivers in Okeechobee and Treasure Coast communities.

The Palm Beach County Partnership for Aging is a not-for-profit local organization which focuses its energies on enhancing the life of older persons, their families and their communities through advocacy, information sharing and education.

The Inter-Agency Network of Palm Beach County is one of Palm Beach County's oldest "community-wide" networking groups. At monthly meetings, participants learn about important resources and events. Averaging 35 to 40 attending with close to 100 agencies represented cycling throughout the year.

The Florida Health Care Social Workers Association, a social workers' organization supporting the providers of long term care, has two districts in PSA 9.

Your ADRC staff and Advisory Council members participate in all of these organizations. In addition Your ADRC hosts "Bagels and Brains". This is a series of informational presentations where Your ADRC provides opportunities for professional development for staff, Board and Advisory Council Members, and community partners to enable each of them to be more knowledgeable about Your ADRC and better equipped to advocate for our seniors, adults with disabilities and their caregivers.

## Analysis of service implications if identified unmet access needs

PSA 9's area plan includes strategies to ensure that all departments that do outreach mention the full array of services that are available to seniors, caregivers and persons with disabilities. The AAAPB/TC hosts and participates on interagency collaboratives that share information about resources and identify ways to coordinate services. Staff participate on transportation boards in all five counties. Staff participate on local initiatives to address unmet needs.

Your ADRC administers the Respite for Elders Living in Everyday Families program and Veterans' Independence Program in order to help to add to supportive services in the Planning and Service Area.

# Caregiver:

The 2016 DOEA Elder Needs Assessment found that for caregivers statewide – 77% reported needing help with their caregiving activities. 60% provided care at least once per week. More than two-thirds (68%) of caregivers did not receive help with their responsibilities. Of the 23% of caregivers who needed help, the types most often cited were respite (17%), help with household chores (16%), financial assistance (13%), and help with personal care tasks for the care recipient (13%). The large majority of caregiving elders cared for another elder (82%), as opposed to children (8%) or adults (10%).

The CDC labels Caregiving as a public health priority and indicates the health of caregivers is at risk. <u>http://www.cdc.gov/aging/caregiving/index.htm</u>) "While some aspects of caregiving may be rewarding, caregivers can also be at increased risk for negative health consequences. These may include stress, depression, difficulty maintaining a healthy lifestyle, and staying up to date on recommended clinical preventive services." The Family Caregiver Alliance reports that in Florida there are 1,766,000 informal caregivers providing 1,892,000,000 caregiving hours, valued at \$18,768,000,000.

The CDC goes on to delineate the impact of providing care for an older adult. Specifically - "Informal or unpaid caregiving has been associated with:

- Elevated levels of depression and anxiety
- Higher use of psychoactive medications
- Worse self-reported physical health
- Compromised immune function
- Increased risk of early death

Over half (53%) of caregivers indicate that a decline in their health compromises their ability to provide care."

## Number of elder caregivers, including number of grandparents raising grandchildren

According to the Department of Elder Affairs 2017 County Profiles, there are currently 90,087 persons 60+ with at least one type of disability and 74,011 probable Alzheimer's cases among those 65+ in PSA 9. Among the disabilities there are 39,361 persons 60+ in PSA 9 with a self-care disability and 68,577 with an independent living disability. Though not all have caregivers, there certainly is an opportunity to reach out to those with caregivers to offer support.

There are 6,714 grandparents raising grandchildren in PSA 9 – a nearly 10% increase from the previous area plan. In order to meet the special needs of this population the AAAPB/TC added sitter services to the array of services available through the Older Americans Act. Counseling services are available under the Older Americans Act both for clients and caregivers. Our legal service providers serve all caregiver populations.

## Analysis of service implications of identified caregiver unmet needs

Supports for caregivers must remain a priority throughout the PSA. Federal and state funding alone does not meet the need. As of June 2019 there were more than 2,416 caregivers on the waitlist for respite services in our Planning and Service Area. Staff will continue to work with local initiatives such as United Way, Palm Health, and local healthcare providers to educate the community as to the need and to help develop additional caregiver supports and funding options. We are supporting our contracted provider, Palm Beach County Division of Senior Services in their outreach efforts to recruit volunteers for the Respite for Elders Living in Everyday Families (RELIEF) program. The fact that the stipend for this program is taxable hinders recruitment for some populations.

The Helpline will continue to stay current on local respite/companionship programs such as Wellington Cares and local Senior Companion Programs.

ADRC staff participate on the Healthier Boynton Beach initiative in Palm Beach County where the focus is Family Caregiving. As part of the Data Committee for this initiative we have participated in the development of two caregiver surveys to drill down on the specific needs of caregivers in this area and to make sure that caregivers are informed of the supportive services available to them.

# Communities:

## Transportation

The data below is from the Florida Commission for the Transportation Disadvantaged 2018 Annual Performance Report. St. Lucie County had the highest number of unmet trip requests with most of these occurring for the purpose of employment. St. Lucie County was the only county in our PSA with unmet nutritional trip requests.

2017 - 2018	Unmet Trip Requests	Medical Unmet Trip Requests	Employ- ment Unmet Trip Requests	Education/ Training Unmet Trip Requests	Nutritional Unmet Trip Requests	Life Sustaining/ Other Unmet Trip Requests	Complaints	Commend- ations
Indian River								
County	720	0	0	0	0	720	20	2
Martin County	31	0	0	31	0	0	23	5
Okeechobee								
County	2	0	0	0	0	2	2	25
Palm Beach								
County	0	0	0	0	0	0	3,046	1,136
St. Lucie								
County	16,642	5	12,296	2,169	2,172	0	9	15
PSA 9								
State Total								

### **Limited Access to Senior Centers**

In DOEA's 2016 Report Assessing the Needs of Elder Floridians only 10% of elders in Florida reported visiting senior centers "often" or "sometimes." Female, minority, and low-income elders visited senior centers more than all other groups surveyed. About 7% of elders reported not being able to get where they needed or wanted to go. Minority elders (15%) and low-income elders (9%) reported more problems getting where they needed to go. More than one-half (58%) of these elders reported that their mobility was impeded by health problems.

All of the Senior Centers in PSA 9 have transportation available to access the senior center. Our contracted providers have added computer training to the activities available at senior centers. Others have included intergenerational programs, and still others have included clinics with medical services and or mental health services available onsite.

### **Housing and Safety Needs**

The charts below show Households with Householder Age 65 and Older, Cost Burden by Tenure and Income, from the 2016 Estimate (Summary) of the Shimberg Center for Housing Studies

		Housing Cost	Burden		
				More	
				than	Total
Tenure	Household Income	30% or less	30.1-50%	50%	Households
Owner	30% AMI or less	215	475	930	
Owner	30.1-50% AMI	1,161	912	722	
Owner	50.1-80% AMI	2,437	752	620	
Owner	80.1-120% AM	3,417	475	377	
	more than 120%				
Owner	AMI	10,190	805	180	
Renter	30% AMI or less	227	113	548	
Renter	30.1-50% AMI	168	257	562	
Renter	50.1-80% AMI	308	466	292	
Renter	80.1-120% AM	370	199	44	
	more than 120%				
Renter	AMI	488	198	24	
Total		18,981	4,652	4,299	27,932
% of Total					
Households		67.95%	16.65%	15.39%	

Indian River County Housing Cost Burden

# Martin County

Housing Cost Burden More Total Tenure Household Income 30% or less 30.1-50% than 50% Households Owner 30% AMI or less 149 113 993 Owner 30.1-50% AMI 724 1,074 851 Owner 50.1-80% AMI 2,453 1,125 846 80.1-120% AM 828 479 Owner 3,466 more than 120% Owner AMI 10,801 1,247 450 377 Renter 30% AMI or less 108 16 Renter 30.1-50% AMI 238 419 114 Renter 50.1-80% AMI 192 329 164 80.1-120% AM Renter 186 199 27 more than 120% Renter AMI 586 54 15 Total 18,903 4,876 4,844 28,623 % of Total Households 66.04% 17.04% 16.92%

Housing Cost Burden						
				More	Total	
Tenure	Household Income	30% or less	30.1-50%	than 50%	Households	
Owner	30% AMI or less	52	34	204		
Owner	30.1-50% AMI	334	251	194		
Owner	50.1-80% AMI	626	98	127		
Owner	80.1-120% AM	594	68	28		
	more than 120%					
Owner	AMI	1,410	76	16		
Renter	30% AMI or less	54	2	51		
Renter	30.1-50% AMI	79	34	59		
Renter	50.1-80% AMI	48	38	13		
Renter	80.1-120% AM	73	22	12		
	more than 120%					
Renter	AMI	41	35			
Total		3,311	658	704	4,673	
% of Total						
Households		70.85%	14.08%	15.07%		

# Okeechobee County

# Palm Beach County Housing Cost Burden

		30% or		More	Total
Tenure	Household Income	less	30.1-50%	than 50%	Households
Owner	30% AMI or less	1,232	3,876	15,233	
Owner	30.1-50% AMI	6,713	9,816	10,307	
Owner	50.1-80% AMI	15,986	9,575	8,122	
Owner	80.1-120% AM	21,806	10,649	3,710	
	more than 120%				
Owner	AMI	53,584	4,879	1,213	
Renter	30% AMI or less	1,511	512	5,090	
Renter	30.1-50% AMI	589	1,577	3,921	
Renter	50.1-80% AMI	2,063	2,438	1,190	
Renter	80.1-120% AM	2,922	733	317	
	more than 120%				
Renter	AMI	4,580	703	221	
Total		110,986	44,758	49,324	205,068
% of Total					
Households		54.12%	21.83%	24.05%	

## St. Lucie County

Housing	Cost	Burden
---------	------	--------

		30% or		More	Total
Tenure	Household Income	less	30.1-50%	than 50%	Households
Owner	30% AMI or less	482	207	1,789	
Owner	30.1-50% AMI	1,506	1,117	1,374	
Owner	50.1-80% AMI	4,054	1,501	1,188	
Owner	80.1-120% AM	5,286	1,222	530	
	more than 120%				
Owner	AMI	12,790	1,336	327	
Renter	30% AMI or less	138	66	516	
Renter	30.1-50% AMI	165	175	514	
Renter	50.1-80% AMI	378	272	353	
Renter	80.1-120% AM	380	275	89	
	more than 120%				
Renter	AMI	817	192	13	
Total		25,996	6,363	6,693	39,052
% of Total					
Households		66.57%	16.29%	17.14%	

Florida

		Housing Cos	st Burden		
				More	
		30% or		than	Total
Tenure	Household Income	less	30.1-50%	50%	Households
Owner	30% AMI or less	22,882	30,076	123,466	
Owner	30.1-50% AMI	104,790	78,681	85,082	
Owner	50.1-80% AMI	237,375	90,481	62 <i>,</i> 357	
Owner	80.1-120% AM	338,413	69,798	28,308	
	more than 120%				
Owner	AMI	667,645	60,696	14,643	
Renter	30% AMI or less	33,709	14,229	63 <i>,</i> 978	
Renter	30.1-50% AMI	23,907	26,774	51,377	
Renter	50.1-80% AMI	24,313	34,235	21,534	
Renter	80.1-120% AM	33,625	15,466	5,190	
	more than 120%				
Renter	AMI	50,720	9,678	2,477	
Total		1,537,379	430,114	458,412	2,425,905
% of Total					
Households		63.37%	17.73%	18.90%	

For all of our counties except Palm Beach County, the percentage of households with a Housing Cost Burden of 30.1%-50% and more than 50% is less than the State of Florida. Palm Beach County's percentages of 21.83% of households with a Housing Cost Burden of 30.1%-50% and 24.05% with a Housing Cost Burden of More than 50% are significantly higher than the State's.

## **Employment Training or Related Assistance**

As described in the State of Florida Senior Employment Program State Plan - Program Years 2016-2019 "The Senior Community Service Employment Program (SCSEP) is administered by the Department of Labor. It serves unemployed low-income persons who are age 55 and older and who have poor employment prospects. The program provides training in part-time community service assignments, and it assists program participants in developing skills and experience to facilitate their transition to unsubsidized employment."

The Plan indicates that "It is projected that the localities and populations that have the greatest need for the program will be those with the higher concentration of low-income seniors. Data from the program year 2016 Equitable Distribution Report, which was issued by the U.S. Department of Labor in February 2016, is used to support our position. ......... Based on the formulas used to generate the PY 2016 SCSEP Equitable Distribution report and the resulting distribution factor, the top 10 localities or counties in Florida with the greatest need are as follows: Broward, Duval, Hillsborough, Lee, Miami-Dade, Orange, Palm Beach, Pinellas, Polk, Volusia and Pasco.

The following chart lists the cities and counties where the SCSEP project took place in Program Years 2016 and 2017. It includes the number of SCSEP authorized positions and indicates if and where the positions changed from the prior year. In no counties in Florida did the number of authorized positions go up from PY 2016 to PY 2017.

County	PY 2016 Florida Authorized	PY 2017 Florida Authorized	Changes	Cities
	Positions	Positions		Nove Decels Coloration
Indian River	21	20	-1	Vero Beach, Sebastian
Martin	19	17	-2	Sewall's Point, Stuart
Okeechobee	7	7	0	Okeechobee
Palm Beach	172	158	-14	Boca Raton, Boynton Beach, Delray Beach, Greenacres, Highland Beach, Hypoluxo, Juno Beach, Jupiter, Lake Park, Lake Worth, Lantana, Ocean Ridge, Palm Beach, Palm Beach Gardens, Royal Palm Beach, Wellington, West Palm Beach,
St. Lucie	41	38	-3	

The table below reflects both employment and unemployment numbers and percentages for all of the counties in our Planning and Service Area. Both the number of unemployed and percentage of unemployed have decreased in every county from July 2018 to July 2019.

LOYMENT ST	ATISTICS BY	COUNTY									
DJUSTED)											
JULY 2019				JUNE 2019				JULY 2018			
LABOR	EMPLOY-	UNEMPLOY- MENT		LABOR	EMPLOY-	UNEMPLOY- MENT		LABOR	EMPLOY-	UNEMPLOY- MENT	
FORCE	MENT	LEVEL	RATE	FORCE	MENT	LEVEL	RATE	FORCE	MENT	LEVEL	RATE
66,384	63,583	2,801	4.20%	66,351	63,588	2,763	4.20%	64,758	61,647	3,111	4.80%
75,670	73,052	2,618	3.50%	75,583	72,954	2,629	3.50%	73,967	71,173	2,794	3.80%
17,611	16,892	719	4.10%	17,697	17,011	686	3.90%	16,967	16,243	724	4.30%
739,057	712,351	26,706	3.60%	738,361	712,009	26,352	3.60%	730,285	701,907	28,378	3.90%
145,600	139,273	6,327	4.30%	145,336	139,034	6,302	4.30%	142,713	135,902	6,811	4.80%
40.474.000	40.400.000	262.000	2 500		40.054.000	252.000	2 50%	40.000.000		222.022	2 000
10,471,000	10,108,000	363,000	3.50%	10,417,000	10,054,000	363,000	3.50%	10,296,000	9,907,000	389,000	3.80%
gust 16, 2019	)										
	DJUSTED) JULY 2019 LABOR FORCE 66,384 75,670 17,611 739,057 145,600 10,471,000	DJUSTED) JULY 2019 LABOR EMPLOY- FORCE MENT 66,384 63,583 75,670 73,052 17,611 16,892 739,057 712,351 145,600 139,273	JULY 2019         UNEMPLOY-           LABOR         EMPLOY-         MENT           FORCE         MENT         LEVEL           66,384         63,583         2,801           75,670         73,052         2,618           17,611         16,892         719           739,057         712,351         26,706           145,600         139,273         6,327           10,471,000         10,108,000         363,000	DUSTED)         I         I         I           IULY 2019         I         I         I           JULY 2019         I         I         I           LABOR         EMPLOY-         MENT         I           FORCE         MENT         LEVEL         RATE           66,384         63,583         2,801         4.20%           75,670         73,052         2,618         3.50%           17,611         16,892         719         4.10%           739,057         712,351         26,706         3.60%           145,600         139,273         6,327         4.30%           10,471,000         10,108,000         363,000         3.50%	DUSTED)IIIIIIIIIIJULY 2019IIIIIILABOREMPLOY-MENTLABORIABORIABORFORCEMENTLEVELRATEFORCE66,38463,5832,8014.20%66,35175,67073,0522,6183.50%75,58317,61116,8927194.10%17,697739,057712,35126,7063.60%738,361145,600139,2736,3274.30%145,33610,471,00010,108,000363,0003.50%10,417,000	DUSTED)IIIIIIIULIIIIIIIJULY 2019IIIIIIIILABOREMPLOY-MENTLABOREMPLOY-II <td>DUSTED)II<td>DUSTED)IIIIIIIIJULY 2019III&lt;</td><td>DUSTED)II<td>DUSTED)II<td>DUSTED)Indication</td></td></td></td>	DUSTED)II <td>DUSTED)IIIIIIIIJULY 2019III&lt;</td> <td>DUSTED)II<td>DUSTED)II<td>DUSTED)Indication</td></td></td>	DUSTED)IIIIIIIIJULY 2019III<	DUSTED)II <td>DUSTED)II<td>DUSTED)Indication</td></td>	DUSTED)II <td>DUSTED)Indication</td>	DUSTED)Indication

NOTE: Items may not add to totals or compute to displayed percentages due to rounding. All data are subject to revision.

# Disaster Preparedness

All of our lead agencies have coordinated disaster response plans with the county emergency operations centers. All are required to assist both their own clients and other seniors in the community following a disasters. In Palm Beach County, AAAPB/TC staff have a seat at the EOC when an emergency is declared. They also maintain a database of Senior Distribution Sites.

### Volunteerism

Volunteers are used in our Elder Rights, Foster Grandparents, RELIEF, and Healthy Living programs. Your Aging & Disability Resource Center promotes, engages and celebrates seniors through its Foster Grandparent Program. Foster Grandparents are role models, mentors, and friends to children with exceptional needs. The program provides a way for low-income senior volunteers age 55 and over to stay active and contribute to the wellbeing of their communities by serving children and youth in the public school classrooms. The Foster Grandparent Program is an intergenerational volunteer program that provides one-on-one mentoring and tutoring to children with special and exceptional needs in pre-k through 3<sup>rd</sup> grade.

The Program has a dual purpose - to enhance the lives of children with special needs through a caring mentoring relationship and to provide a high quality experience that enriches the lives of the senior volunteers.

Last year 137 Foster Grandparents volunteered 118,040 hours to touch the lives of 544 children in Martin, Okeechobee, Palm Beach and St. Lucie counties. According to end of year progress reports completed by the classroom teachers for the children receiving one-on-one tutoring and mentoring from a Foster Grandparent 96% of children pre-k through kindergarten showed overall improvement, 86% of children in 1<sup>st</sup> through 3<sup>rd</sup> grade showed overall improvement and 98% of children in 1<sup>st</sup> through 3<sup>rd</sup> grade showed improvement in reading.

Our providers use volunteers to help supplement the resources for their contracted services.

## Health Care:

# Percentage of Adults Who Are Overweight or Obese

County	18-44 2010	18-44 2013	18-44 2016	45-64 2010	45-64 2013	45-64 2016	65 + 2010	65+ 2013	65+ 2016
	60.7	55.7	56.9	69.8	69.7	69.3	63.7	65.4	65.5
State Total	(58.2- 63.2)	(53.5- 57.9)	(54.9 – 58.8)	(69.0- 71.7)	(68.0- 71.5)	(67.5 – 71.1)	(63.2- 76.6)	(63.7- 67.1)	(63.7-67.4)
	66.0	61.4	62.2	69.8	61.9	70.1	63.5	58.0	61.9
Indian River	(52.6- 79.5)	(45.8- 76.9)	(45.6 – 78.8)	(60.5- 79.1)	(50.5- 73.3)	(58.2 – 82.0)	(57.1- 69.8)	(50.1- 65.9)	(51.4 - 65.9)
	62.3	32.5	46.1	61.2	54.4	55.0	59.9	56.1	61.2
Martin	(47.4- 77.1)	(17.3- 47.7)	(27.8 - 64.4)	(52.2- 70.3)	(44.7- 64.0)	(42.3 - 67.6)	(53.7- 66.2)	(48.4- 63.8)	(51.6 - 70.9)
	76.3	49.3	63.3	73.7	66.6	74.3	69.9	73.8	65.5
Okeechobee	(64.8- 87.9)	(28.5- 69.7)	(48.6 - 78.1)	(65.2- 82.2)	(53.9- 79.3)	(64.8 - 82.2)	(63.2- 76.6)	(66.1- 81.5)	(57.0 - 74.1)
	54.2	51.9	38.5	65.0	70.3	58.3	63.5	57.6	67.3
Palm Beach	(40.8- 67.6)	(39.2- 64.6)	(28.0 - 49.1)	(55.9- 74.1)	(60.6- 80.0)	(47.2 - 74.1)	(57.2- 69.8)	(50.6- 65.0)	(57.9 – 65.0)
	65.6	63.6	53.5	75.7	70.6	79.4	67.4	64.3	67.5
St. Lucie	(55.1- 76.1)	(53.2- 74.1)	(41.2 - 65.8)	(68.5- 82.9)	(62.4- 78.7)	(71.7 - 87.2)	(60.8- 73.9)	(56.5- 72.0)	(57.6 - 72.0)

### Comparison: 2010 – 2016

Grouped by Age

## **OVERWEIGHT OR OBESE**:

According to the 2016 data collected, the state average for those 65 and older who were reportedly overweight or obese was 65.1% reflecting a fraction of a point upward trend. Three counties in PSA 9 were equal to or over the state average and, although Okeechobee County equaled the state average, the county average actually fell 8.3 percentage points from 2013. Palm Beach and St. Lucie counties showed an upward increase with Palm Beach's increase growing by almost 10 percentage points.

# Percentage of Adults Who Engage in Heavy or Binge Drinking

### Comparison: 2010 – 2016

County	18-44 2010	18-44 2013	18-44 2016	45-64 2010	45-64 2013	45-64 2016	65 + 2010	65+ 2013	65+ 2016
	20.9	24.2	23.1	14.4	16.9	17.2	6.8	7.2	8.7
State Total	(18.8- 23.0)	(22.3- 6.1)	(21.6- 24.7)	(12.9- 5.9)	(15.3- 8.5)	(15.8- 18.6)	(6.0-7.6)	(6.4- 8.0)	(7.8-9.7)
	28.2	19.1	31.3	16.2	18.5	19.3	7.7	7.2	16.2
Indian River	(16.0- 40.3)	(7.3-30.8)	(16.0-46.6)	(8.7-23.6)	(9.8-27.2)	(9.3-29.4)	(4.1-11.3)	(3.4- 11.1)	(7.3-25.0)
	24.7	18.7	12.2	20.4	16.9	25.2	9.4	8.9	15.4
Martin	(10.6- 38.8)	(7.7-29.7)	(1.3-23.2)	(12.7- 28.1)	(9.5-24.2)	(14.0-36.4)	(5.8-12.9)	(5.0- 12.8)	(8.1-22.7)
	20.1	24.5	12.9	12.1	20.5	13.2	5.2	17.9	8.5
Okeechobee	(9.3-30.8)	(6.1-43.0)	(3.5-22.3)	(4.0-20.2)	(6.4-34.5)	(5.7-20.8)	(1.9-8.6)	(6.4- 29.3)	(2.7-14.3)
	14.9	27.4	22.2	19.8	15.5	19.2	8.2	5.3	9.3
Palm Beach	(6.2-23.7)	(15.5- 39.4)	(13.4-31.0)	(10.2- 29.4)	(8.5-22.5)	(10.6-37.7)	(4.7-11.6)	(1.5-9.0)	(3.3-15.3)
	17.8	23.7	15.7	9.2	13.4	15.0	5.8	10.2	17.9
St. Lucie	(9.3-26.2)	(13.2- 34.1)	(7.4-24.0)	(3.8-14.6)	(7.2-19.7)	(7.9-22.1)	(2.7-8.9)	(5.6- 14.7)	(8.5-27.3)

Grouped by Age

**ALCOHOL CONSUMPTION** The percentage of adults who reported engaging in heavy or binge drinking for those 65 and older (according to data reported 2016) averaged 8.7% in the state of Florida. In PSA 9, St. Lucie County reported having the highest rate at 17.9% and Okeechobee County reported having the lowest reported rate at 8.5%. St. Lucie, Palm Beach & Martin County's rates are up almost 175% with Okeechobee County, the highest in 2013, now being the lowest at 8.5%, a decrease of 47%. Florida Health Charts does note that changes in survey methodology have been made so caution should be taken when comparing 2013 and 2016 data.

	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	Florida
	5.6%	4.6%	4.7%	4.4%	7.7%	5.9%
2013						
Data	(2.2 - 9.0)	(0.7 - 8.4)	(2.0 - 7.3)	(1.9 - 6.9)	(3.6 - 11.8)	(5.2 - 6.7)
	7.7%	5.8%	3.5%	10.7%	4.7%	6.3%
2016						
Data	(2.1 – 13.4)	(1.4 – 10.3)	(1.4 – 5.6)	(3.3 – 18.1)	(1.5 – 7.9)	(5.4 – 7.2)

Adults 65+ Who Have Ever Been Told They Had Kidney Disease

All counties, with the exception of Okeechobee County, showed an increase in the number of 65+ adults who had ever been told they had kidney disease with Palm Beach County showing the largest increase.

	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	Florida
	15.8%	14.%	13.7%	11.7%	10.3%	14.6%
2013						
Data	(10.6 - 21.0)	(9.4 - 20.2)	(8.0 - 19.4)	(7.3 - 16.1)	(5.7 - 15.0)	(13.4 - 15.9)
	10.8%	10.7%	14.8%	11.2%	5.6%	11.8%
2016						
Data	(4.2 – 17.3)	(4.2 – 17.3)	(8.8 – 20.8)	(4.8 – 17.5)	(1.7 – 9.4)	(10.5 – 13.0)

Adults 65+ Who Have Ever Been Told They Had A Depressive Disorder

All of our counties have a lower percentage than the State of adults 65+ who have ever been told they had a depressive disorder except for Okeechobee County.

	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	Florida
	9.4%	5.1%	9.2%	13.4%	7.7%	7.3
2016						
Data	(2.8 – 16.1)	2.0 - 8.2	4.0 - 14.4	(5.6 – 21.1)	(2.5 – 12.8)	6.2 – 8.3

Adults 65+ Who are Blind or Have Serious Difficulty Seeing Even When Wearing Glasses

This is a new data table. All of our counties have a higher percentage than the State of adults 65+ who are blind or have serious difficulty seeing even when wearing glasses except for Martin County.

The information below from Florida Charts reflects those 65+ who could not see a doctor due to cost. In all counties, except Martin County the percentage is more than that of the State.

	Indian River	Martin	Okeechobee	Palm Beach	St. Lucie	Florida
	3.4%	5.4%	1.5%	3.7%	3.4%	4.9%
2013 Data	(0.4 - 6.3) 9.2%	(0.6 - 10.2) 3.3%	(0.2 - 2.7)	(1.1 - 6.2)	(0.3 - 6.5) 7.5%	(4.0 - 5.8) 5 2%
2016 Data	9.2%	3.3% (0.5 – 6.0)	7.3% (2.3 – 2.7)	6.6% (0.9 – 12.4)	7.5% (0.0–15.4)	5.2% (4.4 – 6.0)

Adults 65+ Who Could Not See a Doctor at Least Once in the Past Year Due to Cost

# Percentage of Adults Who Have Ever Been Told They Had Angina or Coronary Heart Disease

### Comparison: 2013 – 2016

County	18-44 2013	18-44 2016	45-64 2013	45-64 2016	65+ 2013	65+ 2016
	0.9%	1.0%	5.1%	4.7%	12.3%	11.1%
State Total	(0.5 - 1.3)	(0.6 - 1.3)	(4.3 - 6.0)	(3.9 – 5.5)	(11.3 - 13.4)	(9.9 – 12.3)
	1.8%	0.0%	7.2%	4.7%	14.9%	16.6%
Indian River	(0.0 – 5.2)	(-)	(1.7 - 12.7)	(0.0 - 10.2)	(9.7 – 20.1)	(8.7 – 24.6)
	0.0%	0.0%	2.7%	3.4%	15.6%	17.7%
Martin	(-)	(-)	(0.0 - 5.6)	(0.0 – 7.8)	(10.6 - 20.6)	(10.1 – 25.3)
	2.6%	2.6%	13.8%	4.7%	14.0%	14.6%
Okeechobee	(0.0 – 7.2)	(0.0 - 7.2)	(4.3 - 23.4)	(1.0 - 8.5)	(7.5 – 20.4)	(9.1 – 20.1)
	1.1%	2.3%	4.9%	5.6%	15.3%	12.6%
Palm Beach	(0.9 - 3.1)	(0.0 - 5.4)	(0.2 – 9.6)	(0.7 - 10.4)	(9.8 – 20.9)	(6.1 – 19.2)
	0.0%	1.8%	3.6%	5.2%	11.2%	11.2%
St. Lucie	(-)	(0.0 – 4.5)	(0.7 – 6.6)	(1.3 – 9.2)	(6.7 - 15.7)	(5.2 – 17.1)

Grouped by Age

# ANGINA OR CORONARY HEART DISEASE:

According to the 2016 data collected, the state average for those 65 and older who have ever been told they had Angina or Coronary Heart Disease was 11.1% reflecting a slight downward trend. All counties in PSA 9 were higher than the state average. Palm Beach County although higher than the state average, had a county average which actually fell 17.6% from 2013. Indian River, Martin & Okeechobee counties showed an upward increase with Martin county's increase growing by 13.5 percentage points.

# FALLS FOR THE 65+ POPULATION IN PLANNING AND SERVICE AREA 9

The following data is from the Department of Health State of Florida, Bureau of Community Health Assessment, Division of Public Health Statistics and Performance Management

Martin County, Florida 2018					
	65- 74	75- 84	85+	Total 65+	
Total Fatal Injuries by Fall	3	11	13	27	
Non-Fatal Injury Hospitalizations by Fall	88	235	295	618	
Non-Fatal Injury Emergency Department Visits by Fall	606	827	841	2,274	
Palm Beach County, Florida 2018					
	65- 74	75- 84	85+	Total 65+	
Total Fatal Injuries by Fall	34	48	140	222	
Non-Fatal Injury Hospitalizations by Fall	1,011	1,692	2,426	5,129	
Non-Fatal Injury Emergency Department Visits by Fall	4,488	5,698	6,748	16,934	
Indian River County, Florida 2018					
	65- 74	75- 84	85+	Total 65+	
Total Fatal Injuries by Fall	1	14	20	35	
Non-Fatal Injury Hospitalizations by Fall	133	228	282	643	
Non-Fatal Injury Emergency Department Visits by Fall	727	966	1046	2,739	
Okeechobee County, Florida 2018					
	65- 74	75- 84	85+	Total 65+	
Total Fatal Injuries by Fall	1	1	1	3	
Non-Fatal Injury Hospitalizations by Fall	41	56	29	126	
Non-Fatal Injury Emergency Department Visits by Fall	179	169	96	444	
St. Lucie County, Florida 2018					
	65- 74	75- 84	85+	Total 65+	
Total Fatal Injuries by Fall	3	8	28	39	
Non-Fatal Injury Hospitalizations by Fall	727	966	1,046	2,739	
Non-Fatal Injury Emergency Department Visits by Fall	1,264	1,204	1,001	3,469	

Source: Department of Health State of Florida, Bureau of Community Health Assessment, Division of Public Health Statistics and Performance Management

		2014	2015	2016	2017	2018
Facility Name	REPORTQUARTER	Frequency	Frequency	Frequency	Frequency	Frequency
St Marys	1	916	1019	1091	1086	1092
St Marys	2	908	1067	1042	1136	1006
St Marys	3	858	1013	990	1041	
St Marys	4	996	997	998	1090	
Lawnwood	1	1091	1006	819	793	797
Lawnwood	2	1128	1077	860	659	922
Lawnwood	3	1039	1028	797	673	
Lawnwood	4	1033	799	923	707	
Delray	1	1283	1331	1134	1144	1400
Delray	2	1291	1325	988	1077	1251
Delray	3	1218	1172	907	1032	
Delray	4	1307	1090	1021	1289	
Nicklaus Childrens	1	388	458	274	268	240
Nicklaus Childrens	2	388	409	326	283	237
Nicklaus Childrens	3	461	424	333	275	
Nicklaus Childrens	4	422	311	286	236	
Totals		14727	14526	12789	12789	6945

The following data from Bureau of Family Health Services Division of Community Health Promotion reflects the number of falls for each of the trauma centers for the 5-year period. Counts are from the inpatient as well as the emergency department datasets.

Our Healthy Living department offers several evidence-based fall prevention programs. We continue to work toward achieving the State Health Improvement Plan goals to expand these programs to all counties and to increase the number of participants yearly.

Nutrition and Self-Care Limitations by zip code are shown below for each of the counties in our Planning and Service area.

	INDIAN	RIVER C	OUNTY							
	32948		32958		32960		32962		32963	
	Estimate		Estimate		Estimate		Estimate		Estimate	
Total Males & Females 60+ <sup>1</sup>	991		10,661		6,957		7,897		10,111	
Total Below Poverty Level 60+ <sup>2</sup>	238	24.02%	1,051	9.86%	941	13.53%	571	7.23%	398	3.94%
DCF SNAP Participation Report as at July 2018 <sup>5</sup>	102	10.29%	606	5.68%	967	13.90%	703	8.90%	38	0.38%
Active Clients June 2018 All Services <sup>7</sup>	5	0.50%	67	0.63%	61	0.88%	45	0.57%	7	0.07%
Waitlist Clients June 2018 All Services <sup>7</sup>	5	0.50%	81	0.76%	86	1.24%	87	1.10%	8	0.08%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	2	0.20%	47	0.44%	41	0.59%	20	0.25%	5	0.05%
Active Clients - OAA Home Delivered Meals June 2018 <sup>7</sup>	5	0.50%	28	0.26%	42	0.60%	28	0.35%	3	0.03%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	6	0.61%	63	0.59%	94	1.35%	78	0.99%	3	0.03%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	47	9.33%	602	7.19%	386	7.00%	392	6.35%	477	5.71%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	61	12.10%	1,034	12.35%	824	14.95%	924	14.96%	653	7.82%
Total with Cognitive Difficulty 65+ <sup>6</sup> Percentages calculated using 65+ population data	87	17.26%	716	8.55%	373	6.77%	450	7.28%	338	4.05%
Financial Crime Victims 60+ <sup>8</sup>	0	0.00%	6	0.06%	18	0.26%	9	0.11%	0	0.00%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	88	17.46%	1,730	20.66%	1,834	33.28%	1,984	32.11%	1,497	17.92%

			INE	DIAN RIV	ER COUI	NTY		
	32966		32967		32968		32970	
	Estimate		Estimate		Estimate		Estimate	
Total Males & Females 60+ <sup>1</sup>	8,848		5,415		4,456		53	
Total Below Poverty Level 60+ <sup>2</sup>	810	9.15%	427	7.89%	170	3.82%	35	66.04%
DCF SNAP Participation Report as at July 2018 <sup>5</sup>	450	5.09%	646	11.93%	163	3.66%	33	62.26%
Active Clients June 2018 All Services <sup>7</sup>	49	0.55%	58	1.07%	11	0.25%	0	0.00%
Waitlist Clients June 2018 All Services <sup>7</sup>	63	0.71%	58	1.07%	20	0.45%	1	1.89%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	33	0.37%	33	0.61%	11	0.25%	8	15.09%
Active Clients - OAA Home Delivered Meals June 2017 <sup>7</sup>	24	0.27%	35	0.65%	2	0.04%	0	0.00%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	55	0.62%	56	1.03%	13	0.29%	1	1.89%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	533	7.13%	240	5.67%	227	7.04%	0	0.00%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	1,082	14.47%	449	10.61%	416	12.91%	0	0.00%
Total with Cognitive Difficulty 65+ <sup>6</sup> Percentages calculated using 65+ population data	843	11.28%	265	6.26%	161	5.00%	0	0.00%
Financial Crime Victims 60+ <sup>8</sup>	30	0.34%	8	0.15%	9	0.20%	0	0.00%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	2,375	31.77%	1,151	27.19%	470	14.58%	39	100.00%

					MARTIN	COUNTY				
	33438	% of Pop	33455	% of Pop	33458	% of Pop	33469	% of Pop	33478	% of Pop
	Estimate		Estimate		Estimate		Estimate		Estimate	
Total Males & Females 60+ <sup>1</sup>	91		10,388		11,419		6,024		2,699	
Total Below Poverty Level 60+ <sup>2</sup>	5	5.49%	635	6.11%	1,199	10.50%	312	5.18%	188	6.97%
DCF SNAP Participation Report as at July 2018 $^5$	29	31.87%	0	0.00%	306	2.68%	81	1.34%	65	2.41%
Active Clients June 2018 All Services <sup>7</sup>	0	0.00%	62	0.60%	26	0.23%	10	0.17%	5	0.19%
Waitlist Clients June 2018 All Services <sup>7</sup>	0	0.00%	61	0.59%	56	0.49%	14	0.23%	6	0.22%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	0	0.00%	51	0.49%	20	0.18%	8	0.13%	4	0.15%
Active Clients - OAA Home Delivered Meals June 2018 <sup>7</sup>	0	0.00%	17	0.16%	8	0.07%	2	0.03%	2	0.07%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	0	0.00%	40	0.39%	35	0.31%	11	0.18%	5	0.19%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	0	0.00%	265	3.20%	417	5.42%	151	3.17%	125	6.71%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	0	0.00%	488	5.89%	877	11.41%	475	9.98%	237	12.73%
Total with Cognitive Difficulty 65+ <sup>6</sup> Percentages calculated using 65+ population data	0	0.00%	498	6.01%	500	6.50%	192	4.03%	128	6.87%
Financial Crime Victims 60+ <sup>8</sup>	0	0.00%	21	0.20%	0	0.00%	6	0.10%	0	0.00%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	8	12.50%	2,238	27.02%	1,849	24.05%	1,327	27.88%	296	15.90%

					MARTIN	COUNTY				
	34952	% of Pop	34956	% of Pop	34957	% of Pop	34974	% of Pop	34990	% of Pop
	Estimate		Estimate		Estimate		Estimate		Estimate	
Total Males & Females 60+ <sup>1</sup>	15,446		1,339		10,173		7,794		10,405	
Total Below Poverty Level 60+ <sup>2</sup>	1,084	7.02%	101	7.54%	969	9.53%	1,348	17.30%	430	4.13%
DCF SNAP Participation Report as at July 2018 <sup>5</sup>	1,235	8.00%	0	0.00%	0	0.00%	834	10.70%	0	0.00%
Active Clients June 2018 All Services <sup>7</sup>	92	0.60%	36	2.69%	88	0.87%	132	1.69%	55	0.53%
Waitlist Clients June 2018 All Services <sup>7</sup>	152	0.98%	22	1.64%	68	0.67%	125	1.60%	24	0.23%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	29	0.19%	37	2.76%	80	0.79%	84	1.08%	64	0.62%
Active Clients - OAA Home Delivered Meals June 2018 <sup>7</sup>	73	0.47%	12	0.90%	29	0.29%	86	1.10%	8	0.08%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	111	0.72%	14	1.05%	49	0.48%	82	1.05%	20	0.19%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	861	6.85%	130	12.81%	523	6.27%	342	5.57%	515	6.07%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	1,614	12.84%	182	17.93%	871	10.45%	559	9.10%	781	9.20%
Total with Cognitive Difficulty 65+ <sup>6</sup> Percentages calculated using 65+ population data	836	6.65%	113	11.13%	634	7.61%	508	8.27%	596	7.02%
Financial Crime Victims 60+ <sup>8</sup>	0	0.00%	5	0.37%	14	0.14%	0	0.00%	15	0.14%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	3,195	25.41%	176	17.34%	2,573	30.87%	1,409	22.93%	1,926	22.69%

			MARTIN	COUNTY		
	34994	% of Pop	34996	% of Pop	34997	% of Pop
	Estimate		Estimate		Estimate	
Total Males & Females 60+ <sup>1</sup>	5,530		6,109		14,634	
Total Below Poverty Level 60+ <sup>2</sup>	695	12.57%	304	4.98%	886	6.05%
DCF SNAP Participation Report as at July 2018 <sup>5</sup>	0	0.00%	0	0.00%	0	0.00%
Active Clients June 2018 All Services <sup>7</sup>	60	1.08%	39	0.64%	125	0.85%
Waitlist Clients June 2018 All Services <sup>7</sup>	61	1.10%	36	0.59%	96	0.66%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	56	1.01%	37	0.61%	131	0.90%
Active Clients - OAA Home Delivered Meals June 2018 <sup>7</sup>	19	0.34%	8	0.13%	39	0.27%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	44	0.80%	23	0.38%	58	0.40%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	259	5.96%	151	2.87%	694	5.93%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	638	14.69%	385	7.32%	1,204	10.30%
Total with Cognitive Difficulty 65+ <sup>6</sup> Percentages calculated using 65+ population data	407	9.37%	162	3.08%	703	6.01%
Financial Crime Victims 60+ <sup>8</sup>	45	0.81%	6	0.10%	31	0.21%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	1,421	32.73%	1,696	32.25%	2,978	25.47%

	(	ОКЕЕСНОВ	EE COUNT	ſ
	34972	% of Pop	34974	% of Pop
	Estimate		Estimate	
Total Males & Females 60+ <sup>1</sup>	3,174		7,794	
Total Below Poverty Level 60+ <sup>2</sup>	506	15.94%	1,348	17.30%
DCF SNAP Participation Report as at July 2018 <sup>5</sup>	644	20.29%	834	10.70%
Active Clients June 2018 All Services <sup>7</sup>	90	2.84%	132	1.69%
Waitlist Clients June 2018 All Services <sup>7</sup>	77	2.43%	125	1.60%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	33	1.04%	84	1.08%
Active Clients - OAA Home Delivered Meals June 2018 <sup>7</sup>	78	2.46%	86	1.10%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	34	1.07%	1	0.01%
Total with Self-Care/ADL Difficulty 65+ 3 Percentages calculated using 65+ population	202	9.13%	342	5.57%
Total with Ind Living/IADL Difficulty 65+ 4 Percentages calculated using 65+ population	350	21.06%	559	14.99%
Total with Cognitive Difficulty 65+ 6 Percentages calculated using 65+ population data	190	16.71%	508	17.44%
Financial Crime Victims 60+ <sup>8</sup>	24	0.76%	42	0.54%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	560	17.64%	1,409	18.08%

						CH COUNTY														
	West Palr	m Beach	Lake	Park	Riviera	Beach	West Paln	n Beach	Palm Spi	rings	West Palm	n Beach	N. Palm	Beach	West Palr	n Beach	PB Gai	rdens	Royal Palı	m Beach
PB Co. Zip Code	33401	%of Pop	33403	%of Pop	33404	%of Pop	33405	%of Pop	33406	%of Pop	33407	%of Pop	33408	%of Pop	33409	%of Pop	33410	%of Pop	33411	%of Pop
	Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate	
Total Males & Females 60+ 1	6,850		2,413		6,898		4,045		4,259		5,026		7,224		5,579		10,349		16,059	
Total Below Poverty Level 60+ <sup>2</sup>	885	12.92%	276	11.44%	867	12.57%	811	20.05%	450	10.57%	909	18.09%	422	5.84%	846	15.16%	1,031	9.96%	1,149	7.15%
DCF SNAP Participation Report as at July 2018 <sup>5</sup>	847	12.36%	324	13.43%	979	14.19%	698	17.26%	610	14.32%	1,052	20.93%	150	2.08%	732	13.12%	301	2.91%	932	5.80%
Active Clients June 2018 All Services <sup>7</sup>	113	1.65%	23	0.95%	119	1.73%	44	1.09%	31	0.73%	63	1.25%	10	0.14%	22	0.39%	35	0.34%	134	0.83%
Waitlist Clients June 2018 All Services <sup>7</sup>	122	1.78%	38	1.57%	104	1.51%	111	2.74%	64	1.50%	83	1.65%	22	0.30%	77	1.38%	46	0.44%	164	1.02%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	147	2.15%	28	1.16%	131	1.90%	27	0.67%	27	0.63%	65	1.29%	17	0.24%	18	0.32%	50	0.48%	124	0.77%
Active Clients - OAA Home Delivered Meals June 2018 <sup>7</sup>	26	0.38%	6	0.25%	30	0.43%	32	0.79%	12	0.28%	33	0.66%	5	0.07%	15	0.27%	6	0.06%	39	0.24%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	80	1.17%	29	1.20%	76	1.10%	73	1.80%	44	1.03%	79	1.57%	19	0.26%	62	1.11%	32	0.31%	105	0.65%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	444	8.37%	195	12.99%	425	7.89%	122	3.72%	250	8.09%	484	14.53%	229	4.01%	717	19.33%	896	10.80%	123	1.04%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	681	12.83%	275	18.32%	676	12.55%	613	18.67%	335	10.84%	574	17.23%	671	11.75%	401	10.81%	1,311	15.80%	1,615	13.61%
Total with Cognitive Difficulty 65+ <sup>6</sup> Percentages calculated using 65+ population data	492	9.27%	171	11.39%	447	8.30%	490	14.93%	296	9.58%	421	12.64%	375	6.57%	278	7.49%	675	8.13%	888	7.48%
Financial Crime Victims 60+ <sup>8</sup>	29	0.42%	32	1.33%	7	0.10%	8	0.20%	26	0.61%	33	0.66%	10	0.14%	38	0.68%	62	0.60%	59	0.37%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	1,970	37.13%	576	38.37%	1,138	21.12%	984	29.97%	649	21.01%	921	27.64%	1,649	28.88%	972	26.20%	2,454	29.57%	2,500	21.07%

				PA	LM BEACH CO	DUNTY														
	West	alm Beach	Green	acres	Wellir	ngton	Greena	icres	West Palm	n Beach	PB Garo	iens	Boynton	Beach	Boca F	Raton	Belle (	Glade	Boca R	aton
PB Co. Zip Code	33412	%of Pop	33413	%of Pop	33414	%of Pop	33415	%of Pop	33417	%of Pop	33418	%of Pop	33426	%of Pop	33428	%of Pop	33430	%of Pop	33431	%of Pop
	Estimat	e	Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate	
Total Males & Females 60+	<sup>1</sup> 4,214		2,576		11,020		9,298		10,224		13,535		6,226		8,466		3,552		4,767	
Total Below Poverty Level 60+ <sup>2</sup>	223	5.29%	171	6.64%	786	7.13%	1,718	18.48%	1,851	18.10%	611	4.51%	562	9.03%	773	9.13%	1,177	33.14%	395	8.29%
DCF SNAP Participation Report July 2018 <sup>5</sup>	as at 117	2.78%	255	9.90%	406	3.68%	1,730	18.61%	1,465	14.33%	200	1.48%	317	5.09%	562	6.64%	967	27.22%	131	2.75%
Active Clients June 2018 All Services <sup>7</sup>	17	0.40%	22	0.85%	45	0.41%	170	1.83%	143	1.40%	39	0.29%	66	1.06%	82	0.97%	110	3.10%	27	0.57%
Waitlist Clients June 2018 All Services <sup>7</sup>	22	0.52%	33	1.28%	65	0.59%	204	2.19%	225	2.20%	51	0.38%	56	0.90%	90	1.06%	68	1.91%	24	0.50%
Active Clients - OAA Congregate Sites June 2018 <sup>7</sup>	Meal 20	0.47%	18	0.70%	30	0.27%	179	1.93%	126	1.23%	70	0.52%	69	1.11%	49	0.58%	0	0.00%	15	0.31%
Active Clients - OAA Home Deli Meals June 2018 <sup>7</sup>	ered 1	0.02%	7	0.27%	11	0.10%	52	0.56%	53	0.52%	4	0.03%	11	0.18%	22	0.26%	0	0.00%	10	0.21%
Waitlist Clients - OAAHome Del Meals June 2018 <sup>7</sup>	vered 9	0.21%	19	0.74%	47	0.43%	144	1.55%	164	1.60%	30	0.22%	36	0.58%	58	0.69%	0	0.00%	9	0.19%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population	123	3.88%	153	7.80%	472	5.64%	570	8.32%	835	10.28%	473	4.38%	505	10.45%	528	8.74%	191	7.53%	256	6.87%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population	307	9.69%	198	10.10%	962	11.49%	996	14.55%	1,148	14.13%	851	7.87%	797	16.49%	1,050	17.38%	299	11.79%	547	14.67%
Total with Cognitive Difficulty Percentages calculated using 65+ population	731	7.29%	146	7.45%	598	7.14%	532	7.77%	1,009	12.42%	486	4.50%	553	11.44%	519	8.59%	433	17.07%	196	5.26%
Financial Crime Victims 60+		0.17%	20	0.78%	44	0.40%	31	0.33%	52	0.51%	42	0.31%	4	0.06%	46	0.54%	28	0.79%	0	0.00%
Total 65+ One person househ Owner or Renter Occupied Percentages calculated using 65+ population	269	8.49%	238	12.14%	1,497	17.87%	2,039	29.78%	2,774	34.15%	2,388	22.09%	1,845	38.17%	1,192	19.73%	894	35.24%	1,162	31.17%

				-	-	PA	LM BEACH CO	DUNTY														
			Boca F	laton	Boca F	Raton	Boca F	laton	Boynton	Beach	Boynton	Beach	Boynton B	Beach	Canal I	Point	Clewi	ston	Delray	Beach	Delray	Beach
F	PB Co. Zip Co	ode	33432	%of Pop	33433	%of Pop	33434	%of Pop	33435	%of Pop	33436	%of Pop	33437	%of Pop	33438	%of Pop	33440	%of Pop	33444	%of Pop	33445	%of Pop
			Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate	
Total N	Aales & Fem	ales 60+ 1	7,805		15,210		9,982		9,324		15,143		23,353		91		3,447		4,540		11,255	
	Below Pove 60+ <sup>2</sup>		399	5.11%	1,043	6.86%	892	8.94%	1,290	13.84%	1,384	9.14%	1,197	5.13%	5	5.49%	747	21.67%	832	18.33%	1,108	9.84%
DCF SNAP	Participatio July 2018	n Report as at 5	172	2.20%	303	1.99%	477	4.78%	940	10.08%	570	3.76%	276	1.18%	29	31.87%	0	0.00%	854	18.81%	524	4.66%
	e Clients Ju All Service		22	0.28%	48	0.32%	122	1.22%	156	1.67%	83	0.55%	68	0.29%	0	0.00%	2	0.06%	109	2.40%	55	0.49%
	ist Clients J All Services		25	0.32%	79	0.52%	127	1.27%	107	1.15%	119	0.79%	122	0.52%	0	0.00%	1	0.03%	78	1.72%	81	0.72%
	nts - OAA Co iites June 20	ngregate Meal )18 <sup>7</sup>	22	0.28%	44	0.29%	89	0.89%	197	2.11%	79	0.52%	55	0.24%	0	0.00%	0	0.00%	154	3.39%	56	0.50%
	nts - OAA Ho 1eals June 2	ome Delivered 018 <sup>7</sup>	8	0.10%	12	0.08%	39	0.39%	34	0.36%	23	0.15%	29	0.12%	0	0.00%	0	0.00%	28	0.62%	20	0.18%
M	Aeals June 2		18	0.23%	35	0.23%	91	0.91%	72	0.77%	82	0.54%	74	0.32%	0	0.00%	0	0.00%	57	1.26%	54	0.48%
1	With Self-C Difficulty 65 calculated using 65	;+ <sup>3</sup>	423	6.86%	1,146	8.98%	594	6.88%	397	5.36%	695	5.81%	1,192	5.66%	0	0.00%	357	14.18%	338	10.41%	851	9.38%
1	with Ind Liv Difficulty 65 calculated using 65	;+ <sup>4</sup>	741	12.01%	1,762	13.81%	1,102	12.76%	808	10.90%	1,719	14.36%	2,031	9.65%	0	0.00%	406	16.12%	516	15.90%	1,424	15.69%
	Cognitive D calculated using 65	ifficulty 65+ <sup>6</sup> 5+ population data	421	6.82%	838	9.70%	528	6.11%	603	8.14%	816	6.82%	1,113	5.29%	0	0.00%	299	11.87%	329	10.14%	652	7.18%
	al Crime Vio		3	0.04%	70	0.46%	23	0.23%	3	0.03%	50	0.33%	110	0.47%	0	0.00%	0	0.00%	0	0.00%	4	0.04%
Owner	One person r or Renter C calculated using 65		1,779	28.84%	4,530	52.45%	2,989	34.61%	2,096	28.28%	3,404	28.43%	4,876	23.16%	8	12.50%	576	22.88%	1,063	32.75%	2,906	32.01%

				PALM BEA	CH COUNTY															
	Delray	Beach	Welli	ngton	Jupi	ter	Lake W	orth	Palm Sp	rings	Lantar	na	Greena	cres	Lake W	orth	Teque	esta	Loxaha	tchee
PB Co. Zip Code	33446	%of Pop	33449	%of Pop	33458	%of Pop	33460	%of Pop	33461	%of Pop	33462	%of Pop	33463	%of Pop	33467	%of Pop	33469	%of Pop	33470	%of Pop
	Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate	
Total Males & Females 60+ <sup>1</sup>	14,952		2,979		11,419		5,152		7,631		7,782		8,884		17,523		6,024		4,694	
Total Below Poverty Level 60+ <sup>2</sup>	1,138	7.61%	143	4.80%	1,199	10.50%	762	14.79%	1,371	17.97%	755	9.70%	1,067	12.01%	990	5.65%	312	5.18%	205	4.37%
DCF SNAP Participation Report as at July 2018 <sup>5</sup>	482	3.22%	40	1.34%	306	2.68%	869	16.87%	1,407	18.44%	675	8.67%	1,370	15.42%	666	3.80%	81	1.34%	317	6.75%
Active Clients June 2018 All Services <sup>7</sup>	75	0.50%	5	0.17%	26	0.23%	52	1.01%	108	1.42%	34	0.44%	104	1.17%	79	0.45%	10	0.17%	37	0.79%
Waitlist Clients June 2018 All Services <sup>7</sup>	122	0.82%	8	0.27%	56	0.49%	72	1.40%	150	1.97%	85	1.09%	139	1.56%	155	0.88%	14	0.23%	50	1.07%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	78	0.52%	4	0.13%	20	0.18%	54	1.05%	149	1.95%	30	0.39%	112	1.26%	94	0.54%	8	0.13%	29	0.62%
Active Clients - OAA Home Delivered Meals June 2018 <sup>7</sup>	24	0.16%	1	0.03%	8	0.07%	13	0.25%	32	0.42%	19	0.24%	33	0.37%	21	0.12%	2	0.03%	5	0.11%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	84	0.56%	7	0.23%	35	0.31%	54	1.05%	104	1.36%	61	0.78%	108	1.22%	102	0.58%	11	0.18%	32	0.68%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	966	7.24%	127	5.02%	417	5.42%	205	5.46%	340	5.78%	469	7.85%	437	7.02%	805	5.53%	151	3.17%	334	11.45%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	1,432	10.74%	237	9.36%	877	11.41%	363	9.67%	442	7.52%	957	16.02%	878	14.10%	1,572	10.81%	1,572	33.03%	544	18.66%
Total with Cognitive Difficulty 65+ <sup>6</sup> Percentages calculated using 65+ population data	812	6.09%	185	7.31%	500	6.50%	419	11.16%	365	6.21%	481	8.05%	653	10.48%	793	5.45%	192	4.03%	574	19.68%
Financial Crime Victims 60+ <sup>8</sup>	69	0.46%	4	0.13%	11	0.10%	39	0.76%	27	0.35%	13	0.17%	70	0.79%	69	0.39%	2	0.03%	13	0.28%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	4,112	30.83%	308	12.17%	1,849	24.05%	1,025	27.31%	1,796	30.54%	1,634	27.35%	1,629	26.16%	3,360	23.10%	1,327	27.88%	392	13.44%

			PAL'	M BEACH CC	OUNTY									· · · · ·					· · · · · · · · · · · · · · · · · · ·	
	Boynton	1 Beach	Boynto	on Beach	Paho	Jkee	Jupit	ter	Jupiter F	Farms	Palm Be	each	Delray B	deach	Delray I	Beach	Boca F	Raton	Boca R	Raton
PB Co. Zip Code	33472	%of Pop	33473	%of Pop	33476	%of Pop	33477	%of Pop	33478	%of Pop	33480	%of Pop	33483	%of Pop	33484	%of Pop	33486	%of Pop	33487	%of Pop
	Estimate	'	Estimate	<u> </u>	Estimate	'	Estimate		Estimate		Estimate	'	Estimate	<u> </u>	Estimate		Estimate		Estimate	
Total Males & Females 60+ 1	8,483		2,143		1,324		8,445		2,699		7,022		5,031		16,115		5,541		7,362	
Total Below Poverty Level 60+ <sup>2</sup>	428	5.05%	55	2.57%	352	26.59%	432	5.12%	188	6.97%	377	5.37%	362	7.20%	1,989	12.34%	243	4.39%	386	5.24%
DCF SNAP Participation Report as at July 2018 <sup>5</sup>	128	1.51%	20	0.93%	370	27.95%	42	0.50%	65	2.41%	36	0.51%	110	2.19%	597	3.70%	120	2.17%	127	1.73%
Active Clients June 2018 All Services <sup>7</sup>	16	0.19%	4	0.19%	34	2.57%	4	0.05%	5	0.19%	4	0.06%	8	0.16%	125	0.78%	26	0.47%	17	0.23%
Waitlist Clients June 2018 All Services <sup>7</sup>	56	0.66%	3	0.14%	27	2.04%	18	0.21%	6	0.22%	9	0.13%	14	0.28%	191	1.19%	21	0.38%	31	0.42%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	13	0.15%	4	0.19%	0	0.00%	6	0.07%	4	0.15%	6	0.09%	7	0.14%	104	0.65%	32	0.58%	14	0.19%
Active Clients - OAA Home Delivered Meals June 2018 <sup>7</sup>	6	0.07%	1	0.05%	0	0.00%	1	0.01%	2	0.07%	1	0.01%	2	0.04%	42	0.26%	3	0.05%	3	0.04%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	34	0.40%	0	0.00%	0	0.00%	5	0.06%	5	0.19%	5	0.07%	9	0.18%	128	0.79%	13	0.23%	18	0.24%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	303	4.06%	19	1.35%	129	13.27%	211	2.92%	125	6.71%	361	6.17%	268	6.76%	1,097	7.79%	326	8.09%	249	4.31%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	542	7.25%	83	5.89%	224	23.05%	425	5.88%	237	12.73%	522	8.93%	535	13.49%	2,130	15.13%	489	12.13%	339	5.86%
Total with Cognitive Difficulty 65+ <sup>6</sup> Percentages calculated using 65+ population data	102	1.37%	37	2.63%	133	13.68%	260	3.60%	128	6.87%	262	4.48%	231	5.82%	1,034	7.35%	305	7.57%	249	4.31%
Financial Crime Victims 60+ 8	36	0.42%	7	0.33%	8	0.60%	2	0.02%	9	0.33%	0	0.00%	2	0.04%	65	0.40%	1	0.02%	3	0.04%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages cakulated using 65+ population data	1,254	16.78%	106	7.52%	235	24.18%	1,719	23.80%	296	15.90%	1,713	29.29%	1,458	36.76%	5,071	36.03%	1,088	26.99%	1,506	26.05%

		PALN	/ BEACH CO	UNTY			
	South	-	Boca I		Boca F	Raton	
PB Co. Zip Code	33493	%of Pop	33496	%of Pop	33498	%of Pop	Total
	Estimate		Estimate		Estimate		
Total Males & Females 60+ <sup>1</sup>	611		10,090		4,122		408,758
Total Below Poverty Level 60+ <sup>2</sup>	83	13.58%	619	6.13%	250	6.07%	38,516
DCF SNAP Participation Report as July 2018 <sup>5</sup>	at 109	17.84%	153	1.52%	86	2.09%	25,096
Active Clients June 2018 All Services <sup>7</sup>	29	4.75%	29	0.29%	11	0.27%	2,822
Waitlist Clients June 2018 All Services <sup>7</sup>	16	2.62%	45	0.45%	20	0.49%	3,716
Active Clients - OAA Congregate M Sites July 2017 - June 2018 <sup>7</sup>	eal 0	0.00%	32	0.32%	13	0.32%	2,719
Active Clients - OAA Home Deliver Meals June 2018 <sup>7</sup>	ed 0	0.00%	14	0.14%	8	0.19%	809
Waitlist Clients - OAAHome Deliver Meals June 2018 <sup>7</sup>	ed 0	0.00%	28	0.28%	12	0.29%	2,453
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	23	6.42%	492	5.78%	159	5.49%	21,997
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	46	12.85%	793	9.31%	311	10.74%	40,366
Total with Cognitive Difficulty 65+ Percentages calculated using 65+ population data	<sup>.6</sup> 79	22.07%	402	4.72%	218	7.53%	23,249
Financial Crime Victims 60+ <sup>8</sup>	2	0.33%	17	0.17%	18	0.44%	1,328
Total 65+ One person household Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	- 54	15.08%	2,121	24.90%	423	14.61%	86,814

			ST. LUCIE	COUNTY										
	34945	% of Pop	34946	% of Pop	34947	% of Pop	34949	% of Pop	34950	% of Pop	34951	% of Pop	34952	% of Pop
	Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate	
Total Males & Females 60+ <sup>1</sup>	1,363		1,937		2,981		4,869		3,008		6,974		16,169	
Total Below Poverty Level 60+ <sup>2</sup>	101	7.41%	311	16.06%	820	27.51%	225	4.62%	873	29.02%	693	9.94%	1,084	6.70%
DCF SNAP Participation Report as at July 2018 $^{\rm 5}$	69	5.06%	405	20.91%	666	22.34%	92	1.89%	1,599	53.16%	401	5.75%	1,235	7.64%
Active Clients June 2018 All Services <sup>7</sup>	1	0.07%	26	1.34%	29	0.97%	8	0.16%	97	3.22%	16	0.23%	92	0.57%
Waitlist Clients June 2018 All Services <sup>7</sup>	5	0.37%	32	1.65%	32	1.07%	16	0.33%	75	2.49%	46	0.66%	158	0.98%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	0	0.00%	10	0.52%	14	0.47%	2	0.04%	66	2.19%	7	0.10%	29	0.18%
Active Clients - OAA Home Delivered Meals June 2018 <sup>7</sup>	1	0.07%	21	1.08%	19	0.64%	4	0.08%	50	1.66%	18	0.26%	73	0.45%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	4	0.29%	21	1.08%	19	0.64%	8	0.16%	51	1.70%	33	0.47%	111	0.69%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	120	12.07%	145	11.35%	211	15.84%	192	4.82%	187	9.64%	195	3.49%	861	6.85%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	209	21.03%	311	24.35%	303	22.75%	411	10.32%	377	19.44%	641	11.49%	1,614	12.84%
Total with Cognitive Difficulty 65+ <sup>6</sup> Percentages calculated using 65+ population data	51	5.13%	241	18.87%	137	10.29%	207	5.20%	173	8.92%	358	6.41%	836	6.65%
Financial Crime Victims 60+ 8	0	0.00%	1	0.05%	2	0.07%	2	0.04%	12	0.40%	1	0.01%	3	0.02%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	166	16.70%	287	22.47%	361	27.10%	898	22.56%	899	46.36%	1,152	20.64%	3,195	25.41%

		-	ST.	LUCIE COU	NTY									
	34953	% of Pop	34957	% of Pop	34972	% of Pop	34981	% of Pop	34982	% of Pop	34983	% of Pop	34984	% of Pop
	Estimate		Estimate		Estimate		Estimate		Estimate		Estimate		Estimate	
Total Males & Females 60+ <sup>1</sup>	13,200		10,297		3,831		1,601		7,701		10,920		3,817	
Total Below Poverty Level 60+ <sup>2</sup>	1,211	9.17%	969	9.41%	506	13.21%	51	3.19%	562	7.30%	942	8.63%	357	9.35%
DCF SNAP Participation Report as at July 2018 <sup>5</sup>	1,384	10.48%	0	0.00%	622	16.24%	109	6.81%	872	11.32%	1,059	9.70%	346	9.06%
Active Clients June 2018 All Services <sup>7</sup>	78	0.59%	88	0.85%	90	2.35%	5	0.31%	41	0.53%	53	0.49%	24	0.63%
Waitlist Clients June 2018 All Services <sup>7</sup>	143	1.08%	68	0.66%	77	2.01%	8	0.50%	83	1.08%	112	1.03%	35	0.92%
Active Clients - OAA Congregate Meal Sites June 2018 <sup>7</sup>	42	0.32%	80	0.78%	0	0.00%	33	2.06%	14	0.18%	27	0.25%	11	0.29%
Active Clients - OAA Home Delivered Meals June 2018 <sup>7</sup>	40	0.30%	29	0.28%	78	2.04%	3	0.19%	29	0.38%	34	0.31%	14	0.37%
Waitlist Clients - OAAHome Delivered Meals June 2018 <sup>7</sup>	82	0.62%	49	0.48%	47	1.23%	5	0.31%	66	0.86%	74	0.68%	23	0.60%
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population data	587	7.73%	523	6.27%	202	9.13%	260	21.36%	475	9.07%	551	7.47%	146	6.02%
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population data	1,153	15.18%	871	10.45%	350	15.82%	351	28.84%	814	15.55%	915	12.40%	310	12.79%
Total with Cognitive Difficulty 65+ <sup>6</sup> Percentages calculated using 65+ population data	765	10.07%	634	7.61%	190	8.59%	276	22.68%	511	9.76%	579	7.85%	131	5.40%
Financial Crime Victims 60+ <sup>8</sup>	3	0.22%	0	0.00%	0	0.00%	3	0.06%	10	0.33%	3	0.04%	1	0.01%
Total 65+ One person household - Owner or Renter Occupied <sup>9</sup> Percentages calculated using 65+ population data	1,087	14.31%	2,573	30.87%	560	25.31%	284	23.34%	1,484	28.34%	1,247	16.90%	479	19.76%

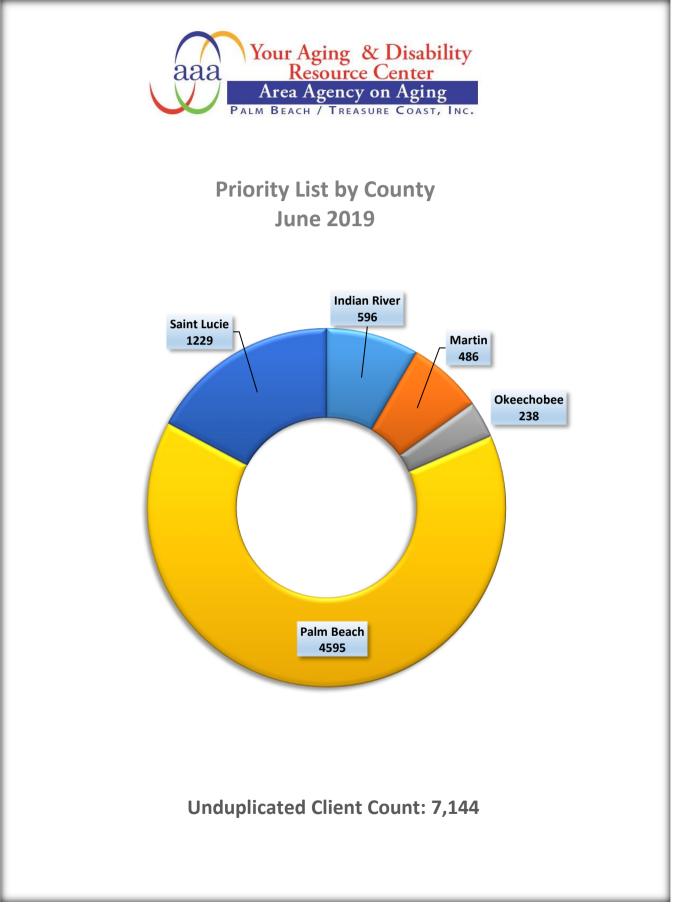
		ST. LUK		Y										
	34986	% of Pop	34987	% of Pop	34990	% of Pop	34994	% of Pop						
	Estimate		Estimate		Estimate		Estimate							
Total Males & Females 60+	<sup>1</sup> 10,377		2,480		10,794		6,058							
Total Below Poverty Level 60+ <sup>2</sup>	1,139	10.98%	44	1.77%	430	3.98%	695	11.47%						
DCF SNAP Participation Report July 2018 <sup>5</sup>	as at 347	3.34%	101	4.07%	0	0.00%	0	0.00%						
Active Clients June 2018 All Services <sup>7</sup>	48	0.46%	9	0.36%	55	0.51%	60	0.99%						
Waitlist Clients June 2018 All Services <sup>7</sup>	60	0.58%	16	0.65%	24	0.22%	61	1.01%						
Active Clients - OAA Congrega Meal Sites June 2018 <sup>7</sup>	ite 14	0.13%	5	0.20%	64	0.59%	56	0.92%						
Active Clients - OAA Home Delivered Meals June 2018	, 23	0.22%	4	0.16%	8	0.07%	19	0.31%						
Waitlist Clients - OAAHome Delivered Meals June 2018	32	0.31%	9	0.36%	20	0.19%	44	0.73%						
Total with Self-Care/ADL Difficulty 65+ <sup>3</sup> Percentages calculated using 65+ population of	898	11.23%	97	5.12%	515	6.07%	259	5.96%						
Total with Ind Living/IADL Difficulty 65+ <sup>4</sup> Percentages calculated using 65+ population of	1,243	15.55%	160	8.45%	781	9.20%	638	14.69%						
Total with Cognitive Difficulty 6 Percentages calculated using 65+ population of	55+ <sup>6</sup> 554	6.93%	157	8.29%	596	7.02%	407	9.37%						
Financial Crime Victims 60+	8 1	0.01%	0	0.00%	0	0.00%	0	0.00%						
Total 65+ One person househo Owner or Renter Occupied Percentages calculated using 65+ population of	9 1,867	23.35%	260	13.73%	1,926	22.69%	1,421	32.73%						
<sup>1</sup> B01001: SEX BY AGE - Ur Source: US Census Data <sup>2</sup> B17020: POVERTY STATL	2012-2016 Amer	can Commu				m noverty c	tatus is dat							
Source: US Census Data											I			I
<sup>3</sup> B18106: SEX BY AGE BY S Source: US Census Data						pulation 5 y	ears and ov	ver			1	1		1
<sup>4</sup> B18107: SEX BY AGE BY I		NG DIFFICIU	TY - Univers	e: Civilian n	oninstituti	nalized nor	ulation 19	vears and or	rer					
Source: US Census Data								,						
			,,											
<sup>5</sup> July 2018 SNAP data pro	ovided by the Dep	artment of C	hildren & Fa	amiles										
<sup>6</sup> B18104: SEX BY AGE BY O Source: US Census Data						opulation 5	years and	over						
<sup>7</sup> Your Aging & Disability														
<sup>8</sup> As reported, by particip	ating Law Enforce	ment Agenci	es, to Your A	Aging & Disa	bility Reso	urce Center								
9 B25116: TENURE BY HOU					•	sing units								
Source: US Census Data	2012-2010 AME	ican commu	anity survey	J-TEAT ESTIP	ndles									

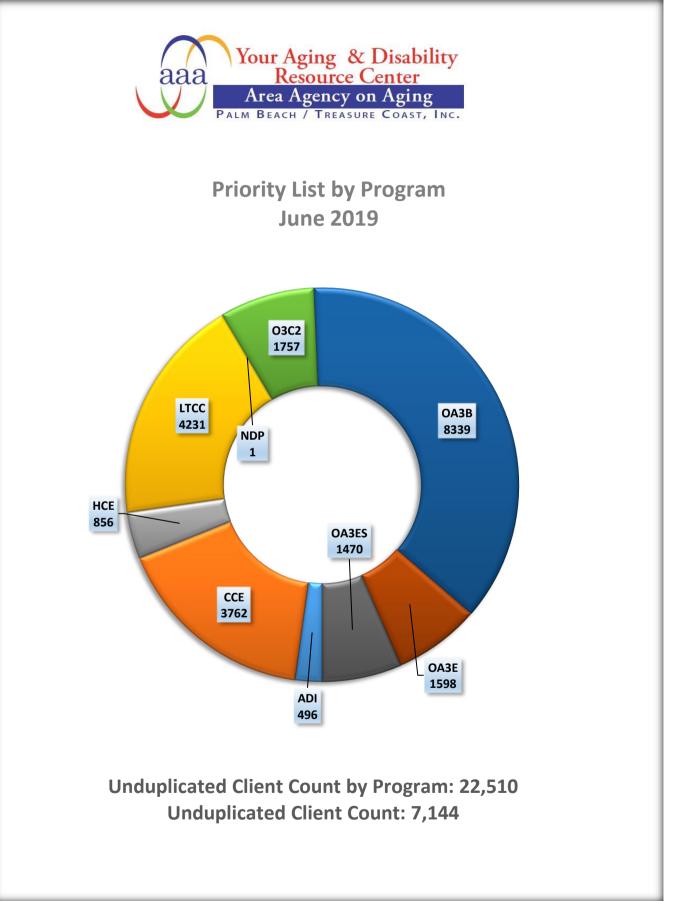
# Home and Community-Based Services (HCBS):

The chart below compares the types of services requested in June 2018 compared to June 2019

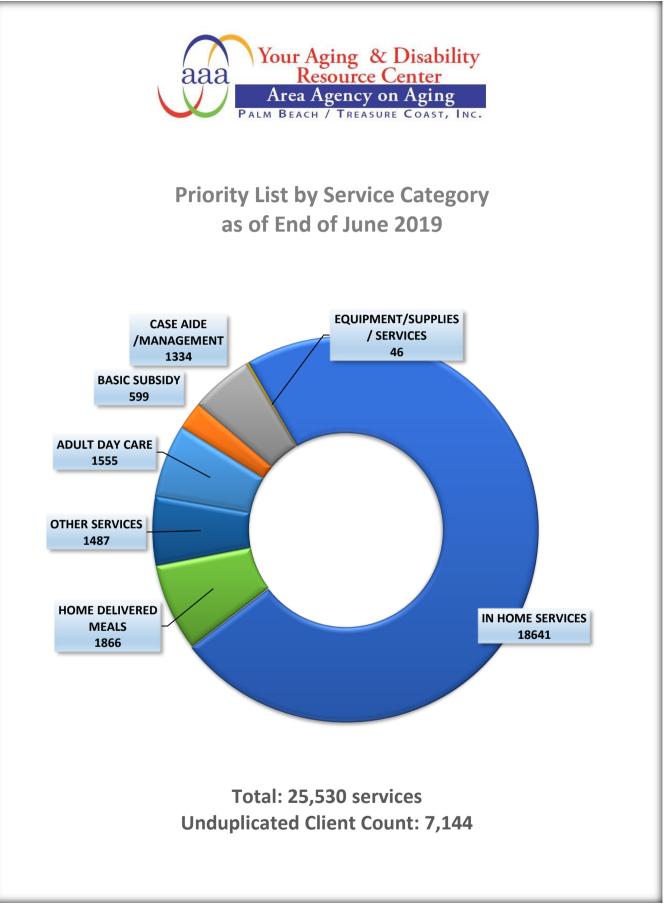
Consumers Receiving Services	June 2019		June 2018	
Number of consumers receiving services	Including MLTC & PACE clients	14,678	Including MLTC & PACE clients	14,32
	Excluding MLTC & PACE clients	5,054	Excluding MLTC & PACE clients	4,99
Number of unique services provided to	Excluding services provided	7,768	Excluding services provided	7,62
individuals (doesn't count the frequency of the service)	under MLTC & PACE		under MLTC & PACE	
Number of clients for the 5 top services	Congregate Meals	2,327	Congregate Meals	1,99
provided	Nutrition Education	1,112	Home Delivered Meals	1,091
	Home Delivered Meals	946	Nutrition Education	802
	Intake	541	Intake	536
	Case Management	417	Case Management	442
Average profile	Age	e: 77.13	Age	e: 76.43
	Gender: 66% female;34	1% male	Gender: 67% female;33	3% male
	59% Livin	ng alone	59% Livin	ng alone
Consumers Waiting for Services	June 2019		June 2018	
Number of consumers waiting for program		7,144		7,032
	THE REPORT OF A DESCRIPTION OF A DESCRIP	1,621	High priority rank	1,425
services (Numbers for rank are as of end of the	High priority rank	1,021		
reporting month)	High priority rank Moderate to low priority rank	5,107	Moderate to low priority rank	5,054
reporting month) Number of services needed to individuals			Moderate to low priority rank as of end of June 2018	5,054 27,399
reporting month) Number of services needed to individuals (doesn't count the frequency of the service)	Moderate to low priority rank as of end of June 2019	5,107 25,530	as of end of June 2018	27,399
reporting month) Number of services needed to individuals (doesn't count the frequency of the service) Number of clients waiting for top 5 services (all	Moderate to low priority rank as of end of June 2019 Homemaker	5,107 25,530 4,143	as of end of June 2018 Homemaker	27,399 4,218
services (Numbers for rank are as of end of the reporting month) Number of services needed to individuals (doesn't count the frequency of the service) Number of clients waiting for top 5 services (all numbers are as of the end of the reporting month)	Moderate to low priority rank as of end of June 2019 Homemaker Chore	5,107 25,530 4,143 3,570	as of end of June 2018 Homemaker Chore	27,399 4,214 3,725
reporting month) Number of services needed to individuals (doesn't count the frequency of the service) Number of clients waiting for top 5 services (all	Moderate to low priority rank as of end of June 2019 Homemaker Chore Personal Care	5,107 25,530 4,143 3,570 3,118	as of end of June 2018 Homemaker Chore Personal Care	27,399 4,214 3,722 3,349
reporting month) Number of services needed to individuals (doesn't count the frequency of the service) Number of clients waiting for top 5 services (all numbers are as of the end of the reporting	Moderate to low priority rank as of end of June 2019 Homemaker Chore Personal Care Companionship	5,107 25,530 4,143 3,570 3,118 2,169	as of end of June 2018 Homemaker Chore Personal Care Companionship	27,399 4,218 3,722 3,349 2,173
reporting month) Number of services needed to individuals (doesn't count the frequency of the service) Number of clients waiting for top 5 services (all numbers are as of the end of the reporting	Moderate to low priority rank as of end of June 2019 Homemaker Chore Personal Care Companionship Emergency Alert Response	5,107 25,530 4,143 3,570 3,118	as of end of June 2018 Homemaker Chore Personal Care Companionship Emergency Alert Response	27,39 4,21 3,72 3,34 2,17 2,08
reporting month) Number of services needed to individuals (doesn't count the frequency of the service) Number of clients waiting for top 5 services (all numbers are as of the end of the reporting month)	Moderate to low priority rank as of end of June 2019 Homemaker Chore Personal Care Companionship Emergency Alert Response	5,107 25,530 4,143 3,570 3,118 2,169 2,153 e: 76.00	as of end of June 2018 Homemaker Chore Personal Care Companionship Emergency Alert Response	27,399 4,218 3,722 3,349 2,173 2,088 e: 76.23

The number of clients by county currently waiting for services as of June 2019 is shown on the following chart.

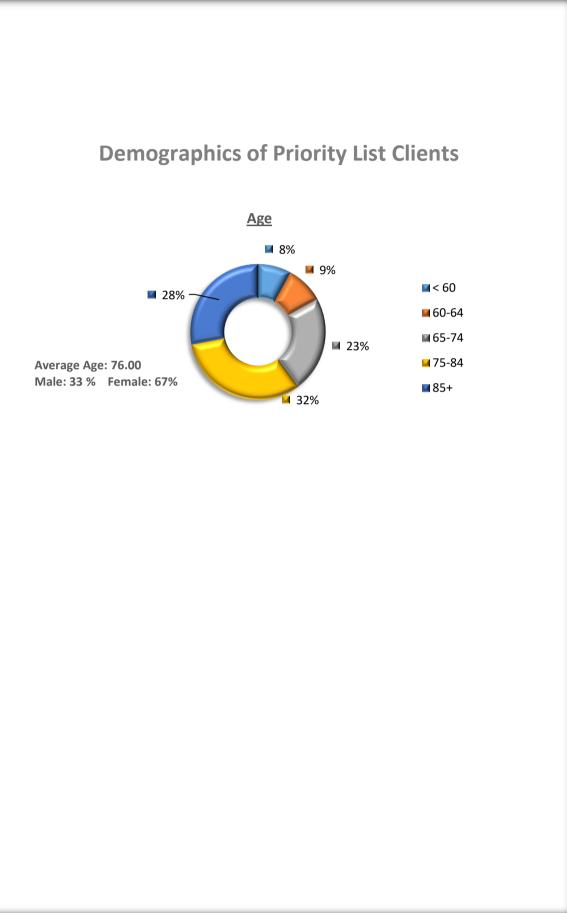




THE NUMBER OF CLIENTS WAITING FOR SERVICE BY SERVICE CATEGORY IS SHOWN BELOW.







# Goals and Objectives

The Department has aligned the Area Plan goals and objectives with those of the Administration on Aging, which are indicated by this symbol: ▲ Additional goals and objectives particular to each AAA may be added.

**GOAL 1**: Empower seniors, individuals with disabilities, their families, and other consumers to choose and easily access options for existing mental and physical health and long-term care

# **<u>OBJECTIVE 1.1</u>**: A Provide streamlined access to health and long-term care options through the Aging and Disability Resource Centers (ADRCs)

**EXPLANATION**: The primary intent of this objective is to address ways you link people to information and services.

#### **STRATEGIES/ACTION STEPS:**

**H** Consumer Care and Planning will coordinate the Agency's work with DOEA to replace CIRTs.

The Helpline will work with the St. Lucie County Department of Health to accomplish Action Step 3.1.1.2 of the St. Lucie County Community Health Improvement Plan to increase awareness of the Area Agency on Aging Helpline.

The Helpline will continue to operate Monday –Friday 8:00 AM to 5:00 PM to provide enhanced information and referral services to consumers in PSA9. The highly trained staff is able to help our consumers find linkage to almost any request for services.

Your Aging and Disability Resource Center (the Center) will provide outreach activities targeting seniors, individuals with disabilities, and professionals in the community to educate them about all aspects and services of the Center, primarily about our role in being the gateway for long-term care options.

The Helpline and IT will ensure that Your Aging and Disability Resource Center website provides detailed information on the Helpline and link to the REFER database for consumers to access resources for a variety of needs including long term care services.

The ADRC supervisory staff will run reports monthly to measure productivity, staff performance and study the trends of the call center performance. Data analysis will be performed to monitor call volume, abandonment rate, staffing rates and utilization. We currently have Contact Sweet for monitoring call volume and abandonment rates. We will use call recording call listening for quality assurance purposes in addition we will use CIRT and REFER to measure work volume and quality performance standards.

Helpline will look for new funding resources to resume the <mark>Helpline Crisis Solutions Initiative</mark> Senior Crisis Prevention Fund.

# **Contracted Providers Strategies and Action Steps**

# **Alzheimer's Community Care**

- Alzheimer's Community Care (Organization) will provide training on its services and resources to the ADRC/Elder Helpline staff at least once a year and/or when new resources or services are available, updated sessions will be offered as needed.
- Alzheimer's Community Care will distribute information on its annual Alzheimer's Conference and caregiver forums including locations, times, dates, and benefits for caregivers/families, elders, and professionals, as well as financial assistance for caregivers if there is a cost (there is no cost for caregiver forums).
- Alzheimer's Community Care's Family Nurse Consultants are the voice, navigators, and communicators to families, human and health service networks, legal, etc., on services and resources, and in turn, will share their needs and requests with the ADRC's staff when such assistance is needed.
- Alzheimer's Community Care's focus will remain on keeping families together and in the home for as long as possible, hence community-based resources are a great benefit. This focus is to sustain families' safely with security, ensure their wellbeing and welfare, as well as preserving their dignity and integrity throughout the disease process while living in their homes and communities.
- Long-term planning is always provided by Alzheimer's Community Care with assistance by a multidisciplinary team when a change in a family's level of care is required. This focus diminishes any catastrophic issues as they arise due to the nature and insidiousness of Alzheimer's disease and/or the other neurocognitive disorders.
- Through its 24/7 Alzheimer's Crisis Line and its website Alzheimer's Community Care will provides facts, phone numbers and other life-impacting and at times, life-saving information to the staff at the ADRCs, Adult and Protective Services, law enforcement, caregivers, families, etc. When needed, an Alzheimer's Family Nurse Consultant is on call and becomes accessible if that personal intervention is required.

#### OUTCOMES:

<Enter Text Here>

#### **OUTPUTS:**

# **<u>OBJECTIVE 1.2</u>**: **A**Encourage individuals, including people under 60, to plan for future long-term care needs by providing access to information

**EXPLANATION:** The primary intent of this objective is to get the message to people who are not yet 60 that planning for long-term care (LTC) is needed.

#### **STRATEGIES/ACTION STEPS:**

The Helpline will continue to provide outreach activities which will target caregivers and adult children of individuals who need to understand long term care options for future needs for themselves. This will include SHINE/SMP Medicare education and information on the long term care options and how to call the Helpline for further education.

Helpline will collaborate with community agencies which serve individuals under the age of 60 such as Alpert Jewish Family Services, PACE, CILO and elder law attorneys, to provide education and access for options counseling.

Helpline will collaborate with the Department of Children and family programs HCDA and CCDA to provide education and opportunities for long term care planning.

The Helpline will take advantage of any media event or radio talk program that will educate listeners about long term care needs and the Helpline role in providing assistance.

The ADRC will also participate on the ADRC/ REFER workgroup calls to coordinate with the 11 Area Agencies on Aging. The Helpline will continue to seek resources for persons with a disability for the REFER database.

Healthy Living will invite Elder Rights to to the last class of Powerful Tools for Caregiver Workshops to educate the participants to the importance of preparing for the future as well as providing resources.

# **Contracted Providers Strategies and Action Steps**

#### **Alzheimer's Community Care**

- Alzheimer's Community Care (Organization) provides and participates in seminars that are sponsored by pre-retirement preparation institutions, Wealth Managers within banking industries, certified Elder Law Attorney workshops, and one-on-one with families when seeking guidance and help on behalf of their parents/family members with a focus on their own future planning as to diminish the exposure of financial despair and/or the benefits for nutritional/physical life-impact alternatives as it relates to retirement.
- The Organization sponsors three (3) Advisory Councils within the three counties that it serves. These
  council members are connected to numerous levels of community resources and services and must
  have no conflict of interest and abide by the mission and policies of the Organization. All members are
  Board-approved, must be 18 years of age or over, and have a connection/interest on the needs of
  families coping with Alzheimer's disease or other neurocognitive disorders. Representation on these
  Councils are from law enforcement, home health agencies, wealth managers, academia, advocates,
  caregivers, health and human service providers, etc. Topics for discussion may include: disaster
  preparedness, guardianship, legal planning, long-term care services, hospital administrators,

community-based services and resources that are linked to dementia-specific providers, social security eligibility and benefits, Medicare and supplementary health insurances (AARP, HMOs, etc.) options and medical providers, etc. The membership has no term limit and is not a policy making body but does make recommendations for a specific Standing Committee because of its focus on the need. All Advisory Council reports are forwarded to the Board of Directors, who have an opportunity to review them and can bring them up for discussion if so desired.

- Each Advisory Council meeting is chaired by a Board member, agenda and reports are provided at each meeting, amd are scheduled four times a year or more if that council desires with approval by the Chair. Each meeting is placed on the Board of Directors agenda for comment and the Chair of that council will answer any questions if necessary.
- Organization influences the health insurance industry and wealth management firms to create insight
  into their own educational goals and objectives by acknowledging the high incidence of Alzheimer's
  disease and other neurocognitive disorders that could affect their clients as it relates to defining the
  importance of medical/financial surrogates, medical directives and living wills, all of which are
  advocated as a best practice.
- Organization interfaces with local clergy to educate their congregations on how to help, support and gain access to long-term care planning as it relates to financial and legal options before Alzheimer's disease and other neurocognitive disorders grips them within an emotionally or medically paralyzing situation during their retirement years.

#### OUTCOMES:

#### Alzheimer's Community Care

- Increase pre-retirement individuals to be more cognitive on the importance of financial and legal planning, which may diminish the need for financial and health despair during retirement years. These topics could include local long-term care options, inclusive of their costs and affordability.
- Increase public awareness on state and federal services and programs along with their benefits and limitations.

# OUTPUTS:

#### **<u>OBJECTIVE 1.3</u>**: Ensure that complete and accurate information about resources is available and accessible

**EXPLANATION:** The intention of this objective is to keep ReferNET current and to continue to enhance how people can connect to the information.

#### **STRATEGIES/ACTION STEPS:**

Your ADRC will participate in workgroups for the implementation of E-CIRTS

The Helpline will maintain a staff person dedicated to keeping the ReferNet resources up to date. Helpline staff will assist in monitoring accuracy by advising the database specialist when resources, phone numbers, locations require updating.

The Helpline and IT will maintain a link to the Refer database on the ADRC website and monitor web site hits monthly to track volume.

Advisory Council members will be invited to assist the Helpline in outreach events, health fairs and community presentations to target low-income rural populations to promote the Helpline.

The Helpline will offer in-service training for staff on agencies we frequently make referrals to in order to stay current on services and resources for our callers.

# **Contracted Providers Strategies and Action Steps**

#### **Alzheimer's Community Care**

- Alzheimer's Community Care (Organization)'s Family Nurse Consultants, Family Nurse Consultants' assistants, and Case Managers are kept informed on all the latest community-based resources that are provided though non-profit as well as for-profit sources. Also, these staff are culturally capable, sensitive, and accessible as to their capacity to address their needs. The Organization's service staff will advocate many times so that all understand and value those needs on behalf of Alzheimer's patients and their families.
- The Organization provides access to the ADRC's staff to its website, 24/7 Alzheimer's Crisis Line, SociAlz (social media), e-mails, and other sources of communications consistently, as well as the Organization's staff has access to the ADRC's website.
- The Organization's published Alzheimer's magazine, collateral printed materials, Family Elopement Risk Guides, etc. are always available to the ADRCs upon request, as well as they are notified when new materials have been produced.
- The Organization will continue to work with all providers to engage in sharing resources and services when they are needed, and it is expected that the reverse is understood as well.

## OUTCOMES:

#### **Alzheimer's Community Care**

- The commitment to communications and interventions provides a greater stabilization for all fragile and vulnerable elders and this working together has proven to be successful, and at times lifesaving.
- Alzheimer's Community Care's outreach to the ADRCs has proven to be financially beneficial to families and allows families to have options when at times their desperation could have resulted in tragedy. Such options will mean that a person diagnosed with Alzheimer's will not have to be Baker Acted or, worse yet, jailed. These options will lengthen the time patients are able to stay with their families together in the home, which is what 96% of Alzheimer's families wish for.

## OUTPUTS:

#### **<u>OBJECTIVE 1.4</u>**: Ensure that elders have access to free, unbiased, and comprehensive health insurance counseling

**EXPLANATION**: The primary intent of this objective is to show how the AAA is supporting the SHINE/SMP Program. Ways to show the support might be through establishing additional counseling sites.

#### **STRATEGIES/ACTION STEPS:**

The SHINE department will seek additional SHINE counseling sites through community partners where access to consumers is needed

The SHINE department will expand the existing counseling site network to include sites outside of the aging network.

The SHINE department will expand counseling methods to include virtual platform applications where social distancing and rural client travel may be required

The SHINE department will continue its partnership with the West Palm Beach and Treasure Coast Social Security office and referral process and work to expand this partnership to the West Palm Beach Social Security office.

The SHINE department will continue to train all new Helpline staff in SHINE modules and provide ongoing training and Medicare updates.

The SHINE department will continue outreach events and local media exposure to educate the community about the services of SHINE to include both in person and virtual options where social distancing may be required

The Aging and Disability Resource Center will promote the low income cost savings programs through the Helpline and SHINE counseling.

The Helpline will continue to refer potential clients who can benefit from low income assistance.

The Helpline will continue to schedule SHINE appointments using the online Timetap platform.

The Helpline will promote inter-collaboration between departments of the ADRC in making referrals and coordination of outreach events.

The SHINE department will promote Medicare awareness, availability of counseling and volunteer recruitment through the ADRC website.

The SHINE department will train Helpline and ADRC staff on referring to the SHINE program for Medicare fraud cases in support of the newest Senior Medicare Patrol (SMP) grant.

The SHINE department will continue to provide personalized counseling through training SHINE counselors and staff to use the new plan finder on Medicare.gov

The SHINE department will provide counseling, education, and presentations to the community to assist in the cost avoidance and prevention of Medicare insurance fraud.

SHINE staff presents each fall at a Bagels & Brains session to educate seniors and those in the aging network about the benefits of SHINE counseling.

SHINE staff created a new media and outreach method of creating a Youtube channel with several Medicare topic pre-recorded presentations for the aging network to share when physical or live virtual presentations or not possible

SHINE staff will work with the St. Lucie County Department of Health to accomplish Action Step 1.1.1.4 of the St. Lucie County Community Health Improvement Plan to increase health literacy in the area of insurance increase understanding of process and terminology.

Healthy Living will work with the St. Lucie County Department of Health to accomplish Action Step 1.1.1.8 of the St. Lucie County Community Health Improvement Plan to increase awareness and use of SHINE (Serving Health Insurance Needs of Elders) Medicare Counseling.

#### OUTCOMES:

ADRC will see greater program awareness, an increase in call volume on the Helpline for SHINE services and an increase in SHINE appointments

#### OUTPUTS:

<Enter Text Here>

#### **<u>OBJECTIVE 1.5</u>**: Increase public awareness of existing mental and physical health and long-term care options

**EXPLANATION**: The primary intent of this objective is to help people become aware that they might benefit from mental and physical health services and that the services are available in the community.

#### **STRATEGIES/ACTION STEPS:**

The Communications Department will design and launch a new website to include mental health information and resources including "Talk it Out". Information regarding physical health, healthy living and long term care options will also be a major focus.

Consumer Care and Planning and Advisory Council members will attend the Interagency Network of Palm Beach County to share information about the AAAPB/TC services and learn of other community resources.

The Helpline will look for opportunities to participate in local conferences, i.e. Fearless Caregiver, Karp Law Firm breakfast, Elder Concert, Alzheimer Community Care Conference.

SHINE outreach presentations will be conducted to promote the availability of preventative services for people on Medicare to include mental health services and preventative wellness visits.

The Helpline will stay current on classes offered in Healthy Living and link clients when appropriate.

The Helpline will continue to keep a list of caregiver support groups to encourage caregivers.

The Helpline will stay current on other community agency resources that have supports and services of interest to our clients.

The Helpline has gathered resources for mental health and social isolation as it relates to the COVID Pandemic and the need for alternatives to traditional in person groups.

As Healthy Living identifijes workshop participants in need of long term care services and suffering from social isolation they will provide appropriate resources. Healthy Living will work with the St. Lucie County Department of Health to accomplish Action Step 1.2.1.8 of the St. Lucie County Community Health Improvement Plan to create and publish an inventory of physical activity programs in the community.

Consumer Care and Planning will work with the St. Lucie County Department of Health to accomplish Action Step 1.3.1.4 of the St. Lucie County Community Health Improvement Plan to increase awareness of free counseling services for seniors and caregivers that are offered through the Older Americans Act.

# **Contracted Providers Strategies and Action Steps**

## Alzheimer's Community Care

- Alzheimer's Community Care (Organization) will provide training on its services and resources to the ADRC/Elder Helpline staff at least once a year and/or when new resources or services are available, updated sessions will be offered as needed.
- The Organization will distribute information on its annual Alzheimer's Conference and caregiver forums including locations, times, dates, and benefits for caregivers/families, elders, and professionals, as well as financial assistance for caregivers if there is a cost (there is no cost for caregiver forums).
- The Organization's Family Nurse Consultants are the voice, navigators, and communicators to families, human and health service networks, legal, etc., on services and resources, and in turn, share their needs and requests with the ADRC's staff when such assistance is needed.
- The Organization's focus is keeping families together and in the home for as long as possible, hence community-based resources are a great benefit. This focus is to sustain families' safely with security, ensure their wellbeing and welfare, as well as preserving their dignity and integrity throughout the disease process while living in their homes and communities. However, long-term planning is always provided with assistance by a multi-disciplinary team when a change in a family's level of care is required. This focus diminishes any catastrophic issues as they arise due to the nature and insidiousness of Alzheimer's disease and/or the other neurocognitive disorders.
- The 24/7 Alzheimer's Crisis Line and its website that provides facts, phone numbers and other lifeimpacting - and at times, life-saving - information to the staff at the ADRCs, Adult and Protective Services, law enforcement, caregivers, families, etc. When needed, an Alzheimer's Family Nurse Consultant is on call and becomes accessible if that personal intervention is required.

# **Council on Aging of Martin County – COAMC**

- COAMC case managers assess new and existing clients with dementia utilizing the 701B assessment, in order to identify needed services and referrals to meet the client's and caregiver's specific needs. Assessing a client's mental and physical health needs is a critical component of the assessment process. Unmet needs are addressed by the case manager through referral to local community resources.
- 2. Outreach is conducted throughout the year at various venues throughout the community. Availability

of existing mental and physical health services are advertised during the outreach events.

- 3. COAMC's website includes a section for "Helpful Resources." Organizations listed include the following:
  - Alzheimer's Disease Education and Referral (ADEAR) Center
  - <u>American Cancer Society</u>
  - <u>American Lung Association</u>
  - <u>American Heart Association</u>
  - Arthritis Foundation
  - <u>American Society of Colon and Rectal Surgeons</u>
  - Health Finder
  - <u>National Osteoporosis Foundation</u>
  - <u>National Parkinson Foundation</u>

Also included on the website are links directing clients to resources for health information. The sources include the following:

- Internet Mental Health
- MedicineNet
- Health on the Net Foundation
- Mesothelioma Guide

## Council on Aging of St. Lucie – COASL

Outreach: Council on Aging of St. Lucie, Inc, information brochure details the available services provided or arranged by COASL which includes: Mental Health Referrals and SHINE referrals. SHINE delivers one-on-one counseling in person or over the telephone assistance with Medicare and other health insurance questions. SHINE presentations will be held at our congregate meal sites to promote services for seniors on Medicare. COASL will continue to maintain a list of caregiver support options. COASL will maintain resources that have support services.

1. Case Managers continue to attend training with community partners who specialize in physical health, mental health and long term care options, and are knowledgeable on available resources for such.

2. Case Managers will continue to provide referrals for clients with local community partners when needed for physical health, mental health or long term care needs.

#### **Okeechobee Senior Services**

- Use the Senior Services pages of the County website to inform the public of the availability of long-term care services to qualified individuals.
- Include the Elder Helpline number in our Agency brochure.
- Include the Elder Helpline number on our staff business cards.
- Include the contact information for local mental health and counseling resources in our in-house resource directory and provide that information to inquirers seeking such services.

Refer inquirers looking for information regarding mental health and/or physical health assistance to the Elder Helpline, 211 Palm Beach / Treasure Coast, and the Okeechobee County Health Department.

## Senior Resource Association – SRA

SRA will connect clients and caregivers to supporting services for physical, health, mental health, and long term care options which will assist the caregiver to continue to provide care. (i.e. SRA's services; Caregiver support groups and training; collaborating associations and programs such as the Mental Health association, Sunshine, and the Elder Helpline.)

2. SRA will attend health fairs, expos, and make presentations at local service organizations throughout the community in order to provide education to meet individual needs of seniors, individuals with disabilities, their families, and other consumers

3. SRA will coordinate outreach to inform seniors, individuals with disabilities, their families, and other consumers of the physical mental and long term care options available in our community through media such as direct mail, social media and websites.

#### The Volen Center

- A. The Volen Center (TVC) completes training for staff responsible for outreach of DOEA programs and services to assure that the most accurate and up-to-date information is informing staff.
- B. Outreach staff is responsible for completing trainings, presentations and speaking engagements in the community with the focus of providing community members and stake holders with information on the existing mental and physical health long-term care options.
- C. Reports will collect the data on the communities reached through these outreach efforts.

#### **OUTCOMES:**

#### **Alzheimer's Community Care**

Increase public awareness and knowledge to all cultures, religious communities, race, sexual orientation, and financial status on options and services (LTC, community-based, government, private sectors, medical providers, government, etc.) available to patients, caregivers and families that are afflicted with Alzheimer's disease or other neurocognitive disorders with the belief that where there is help, there is always hope.

#### **OUTPUTS:**

#### **<u>OBJECTIVE 1.6</u>**: Identify and serve target populations in need of information and referral services

**EXPLANATION:** The primary intent of this objective is for the AAA to detail how it plans to reach populations in need of information and referral (I&R) services that might require more challenging outreach efforts.

#### **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will monitor OAA targeted groups on providers' Semi-Annual Outreach Report and provide technical assistance for improving outreach where warranted as part of the annual quality assurance review process.

Consumer Care and Planning will use DOEA's GIS data to help providers' identify locations with high concentrations of OAA targeted groups.

Consumer Care and Planning will continue its participation on United Way of Palm Beach County's Hunger Relief Project Advisory Committee.

Consumer Care and Planning will continue its work with United Way of St. Lucie County's Healthy Visions Council providing information on senior and caregiver needs and identifying initiatives to resolve those issues.

Consumer Care and Planning will help link Palm Beach County Food Bank outreach specialists with <del>communities where seniors can benefit from assistance in completing SNAP applications.</del> Covered in 2.1. Palm Beach County Food Bank no longer needs the information.

Consumer Care and Planning will participate in Healthier Boynton Beach Community Conversations to reach low-income, minority populations to share information about services and learn first-hand of local needs.

Consumer Care and Planning will attend Palm Beach County's Community Revitalization Team meetings in order to meet residents of Palm Beach County's unincorporated areas to share information on services, learn of community needs and learn of additional resources that may be pertinent to the REFER database.

The Helpline will provide education to SHINE volunteers to educate them on additional services available through the Helpline for other long term care information.

SHINE counseling sites will offer information on contacting the Helpline for additional information and referral.

The Helpline will continue to offer agency tours to interested partners.

The Helpline will offer in-service training to the senior network and partner agencies that serve seniors, adults with disabilities and caregivers.

The Helpline will continue to provide in-service training for I/R and Intake staff monthly. These include presentations from community agencies that offer mental health and physical health resources.

The Helpline will maintain the ReferNet database to maintain and promote awareness of the mental health needs and resources. (ongoing).

Promote the Agency through enhanced community facing activities.

# OUTCOMES:

<Enter Text Here>

#### OUTPUTS:

#### **<u>OBJECTIVE 1.7</u>**: Provide streamlined access to Medicaid Managed Care and address grievance issues

**EXPLANATION:** The primary intent of this objective is for the AAA to provide details on the ADRC's provision of Statewide Medicaid Managed Care Long-term Program information, waitlist, eligibility, and grievance resolution services.

#### **STRATEGIES/ACTION STEPS:**

The Helpline and IT will advertise on the website current information on the SMMCLTC and the Helpline's role in access to services.

The Helpline will offer presentations in the community educating seniors and persons with a disability and professionals about the SMMCLTC enrollment process.

The Helpline will continue to facilitate the SMMCLTC Partner meeting every other month to dialogue and problem solve common issues and interagency concerns.

The Helpline will continue to work in conjunction with the statewide ADRC Workgroup to implement best practices and consistency of process and message to the community.

The ADRC will continue to develop relationships with CARES and DCF staff to provide seamless coordination of the medical and financial eligibility.

The Helpline will maintain a designated staff who assists in resolving grievance and SIXT cases.

The Helpline will continue to work closely with our Advisory Council and community partners to educate on the SMMCLTC process and help clarify access through the Helpline and eligibility with DCF and CARES.

The SHINE department will educate SHINE volunteers on Statewide Medicaid Managed CARE LTCC and MMA. Support of MIPPA coordinator to assist SHINE counselors and clients with Medicare and Medicaid coordination information.

# OUTCOMES:

<Enter Text Here>

#### OUTPUTS: <Enter Text Here>

# **GOAL 2**: Enable individuals to maintain a high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers

#### **<u>OBJECTIVE 2.1</u>**: Identify and serve target populations in need of home and community-based services (HCBS)

**EXPLANATION:** The primary intent of this objective is twofold: 1) to address how the AAA will identify the target populations in the PSA, and 2) to address how the AAA will provide services to the targeted populations who may be in hard-to-reach areas.

#### **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will share DOEA's Performance Analysis for Targeting with providers and work with providers on those areas in need of improvement.

Consumer Care and Planning will continue on the Senior Hunger Relief Committee for the United Way of Palm Beach County Hunger Relief Project to share information regarding targeted populations underserved in terms of OAA meals and SNAP.

Healthy Living will work with the St. Lucie County Department of Health to accomplish Action Step 1.3.1.3 of the St. Lucie County Community Health Improvement Plan to increase the number of older adults of color in eveidence-based chronic disease self-management programs.

Consumer Care and Planning will serve on the Data Committee for Healthier Boynton Beach to share information regarding areas where targeted populations are receiving or waiting for long term care services.

Consumer Care and Planning will serve on the Steering Committee for Healthier Boynton Beach to share information regarding available caregiver supports and unmet needs for caregivers.

Consumer Care and Planning will continue participation on the Healthy Visions Council of United Way of St. Lucie to identify unmet needs and programs to meet those needs.

The Helpline will participate in outreach events, health fairs and community presentations targeted to lowincome individuals in rural populations and persons with a disability to promote knowledge of access to home and community based programs through our Helpline.

The Helpline will provide continual education to our SHINE counselors who often refer clients back to our Helpline with needs beyond what their Medicare benefit will provide.

The Helpline will work closely with agency partners such as CILO, APD and MorseLife who has a grandparent raising grandchildren program to assist identifying clients in need of in home services.

The ADRC will follow the procedures set forth by the DOEA Programs and Services Handbook and contract when prioritizing clients who come off the waitlist.

All Intake and MAC staff complete the 701 B certification training and webinar on how to conduct the 701 S phone screening.

The Helpline will provide continual training to staff on choice counseling clients and caregivers for all programs and services for which they look probable.

The Helpline will maintain I/R staff that is well trained and able to provide basic education on programs and services before the client will speak to an Intake Specialist.

#### OUTCOMES:

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- Percent of Adult Protective Services (APS) referrals who are in need of immediate services to prevent further harm who are served within 72 hours
- Percent of new service recipients whose Activities of Daily Living (ADL) assessment score has been maintained or improved
- Percent of new service recipients whose Instrumental Activities of Daily Living (IADL) assessment score has been maintained or improved
- Percent of elders assessed with high or moderate risk environments who improved their environment score

Note: The AAAs will not be monitored on the measures listed in italics, though the AAA must still include strategies to address them in this section.

- Percent of most frail elders who remain at home or in the community instead of going into a nursing home
- Average monthly savings per consumer for home and community-based care versus nursing home care for comparable client groups
- Percent of customers who are at imminent risk of nursing home placement who are served with communitybased services
- Percent of new service recipients with high-risk nutrition scores whose nutritional status improved

DOEA Internal Performance Measures:

• Percent of high-risk consumers (Adult Protective Services (APS), Imminent Risk, and/or priority levels 4 and 5) out of all referrals who are served

OUTPUTS:

#### **<u>OBJECTIVE 2.2</u>**: Ensure efforts are in place to fulfill unmet needs and serve as many clients as possible

**EXPLANATION:** The primary intent of this objective is to address how the AAA oversees the service delivery system in the PSA.

#### **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will continue participation on the Healthy Visions Council of United Way of St. Lucie to identify unmet needs and programs to meet those needs.

Consumer Care and Planning will provide information for the Florida Department of Health in St. Lucie for the Community Health Assessment and progress on the Community Health Improvement Plan.

Consumer Care and Planning and the Helpline will work with the St. Lucie County Department of Health to accomplish Action Step 3.1.1.4 of the St. Lucie County Community Health Improvement Plan to promote existing Home and Community-Based Care Services.

Program Compliance/Quality Assurance Monitors will ensure that care plans reflect unmet needs for consumers.

The Center will conduct one forum each year over the next three years to obtain community input regarding the unmet needs of seniors, caregivers and individuals with disabilities.

Consumer Care and Planning will participate on the Palm Beach County Community Healthy Improvement Plan to understand local resources available to seniors and provided input to strategies to address the needs of seniors and caregivers.

Advisory Council members will relay pertinent practices from other communities that have initiatives to develop healthier communities.

The Organizational Integrity Compliance department will work closely with the VA Coordinator to continue the implementation of the Veterans Directed Home and Community Based Service and VA MISSION Act Programming within our Planning and Service Area by enrolling eligible Veterans into the program.

The Helpline will identify through REFER unmet needs. When needs occur we can look for alternatives which may meet the needs.

The Helpline staff will be trained in the benefits offered by SHINE/ MIPPA/SMP and the Benefit Enrollment Center which may assist the client with unmet needs.

The Helpline will be trained in alternative resources such as PACE and scholarship programs with Alzheimer's Community Care which may be an option while they are on the waiting list.

The ADRC is working with United Way Hunger Relief program to seek alternate funding to reduce waiting list for home delivered meals.

The Helpline is continually trained on caregiver resources, which can provide some stress reduction while clients/caregivers are waiting for services.

# **Contracted Providers Strategies and Action Steps**

#### **Alzheimer's Community Care**

- Alzheimer's Community Care (Organization) provides routine Level I & II training (DOEA approved) to long-term care and specialized Alzheimer's Day Care License applicants as well as focus-driven training on services and resources that are specialized for caregivers, patients and families who are coping with Alzheimer's disease and other neurocognitive disorders. These trainings are for all staff, volunteers, Board members, nurses, law enforcement, and the public at no or low cost.
- The Organization will provide educational printed materials which are designed for meeting identified needs, acknowledging the advancing of the various disease stages related to the diagnosis, and/or because of a disease-specific behavior, make appropriate recommendations when the circumstances present themselves, i.e., taking the keys from the diagnosed patient because of a reported Silver Alert that required a full search-and-rescue intervention. These educated interventions allow acceptance when reality sets in and the clinical aspects of the advancing disease stages affords a healthy adjustment that culminates into a more understood and valued plan. This process may occur over many months with families, and include numerous meetings, before all involved and other disciplines can move forward.
- The Organization recognizes and acknowledges emerging needs. One of the most recent presentations
  is persons who exhibit behaviors of Alzheimer's disease yet live alone, isolated from services, and are
  lonely with no matter on how these conditions may have been self-imposed, or circumstances evolved
  out of her/his control.
- A live-alone referral presents many sets of challenges, i.e., veterans who, due to the nature of their life experiences, refuse services, or their caregiver passes and the family is unaware of the advancement of a disease process, or suffers with other disabilities (hearing, blindness, etc.), placing them in a high-risk situation. Law enforcement makes a referral and requests for intervention strategies, Adult and Protective Services require assistance and advice on an abuse and exploitation situation but need clarity on how to proceed, hurricane approaching and where to go, and many other conditions that make this live-alone issue a priority.

# Council on Aging of Martin County – COAMC

- 1. To ensure a maximum number of clients are served, a monthly review of DOEA-funded program expenditures is conducted by Council on Aging of Martin County, Inc. (COAMC) staff. As client attrition occurs, the decrease in monthly expenditures allows new clients to be enrolled. Requests for new clients from the waitlist are submitted to the Consumer Services Consultant.
- 2. A 701B is conducted with each new client within 14 days from receiving a new referral. This provides a comprehensive, multidimensional review of a person's ability to remain independent and frame a short and long-term plan of care. Reassessments will reflect changes necessary to the Care Plan, which allow the client to continue living in their own home.

- 3. Once a client's needs are assessed, COAMC case managers arrange formal funded services, dependent upon needs identified. Care plan choices may includecase aide, companion, homemaker, personal care, emergency alert, chore services, emergency alert, pest control, adult day club, counseling, specialized medical equipment, respite in-home, respite facility, legal assistance, medication management, and informal services, within two weeks after completion of the assessment.
- 4. To address caregiver stress and meet the needs of aging caregivers, COAMC's Adult Day Club availability has been extended to include Saturdays.
- 5. Referrals to physicians will be made for clients requiring physical therapy for transferring and walking/mobility activities.
- 6. COAMC case managers assist in obtaining bath equipment and grab bars to ensure the safety of clients when transferring and bathing.
- 7. COAMC case managers investigate other housing options for low-income seniors, and refer appropriate clients for assistance.

COAMC case managers will arrange for clients with high-risk nutrition scores to receive hot, or cold, nutritious, meals in the home or at a congregate meal site.

# Council on Aging of St. Lucie – COASL

# Identify gaps and/or unmet needs of client through initial and annual assessments, Coordination and communication with service vendors.

# All other funding sources will be explored prior to accessing DOEA funded services.

1. All Case Managers and Case Aides will successfully complete the web based 701B

Comprehensive Training Program and pass the associated competency test, with a minimum of 90%.
The Council will continue to offer in-service training to assist in further development of interviewing and observation skills, conflict management and family dynamics, network and community partner development, assistive device technology, cost effective care planning, diversity, caregiver resource development, caregiver needs, aging caregivers, and working with clients with dementia.

3. Case Managers will utilize their knowledge and experience to observe the client, caregiver, and client's environment to identify any unmet needs that may not be obvious to the client or caregiver. The interview will include discussion in regards to the client's ability to pay for services, accessing family, friends, church, private insurance, hospice care, VA benefits and Medicare.

4. Case Manager will develop a rapport with the client/caregiver that encourages the client or caregiver to speak honestly and freely.

- 5. The Council will participate in any available community "give back" programs.
- 6. Case Managers will refer all clients who appear eligible to the Long Term Managed Care Program.

7. Care Plans are routinely reviewed by the Case Management Director and Program

- Specialist, for cost effectiveness.
- 8. Narratives must support the level of service requested.

9. The Council on Aging will continue to participate in the DOEA Adult Care Food Program for reimbursement of breakfast, lunch, and snack cost at our Adult Day Care.

10. The Council on Aging will continue to collaborate with other local service providers including medical, social and mental health providers as well as local law enforcement and emergency services providers.

11. The Council on Aging will provide the following services under CCE: Case Mgmt, Case Aide, Adult Day Care, Homemaking, Chore, Companionship, Counseling (Mental Health/Screening), Legal Assistance, Gerontological Counseling, EAR, Home Delivered Meals, Medication Mgmt, Personal Care, Pest Control, Pest Control (Enhanced Imitation), Pest Control (Initiation), Pest Control (Rodent), in-home respite, Medical Equipment Services & Supplies, and Enhanced Chore.

12. The Council on Aging will provide the following services under ADI: Case Mgmt, Case Aide, In-Facility Respite, In-Home Respite, Medical Equipment, Services & Supplies.

13. The Council on Aging will provide the following services under HCE: Basic Subsidy, Case Mgmt, Case Aide, Background Screening, Background Screening Retention – Vendor, Medical Equipment, Services & Supplies, and Respite

#### **Okeechobee Senior Services**

- At the time of new client intake/assessment and existing client reassessment, the Case Manager will
  determine through client input the types and amount of services needed to maintain the client safely
  in their home setting. This will be reflected as "needed" on the client's care plan. Level of service(s)
  "provided" will be dependent upon funding constraints, which are constantly evaluated to insure that
  as many clients are being helped as possible at a level that adequately addresses their ADL and IADL
  deficits.
- As additional units become available, through attrition, or increased allocations, deficits in client care
  plans will be analyzed to determine whether an increase in the level of services for current clients is
  appropriate and/or additional consumers should be requested from the waiting list.
- A spreadsheet will be maintained reflecting both level of service "needed" and "planned" for every client in order to expedite the analysis needed to make an informed decision regarding the allocation of units that have become available. Case manager and client input will be included in the resulting decisions.

# Palm Beach County Division of Senior Services (DOSS)

- Continue to arrange volunteer stipend programs such as RELIEF, administered in DOSS's geographic funding area and to increase respite to caregivers and increase companionship to isolated clients
- Continue to provide in-home and community-based services to seniors
- Provide nutritional home-delivered meals to frail seniors
- Provide nutrition education at congregate meal sites and in client's homes
- Refer at-risk clients for one-on-one nutrition counseling
- Coordinate non-DOEA funded services in conjunction with DOEA funded services at a level for the consumer to remain at home
- Continue servicing high-risk/priority Adult Protection Services referrals within 72 hours

#### Senior Resource Association – SRA

 SRA provides Adult Day Care, Adult Day Health Care, Chore, Companionship, Homemaker, Outreach, Personal Care, Respite In-Home Care, Facility Based Respite, Screening and Assessment, Congregate Meals, Home Delivered Meals, Nutrition Counseling, Nutrition Education, Nutrition Outreach and Specialized Medical Equipment, Services and Supplies to meet the specific needs of older individuals and their families.

2. SRA collaborates with other local service providers including medical and mental health providers, police and emergency service providers, and social services.

3. SRA receives referrals from other local organizations such local community and religious organizations.

4. SRA partners with appropriate service providers throughout Indian River County to provide staff training, client education and specialized support services for caregivers.

5. Timely documentation of client terminations and transfers to fully utilize all allocated funding for services

6. Ensure that agency case management staffing levels are adequate to efficiently provide quality services.

7. Ensure that case management staff is well qualified, knowledgeable, and adheres to the agency pre service and in service training plans

# The Volen Center

A. Accurate tracking and regular program spending analysis allows DoEA program funds to be expended on client care plans effectively and serve as many clients as possible. Such measures allow programs funds to be used as intended and avoid misappropriation of funds towards unnecessary client services. Accurate spending analysis results in accurate program projections, action plans and spending. It also avoids any negative financial impact on the Lead Agency.

B. Communicate frequently with clients and family caregivers about quality of service, conduct periodic client and family caregiver satisfaction surveys to determine levels of satisfaction with services and identify issues that need to be addressed that might influence decisions related to continued community-based care.

C. Requiring case managers to first utilize non DoEA resources will allow more clients to be served with DoEA resources.

#### OUTCOMES:

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- Percent of Adult Protective Services (APS) referrals who are in need of immediate services to prevent further harm who are served within 72 hours
- Percent of new service recipients whose Activities of Daily Living (ADL) assessment score has been maintained or improved
- Percent of new service recipients whose Instrumental Activities of Daily Living (IADL) assessment score has been maintained or improved
- Percent of elders assessed with high or moderate risk environments who improved their environment score

#### **Alzheimer's Community Care**

- Ensure that there is a quality of life for both patient, caregiver and family throughout the disease process through implementing an effective, affordable and valued care plan at every stage of the disease process.
- Lowered risk of falls, diminished lost on foot episodes, and live alone persons are rescued with support. When appropriate, live alones may remain safely at home with interventions that are acceptable to all involved, with assurance that advocated services and resources are followed up and followed through and are executed by the family or other designated authorities, as well as being supported by the AAA's services and resources.
- Alzheimer's Community Care will provide services and resources that diminish the need of Adult and Projective Services, omitting the Judicial System as the only intervention. Resources provided would lower the state's financial cost and social burden through advocated and pursued sources with

options. Additionally, vulnerable adults are protected from the trauma of sexual and physical abuse, exploitation, and self-neglect.

- Family is united in accepting the recommended care plans and are more educated when changes are made to the plan because of the continued advancement of the disease process, with the outcome being that crisis interventions will be diminished, and the care less costly.
- The incidence of keeping the caregiver and patient together, in their home and community, as well as increasing the longevity of the caregiver, has a higher probability of success and achievement due to these targeted resources and focus on both the patient and the caregiver/family.

Note: The AAAs will not be monitored on the measures listed in italics, though the AAA must still include strategies to address them in this section.

- Percent of most frail elders who remain at home or in the community instead of going into a nursing home
- Average monthly savings per consumer for home and community-based care versus nursing home care for comparable client groups
- Percent of customers who are at imminent risk of nursing home placement who are served with communitybased services
- Percent of new service recipients with high-risk nutrition scores whose nutritional status improved

## OUTPUTS:

## Palm Beach County Division of Senior Services

- Serve 450 clients through Federal, State and local funding during the contract year
- Provide 200,000 hours of in-home services during the contract year
- Provide 13,000 volunteer service hours during the contract year
- Serve 110,000 home delivered meals during the contract year
- Serve 22 APS high risk clients during the contract year
- Provide 25,000 hours of ADC/RESF during the contract year
- Number of people served with registered long-term care services

#### **OBJECTIVE 2.3**: Provide high quality services

**EXPLANATION:** The primary intent of this objective is for the AAA to detail quality assurance efforts in the PSA.

#### **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will annually review providers' customer satisfaction surveys and actual analyses summarizing survey results and documentation of follow-up to correct concerns as a result of the analyses.

Consumer Care and Planning will annually update quality assurance tools to incorporate changes from DOEA's Interpretative Guidelines and the DOEA Programs and Services Handbook.

Consumer Care and Planning will cooperate with DOEA and AoA in their customer satisfaction surveys. Consumer Care and Planning will conduct reviews of annual audits of all applicable contracted providers.

The Helpline will perform SMMCLTC quality assurance activities according to the procedures established by the ADRC Workgroup and approved by DOEA.

The Helpline conducts client satisfaction surveys with consumers.

The Communications Department will offer an opportunity for consumers to give feedback through our website and share feedback with appropriate departments.

The Communications Department will run productivity and quality reports monthly to monitor good customer service.

# Achieve a high level of compliance in DOEA monitoring.

# **Contracted Providers Strategies and Action Steps**

#### Alzheimer's Community Care

- Alzheimer's Community Care (Organization) services and resources are community-based and serve patients, caregivers, and their families affected with probable and/or diagnosis of Alzheimer's disease and/or neurocognitive disorders. Services are focused on patients' and caregivers' safety and security, their wellbeing and welfare, as well as preserving their dignity and integrity throughout the disease process, which could be from two (2) to twenty (20) years, average being ten (10).
- The Organization serves patients, caregivers and their families of all cultures, no matter what religion, sexual preference, and financial status, but must be over eighteen (18) years of age and exhibits and/or qualifies for dementia-specific medications, interventions, and other physical, spiritual, emotional, cognitive stimulation and socialization therapeutic therapies.
- The Organization's abides by the Specialized Alzheimer's Day Care licensure standards and is
  accredited by the Joint Commission for quality assurance practices as it delivers high quality health
  management and maintenance techniques within its centers and communities.
- Patients are evaluated annually for cognition using the BIMS survey tool approved by CMS, and caregivers are evaluated using the Zarit High Burden survey which may indicate a need for other

services and resources based on the survey's risk scores. Interventions may be indicated for stabilizing the family's anxieties or other life-impacting changes, with the outcome being to remain in the home and community instead of going into a nursing home, as well as increasing the longevity of caregivers.

# **Council on Aging of Martin County**

- Active clients are reassessed annually, or when significant changes in a client's condition are reported. Client's functional impairments, changes in living situation, caregiver relationship, loss of income, and risk for nursing home placement are reviewed to determine services required and create a care plan. Choice of services provided will include companion, homemaker, personal care, emergency alert, chore services, pest control, adult day club, counseling, specialized medical equipment, respite inhome, respite facility, medication management and home delivered meals.
- 2. COAMC case managers explore the client's social support system, and attempt to arrange for assistance through family, neighbors, friends, or religious organizations, when possible, in conjunction with funded programs. Services available through formal and informal community resources will also be explored.
- 3. Each client is given the opportunity to participate in the selection of service providers. COAMC case managers discuss available contracted providers for each service. A minimum of two vendors for each CCE and ADI service will be available, with the exception of Legal Assistance, Adult Day Care, Case Aide, and Case Management services.
- 4. To ensure quality services and determine client satisfaction, COAMC case managers conduct a followup with clients within 14 days of arranging new services or implementing changes to existing services.
- 5. In-service training for staff, including volunteers and CCE subcontractors will be conducted a minimum of once a year.
- 6. To determine gaps in client services and identify areas of improvement, annual consumer surveys are conducted to identify areas for improvement.

COAMC case managers make referrals to outside sources of funding and resources, as appropriate, to improve internal and external home living environments.

#### Council on Aging of St. Lucie – COASL

Qualified Staffing.

Establish internal controls and evaluations to identify and establish best practices in high quality direct and subcontracted services.

#### **STRATEGIES/ACTION STEPS:**

# Qualified Staffing.

# Establish internal controls and evaluations to identify and establish best practices in high quality direct and subcontracted services.

1. Experienced and knowledgeable staff to provide a strong foundation to evaluate current service delivery, recognize when and where improvements can or should be made and possess the skill sets necessary to implement and measure those changes. A large percentage of key staff have been with this agency from Ten (10) to twenty five (25) years. Their number of years in community based senior services provides for a strong and experienced knowledge base.

2. Monthly Staff Meetings serve as a venue that invites open and candid discussions in self and peer evaluation of Council on Aging's direct and indirect services.

3. Ensure the Annual Satisfaction Survey reflects and promotes the goal of a thorough and accurate portrait of the level of client satisfaction with services. The survey tool encourages participation (mailed with a stamped

return address envelope), has a senior friendly font and type, and is available in English, Spanish, and Creole. Survey results will be reviewed and addressed by management, key staff and Board of Director's.

4. Case Managers will utilize regular case management contacts as an additional opportunity to measure client satisfaction with conversational questions regarding their service aide's punctuality, performance of duties and overall satisfaction with their service and provider choice.

5. Case managers maintain client complaint logs that document client concerns, how the concerns were addressed and resolved. The Case Manager Director routinely will review complaint logs for compliance, resolution strategies, and any trends.

6. Require subcontractors (vendors) to establish meaningful quality assurance practices and procedures that adequately address and measure client satisfaction with the service provided under their CCE/ADI/HCE contract.

7. The Council on Aging will provide the following services under CCE: Case Mgmt, Case Aide, Adult Day Care, Homemaking, Chore, Companionship, Counseling (Mental Health/Screening), Legal Assistance, Gerontological Counseling, EAR, Home Delivered Meals, Medication Mgmt, Personal Care, Pest Control, Pest Control (Enhanced Imitation), Pest Control (Initiation), Pest Control (Rodent), in-home respite, Medical Equipment Services & Supplies, and Enhanced Chore.

8. The Council on Aging will provide the following services under ADI: Case Mgmt, Case Aide, In-Facility Respite, In-Home Respite, Medical Equipment, Services & Supplies.

9. The Council on Aging will provide the following services under HCE: Basic Subsidy, Case Mgmt, Case Aide, Background Screening, Background Screening Retention – Vendor, Medical Equipment, Services & Supplies, and Respite.

# **Okeechobee Senior Services – OSS**

- Meet weekly with in-home service provider agencies to receive reports from them regarding the status and ongoing needs of the clients they serve.
- Complete programmatically required 14-day follow-up contacts with clients following service starts and revisions to determine client's level of satisfaction with the service, service provider, and service worker.
- Complete programmatically required annual, semi-annual, and where appropriate, quarterly reassessments and reviews to, among other things, confirm client's satisfaction with, and the efficacy of, the services being provided.
- Conduct annual monitoring visits of in-home service provider agencies to review policies, procedures and pertinent required documentation and certifications.
- Maintain complaint log in which to capture all client complaints and review the log quarterly to identify any negative trends that may be developing with an in-home service provider(s), or their workers.

# Palm Beach County Division of Senior Services

- Monitor contracted vendor service providers for compliance minimally once per year
- Provide orientation and continue in-service training to ensure volunteers and staff are qualified to perform their assigned duties
- Conduct client surveys to assure satisfaction with services received
- Continue to provide in-home and community-based services to seniors
- Provide nutritional home-delivered meals to seniors
- Provide nutrition education at congregate meal sites and in client's home
- Recommend at-risk clients for one-on-one nutrition counseling

 Coordinate non-DOEA funded services in conjunction with DOEA funded services at a sufficient level for the consumer to remain at home

#### Senior Resource Association – SRA

SRA does annual monitoring of contracted providers

SRA conducts annual client and caregiver surveys

SRA ensure that case managers assist client with any issues as they arise

SRA provides appropriate referral information to all inquiries

SRA ensures that case managers conduct a minimum of an annual and semiannual assessment on all clients SRA completes assessments and QA on all clients regardless of funding sources.

SRA utilized best practices to employ a Client Change of Condition Protocol using technology so that MOW deliveries report issues in real time to staff and actions and outcomes are documented

#### **The Volen Center**

A. Identify providers in community who reflect the high standards of DoEA service delivery.

B. Inform clients frequently of our expectations of the service they receive and our desire to understand if their service provider is not fulfilling their needs.

C. Conduct regular client and family caregiver satisfaction surveys to determine issues that need to be addressed with their provider.

D. For all services offered directly by TVC, require regular and mandatory training and conduct regular monitoring to assure high quality services are provided.

E. For all contracted services, conduct a thorough vendor monitoring regularly.

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#### OUTCOMES:

#### Alzheimer's Community Care

 Alzheimer's Community Care will maintain both the patients' and caregivers' risk scores within its Electronic Medical Records (EMR) systems, preventing unnecessary nursing home placement, sustaining families' capacity for keeping patients at home and in their communities, which also increases their financial viability throughout the disease process. More than 70% of patients' risk scores indicate they are at a level of nursing home eligibility, yet in the past eight (8) years, 85% of our patients attending the licensed centers were never placed in a nursing home.

#### **Senior Resource Association**

- 97% of most frail elderly remain at home or in the community instead of going into a nursing home
- \$2,221 is the average monthly savings per consumer for home and community-based care versus nursing home care for comparable client groups.
- 65% of new service recipients ADL assessment has been maintained or improved.

- 62.3% of new service recipients IADL assessment score has been maintained or improved.
- 90% of customers are at imminent risk of nursing home placement who are served with community based services
- 79.3% of elderly persons assessed with high or moderate risk environments improved their environment score.
- Percent of Adult Protective Services (APS) referrals who are in need of immediate services to prevent further harm who are served within 72 hours
- Percent of new service recipients whose Activities of Daily Living (ADL) assessment score has been maintained or improved
- Percent of new service recipients whose Instrumental Activities of Daily Living (IADL) assessment score has been maintained or improved
- Percent of elders assessed with high or moderate risk environments who improved their environment score

Note: The AAAs will not be monitored on the measures listed in italics, though the AAA must still include strategies to address them in this section.

- Percent of most frail elders who remain at home or in the community instead of going into a nursing home
- Average monthly savings per consumer for home and community-based care versus nursing home care for comparable client groups
- Percent of customers who are at imminent risk of nursing home placement who are served with communitybased services
- Percent of new service recipients with high-risk nutrition scores whose nutritional status improved

#### OUTPUTS:

#### Palm Beach County Division of Senior Services

- Serve 450 clients through Federal, State and local funding during the contract year
- Provide 200,000 hours of in-home services during the contract year
- Provide 13,000 volunteer service hours during the contract year
- Serve 110,000 home delivered meals during the contract year
- Serve 22 APS high risk clients during the contract year
- Provide 25,000 hours of ADC/RESF during the contract year

#### **<u>OBJECTIVE 2.4</u>**: Provide services, education, and referrals to meet specific needs of individuals with dementia

**EXPLANATION:** This objective focuses on individuals with dementia to ensure that the specific needs of these individuals are not overshadowed by serving populations without dementia.

#### **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will monitor this targeted group on providers' Semi-Annual Outreach Report and provide technical assistance regarding outreach to this group as needed. Consumer Care and Planning will use DOEA's GIS data to help providers' identify locations with high concentrations of this targeted group.

Consumer Care and Planning will monitor provider's surplus/deficit reports to ensure they are fully expending Alzheimer's Disease Initiative funding.

Consumer Care and Planning will administer the RELIEF program to expand state volunteer respite program model to address caregiver needs.

The Helpline will continue to maintain a list of caregiver support groups in the PSA.

The ADRC participates in the Sliver Alert referrals.

The ADRC has in-service training with the Memory Disorder Centers to stay current on their services.

The Helpline will participate with the Lost on Foot task force pilot in Palm Beach Count.

The ADRC will participate in the Dementia Care and Cure Initiative in conjunction with the Memory Disorder Centers.

The Communications Department will publish information regarding Alzheimer's Disease Brain Bus events on the website.

# **Contracted Providers Strategies and Action Steps**

# Alzheimer's Community Care

- Alzheimer's Community Care (Organization) is a provider of Specialized Alzheimer's Day Licensed Care and Services (SDS) Centers throughout its service area. This license is only provided in Florida. These services provide a nurse for a minimum of 75% of the center's operational hours. Therapeutic activities are provided during 70% of the operational time, and when another level of care is required, they will work with the caregiver. There is a 1:5 staff ratio present throughout the center's daily operations. This service is provided five (5) days per week, except on Board-approved holidays.
- The Organization operates eleven (11) Specialized Alzheimer's Day Licensed Care and Service Centers, established in neighborhoods where the need was evident. As new requests have emerged, it is contemplated that three new locations will be planned during this strategic plan's timeline. The twelfth (12) day care location, based in Port St. Lucie, is now in the production stage and is anticipated to be operational within the next 18 months.
- The Organization provides one annual educational conference for approximately 300 attendees, and two caregiver forums with anticipated audience of 75 plus per forum. These educational opportunities

always focus on both the needs of caregivers and patients. Represented at the conference are forprofit and non-profit companies/organizations, health and human services providers, legal firms, law enforcement, home health and long-term care facility representatives, all within an open venue for caregivers, and at times patients, to meet and engage. During this time of questions and answers, ample time is provided to learn about local community-based services and resources, and research the affordability, appropriateness, and accessibility of these services within a friendly environment. In addition, the forums enable providers and vendors to become familiar with one another, which provides an opportunity for them to work together in a collaborative manner, and to listen, learn and become engaged on behalf of this most vulnerable and fragile population by absorbing an understanding of their needs.

- The Organization provides dementia-specific training that is focused on Alzheimer's disease and the other neurocognitive disorders through two curricula approved by the Florida Department of Elder Affairs. One curriculum is for long-term care facilities and the other is on the Specialized Alzheimer's Day Care Licensed Act. Presently, there are 15 licensed centers within PSA 9 service area. Both curricula consist of eight (8) hours each and are made available routinely and/or upon request. All this Organization's staff, Board members and volunteers who work at the Organization must attend the SDS Center's training, however, for those staff employed at the SDS centers, they must attend a four (4) hour refresher course each year as mandated by DOEA, also provided by the Organization's Education and Quality Assurance division. This refresher course is open to caregivers, community professionals, law enforcement and others as well, provided at a low cost.
- The Organization provides classroom and field study for nurses to acquire hands on experience within the SDS Licensed Centers. These training collaborations are established with five (5) academic institutions located in PSA 9 and provide credentialed nursing educational programs. It is estimated that over 300 nursing students will receive training within this plan's duration. Training collaborations with the Veteran's Hospital medical personnel, which has previously trained over 300 medical personnel during FY 2016 – 2019, will continue to do so upon request.
- The Organization provides ID Locator Services throughout its service area. Since 2013, over 800 patients have been served and all elopements have been found successfully, all cases being solves with 100% of eloped patients being found alive. The routine search and rescue events are on average successfully completed within a 60-minute period, provided there is a SafetyNet device on that person. All three of the local Sheriff's offices and local law enforcement agencies receive training on this service. These radio frequency transmitters that patients wear are accessible to families at no or low cost if they meet the eligibility requirements. Medical Alert bracelets are also made available upon request, free of charge, to patients who live alone or attend this provider's SDS Licensed Centers and/or those who travel on community transit services.
- The Organization provides experienced, qualified educators to advance the training standards of law
  enforcement through its scheduled CIT training classes, as well as personalized law enforcement
  agency's training request inclusive of their specific targeted topics (behaviors, break down on disease
  specifics, etc.). In addition, the Organization provides requested training for first responders as well.
  Once trained, these professionals will know how to approach persons with a neurocognitive disorder,
  recognize their behaviors and respond accordingly, understand the various disorders, as well as how to
  support caregivers and families during a stressful search and rescue event. The professionals can then
  provide information such as a Family Elopement Risk Guide and other information to families on local
  services and resources with the expectation that future stressful situations are diminished, if not
  eliminated.
- The Organization's training and collaboration with the three Sheriff's offices and local law enforcement agencies within its service area has elevated the urgency of a lost patient and has evolved Palm Beach

County as one of the top reporters of approved Florida Silver Alerts by the Florida Department of Law Enforcement agency (FDLE) since its inception, (Governor Rick Scott signed into law on July 1, 2011) and these numbers will grow throughout this plan's duration. Many lives have been saved and caregivers' peace of minds makes this program a priceless asset to our most fragile and vulnerable Floridians.

- The Organization continues advancement of a "Lost on Foot" program within the three counties, involving all law enforcement officials (sheriffs and municipalities) and acknowledges that each county has their own unique sets of rules, conditions, equipment, collaborations, and resources in coping with the emerging incidents of reported elopements from homes and facilities within their communities. Presently, these incidents are not reported consistently, thus occurrence reporting is greatly understated. If a process can be implemented with reporting standards unilaterally followed, more lives will be saved and less time will be required for search and rescue events by law enforcement, with less emotional time spent by caregivers in thinking the worst outcome, that being a loss of a life.
- The Organization provides more opportunities to collaborate with the Palm Beach and Treasure Coast Medical Societies to entice hospital networks to pursue that medical providers improve diagnosing practices, implement protocols for diminishing re-admissions to hospitals on behalf of previously hospitalized Alzheimer's patients, and to assist families with valued resources so that they are not isolated from affordable, appropriate, and accessible help throughout the duration of the disease process. Also, to change medical providers' perception that all families are doomed to place their loved ones in a nursing home environment at its lowest cost of \$6,000 to \$15,000 each month, rather than directing them to community-based specialized dementia-specific providers for help and assistance.

# **Council on Aging of Martin County (COAMC)**

- 1. COAMC case managers assess new and existing clients with dementia utilizing the 701B assessment, in order to identify needed services and referrals to meet the client's and caregiver's specific needs. The assessment is completed during initial contact, and at annual reassessments.
- 2. COAMC case managers develop the client care plan based on identifying gaps in performing ADL's and IADL's, and with the goal of preventing premature institutionalization. Formal funded services will be arranged including adult day care, case aide, counseling, homemaker, personal care, companion, chore services, pest control, respite in-home, respite facility, specialized medical equipment and supplies, and home delivered meals.
- 3. COAMC's Adult Day Care program provides individualized care plans, to determine the appropriate social and recreational activities based on physical and cognitive levels of the client. This ensures appropriate stimulation techniques are implemented to meet the needs of individuals with dementia.
- 4. COAMC utilizes an intergenerational focus, and links with local schools to increase awareness of senior issues. Students are invited to spend time interacting with COAMC's seniors attending our Adult Day Care, many of which are diagnosed with dementia, or other memory disorders.
- 5. COAMC coordinates with St. Mary's Memory Disorder Clinic and hosts monthly memory screenings. Clients diagnosed or with suspected dementia are referred for memory screening.
- 6. Clients exhibiting slowing of thought processes and memory lapses becoming progressively apparent are referred to St. Mary's Memory Disorder clinic for a medical evaluation.
- 7. COAMC collaborates with Morse Life, and hosts monthly caregiver support groups. COAMC provides free respite services for caregivers who require this service, in order to attend the support group.

COAMC provides a resource library for caregivers and clients with a variety of publications on aging, dementia, and caregiving issues. The publications are provided as a free service.

# Council on Aging of St. Lucie – COASL

Provide in-facility and in-home respite that is flexible and responsive to the changing needs of clients and caregivers.

Ensure subcontractors (vendors) include dementia specific training requirements for all direct service workers.

Coordinate with community partners in arranging support groups for caregivers.

The Adult Day Care staff will provide regular scheduled therapeutic activities aimed at promoting thought process, and memory.

1. The Council on Aging will provide dementia specific training, education and information to staff, community, aging network partners, caregivers, law enforcement and volunteers.

- 2. Caregivers of pre-approved in-facility respite clients have same day access to in-facility respite service.
- 3. Case Management and In-facility respite staff will provide information, emotional support and

encouragement for caregivers.

4. Training material and in-service training sheets will be reviewed during on-site monitoring visits or by random request by COASL.

5. Continue to investigate additional funding sources to enhance client services and training.

6. Continue to attend dementia specific training, seminars, and conferences to develop new programs and services and improve existing services.

7. The Council on Aging will provide the following services under CCE: Case Mgmt, Case Aide, Adult Day Care, Homemaking, Chore, Counseling (Mental Health/Screening), Legal Assistance, Companionship, Gerontological Counseling, EAR, Home Delivered Meals, Medication Mgmt, Personal Care, Pest Control, Pest Control (Imitation), Pest Control (Initiation), Pest Control (Rodent), in-home respite, Medical Equipment Services & Supplies, and Enhanced

Chore.

8. The Council on Aging will provide the following services under ADI: Case Mgmt, Case Aide, In-Facility Respite, In-Home Respite, Medical Equipment, Services & Supplies.

9. The Council on Aging will provide the following services under HCE: Basic Subsidy, Case Mgmt, Case Aide, Background Screening, Background Screening Retention – Vendor, Medical Equipment, Services & Supplies, and Respite.

# **Okeechobee Senior Services**

- Require case managers and client services coordinator to attend and participate in Fearless Caregiver conference held annually in Okeechobee County where many of the caregivers for dementia clients attend.
- Provide annual dementia and Alzheimer's disease sensitivity and strategy training to Case Managers and Client Services Coordinator.
- Refer individuals with dementia, or their caregivers, to the Memory Disorder Clinic at St. Mary's Hospital in Palm Beach County.

Refer individuals with dementia, or their caregivers, to the Alzheimer's Association.

# Palm Beach County Division of Senior Services

- Serve 450 clients through Federal, State and local funding during the contract year
- Provide 200,000 hours of in-home services during the contract year
- Provide 13,000 volunteer service hours during the contract year

- Serve 110,000 home delivered meals during the contract year
- Serve 22 APS high risk clients during the contract year
- Provide 25,000 hours of ADC/RESF during the contract year

# Senior Resource Association – SRA

1. SRA provides Adult Day Care, Adult Day Health Care, Chore, Companionship, Homemaker, Outreach, Personal Care, Respite In-Home Care, Facility Based Respite, Screening and Assessment, Congregate Meals, Home Delivered Meals, Nutrition Counseling, Nutrition Education, Nutrition Outreach and Specialized Medical Equipment, Services and Supplies to meet the specific needs of older individuals and their families, including those affected by dementia.

2. SRA Adult Day Cares will maintain an enhanced licensure of Adult Day Care with Specialized Alzheimer Services through AHCA. .

3.. SRA provides caregiver and client support by connecting clients and caregivers to supporting which will assist the caregiver to continue to provide care. (i.e. SRA's services; Caregiver support groups and training; collaborating associations and programs such as the Mental Health association, Sunshine, and the Elder Helpline.).

4. SRA partners with appropriate service providers throughout Indian River County to provide dementia oriented staff training, client education and caregiver support.

6. SRA attends health fairs and makes presentations at local service organizations throughout the community in order to provide education to meet individual needs of people and families affected by dementia.

7. SRA trains all staff on working with persons with suspected dementia

8. SRA is working promote an Aging Friendly county which includes promoting a dementia friendly community.

# The Volen Center – TVC

A. TVC offers free caregiver support groups to assist caregivers in acquiring the coping

strategies and skills to maintain the ability to provide care for family members with dementia.

B. Policies are in place which require all Agency staff members to refer elders in need of

assistance who are not currently on YARC's waitlist to YARC for prioritization.

C. Funds provided under CCE, ADI, and HCE will be utilized to provide formal training for caregivers that will enable them to work more effectively with the care providers and to better utilize personal and family resources.

D. TVC offers education in the form of a wide range of trainings and events throughout the year to clients, caregivers, community members and organizations about the specific needs of individuals with dementia.

# OUTCOMES:

# **Alzheimer's Community Care**

 Alzheimer's Community Care's engagement with the three counties' law enforcement sheriff's offices and local agencies that interact with families using local resources starting with the first incident of a family's lost on foot dilemma and ending by making referrals to organizations that specialize in caregivers anxieties will stabilize conditions by reaching out for help or lessen the risk of homicides and suicides by overwhelmed caregivers and/or severely depressed patients. Continued.

- Alzheimer's Community Care will increase the collaborations within medical provider networks to the point that when a diagnosis is made, families are directed to the appropriate local community-based services that will provide interventions with the belief that where there is help, there is hope.
- Alzheimer's Community Care will increase advocacy within medical providers to make referrals to the motor vehicle department for those at-risk diagnosed patients who are determined should not be driving or make a referral to an identified school or organization who can conduct this driving test which would support the referral to that state motor vehicle source.
- Alzheimer's Community Care will increase referrals by medical providers to local community-based dementia specific service providers for getting help sooner to families, as well as increase the life expectancy of caregivers so they can attend to the needs of their loved ones, of which 96% of families want to keep them in their homes if possible.
- Alzheimer's Community Care will increase the distribution of publications that will educate families on the Florida Silver Alert Program, as well as educate families on how to make their homes safer and lessen the risk of elopements from home and long-term care facilities. Also, to advocate that longterm care facilities implement monthly elopement drills as a best practice, involving all their employees' work shifts. This would lessen the amount of elopements and cut down on time and resources spent by law enforcement on search and rescue, not to mention the potential loss of life of a fragile and vulnerable person.
- Percent of Adult Protective Services (APS) referrals who are in need of immediate services to prevent further harm who are served within 72 hours
- Percent of new service recipients whose Activities of Daily Living (ADL) assessment score has been maintained or improved
- Percent of new service recipients whose Instrumental Activities of Daily Living (IADL) assessment score has been maintained or improved
- Percent of elders assessed with high or moderate risk environments who improved their environment score

Note: The AAAs will not be monitored on the measures listed in italics, though the AAA must still include strategies to address them in this section.

- Percent of most frail elders who remain at home or in the community instead of going into a nursing home
- Average monthly savings per consumer for home and community-based care versus nursing home care for comparable client groups
- Percent of customers who are at imminent risk of nursing home placement who are served with communitybased services
- Percent of new service recipients with high-risk nutrition scores whose nutritional status improved

# OUTPUTS:

# Palm Beach County Division of Senior Services

- Serve 50 clients with dementia during the contract year
- Provide 25,000 hours of ADC/RESF during the contract year
- Provide 200,000 hours of in-home services during the contract year
- Provide 13,000 volunteer service hours during the contract year
- Send 10 staff and/or volunteers for Alzheimer's education
- Staff will participate in at least 2 trainings conducted by Memory Disorder Clinic
- Staff will participate in 10 community events

#### **Senior Resource Association**

Here 303 frail elderly persons remained at home or in the community instead of going into a nursing home. •\$2,221 was the average monthly savings per consumer for home and community-based care versus nursing home care for comparable client groups.

- •1 new service recipient ADL assessment was maintained or improved.
- •1 new service recipient IADL assessment was maintained or improved.
- •281 customers are at imminent risk of nursing home placement were served with community based services
- •284 elders assessed with high or moderate risk environments improved their environment score.
- •1 new services recipient with high-risk nutrition scores nutritional status improved.

# **OBJECTIVE 2.5**: Improve caregiver supports

**EXPLANATION:** The primary intent of this objective is to strengthen caregiver services to meet individual needs as much as possible. For example, existing caregiver support groups may not sufficiently address the differing challenges of spouse caregivers compared to adult child caregivers.

# **STRATEGIES/ACTION STEPS:**

Your Aging & Disability Resource Center will continue to support and be an active participant in the Fearless Caregiver Conferences each year. Annual conferences are held in south Palm Beach County, North Palm Beach County, Okeechobee County, St. Lucie County and Martin County. Caregiver attendees are educated on the resources and supports available through the various department of Your ADRC and the aging network. Consumer Care and Planning will continue participation on the Steering Committee for the Healthier Boynton Beach initiative in Palm Beach County where the focus is Family Caregiving.

Healthy Living will continue to offer Powerful Tools for Caregivers, with a goal of adding Indian River County to the delivery area as well as delivering the programs virtually as we navigate through the COVID Pandemic.

Consumer Care and Planning will provide input to Healthier Boynton Beach surveys of caregivers to identify the specific needs of all caregivers in the service area and their ability to access services.

Consumer Care and Planning will attend Healthier Boynton Beach Community Conversations to learn first-hand of caregiver needs there.

Consumer Care and Planning will oversee the state and federally contracted providers' delivery of caregiver education/training and counseling.

The Helpline will stay current with agencies providing caregiver supports and support groups.

The Helpline will work closely with the Healthy living department to promote the Powerful Tools for Caregivers program when offered.

The Helpline will refer to OAA providers of caregiver supports to include: Morselife, Ruth Rales Jewish Family Services.

The Helpline will stay current on services available through Alzheimer's Community Care such as the Family Nurse Assessor program.

# **Contracted Providers Strategies and Action Steps**

# **Alzheimer's Community Care**

 Alzheimer's Community Care (Organization)'s lessons learned from the Alzheimer's Medicaid Experience (2005 to 2010) is that there are specific stages when, if interventions are put in place, nursing home placements can be averted. These interventions are executed through the Family Nurse Consultants (FNC) and Case Managers, using the BIMS survey score to realize the decline of patients. Additionally, the high burden experienced by the caregiver can be identified through the Zarit Burden survey, which is conducted annually or sooner if circumstances prevail for additional examination. One such intervention is a quarterly training for self-proclaimed high burdened caregivers or for those caregivers recommended by an FNC to attend this successful intervention experience. Also, monthly Support Group meetings are held which include vetted presenters for accessing more knowledge on resources that could help alleviate the feelings by caregivers of being isolated from assistance, and diminish the overwhelming emotion that life is becoming out of control.

• The Organization's Electronic Medical Records system provides documentation on services that are provided and stated within progress notes, which are dated and signed by the author, allowing all internal designated staff the ability to intervene, monitor, and/or evaluate the status of care. These monitoring practices are to recognize when an urgent intervention is needed, implement a course of action and oversee its impact, or review the situation's status and act accordingly with cited documentation. To conclude the final action with continued oversite, following the results and to evaluate if more attention is required, and with a final note that this condition has been resolved and the patient/caregiver's wellbeing and safety is status quo. These services are followed up through quarterly contact by a Family Nurse Consultant (FNC) either in person or by phone, inclusive of meeting/speaking with the caregiver/family. If a situation calls for more timely interventions, then there are daily, weekly or monthly contacts until the situation is back to status quo. These practices are followed throughout the services provided by the Organization, which could be from two (2) to twenty (20) years, average being ten (10).

It is all about the understood need, which at times may become a multi-disciplinary staff review exercise and ending with an agreement which could involve a program manager, program nurse, FNC, Live Alone Case Manager, ID Locator Service staff, and if appropriate, Adult and Protective Services staff, Veterans Administrator social worker, etc. These progress notes need to be recorded within a specific time frame, which are mandated by the FNC's protocols and other internal service staff's notes.

- The Organization provides periodic support group sessions that focus on a particular group, such as for men, women, high burden caregivers, children who have a parent with a neurocognitive disorder or a parent who has a child with a neurocognitive disorder. These support group sessions could also establish an open support group meeting or sponsor an 8-week cooking class for men, recruiting a volunteer nutritionist to conduct the classes.
- The Organization provides an opportunity to reach out to caregivers through electronic chat room caregiver sessions that are culturally sensitive and focused. Research is underway to determine the best time of day, amount of sessions provided within a month, which cultures have the greatest need, and how strong of an interest is there in providing this new service.
- The Organization provides more access to in-home activities that could be instituted for those patients
  who are diagnosed as Mild Cognitive Impaired, who are highly functional and could be still driving, and
  for those situations where caregivers are in denial but having access to these activities may reveal that
  as these exercises are implemented, recognition of cognitive deficits becomes more evident and
  becomes more open to other life- impacting interventions and services. Examples of such
  activities/resources could be through the robotic pet equipment, ID Locator Services including the door
  alarms, the Organization's publications, and other emerging resources that become available for
  distribution and are affordable, accessible and appropriate.

# Council on Aging of Martin County – COAMC

- 1. COAMC staff will provide support services to assist family and family-assisted caregivers to continue providing care, e.g. promoting respite care and caregiver training.
- 2. COAMC will provide older individuals and their families with information and resources to arrange for their own care.
- 3. COAMC in partnership with the Area Agency on Aging of Palm Beach/Treasure Coast, Inc. has assigned two staff members to train for the *Powerful Tool for Caregivers Program*. A minimum of one (1) six week workshop will be conducted in the 2016 calendar year.
- 4. COAMC staff will make known to the client and their families, services and resources available through DOEA funded sources, and the community. Services include the following:
  - HCE funds and subsidies
  - Caregiver and other appropriate support groups
  - Counseling
  - Companion services
  - In-home Respite services
  - In-Facility Respite services
  - Legal Assistance
  - Medication Management
  - Chore services
  - Pest Control
  - > Adult Day care programs through COAMC and other providers in the county.
  - > Assistance from volunteers via COAMC or the United Way of Martin County
- 5. Family and family-assisted caregivers will be surveyed at assessment/reassessment regarding the probability of continuing to provide care. To increase the likelihood that family and family-assisted caregivers will self-report they are very likely to provide care, COAMC case managers will continue to:
  - > Assist caregivers with referrals for their own health problems.

Encourage caregivers to attend support groups (including the group facilitated by COAMC) and caregiver education forums.

# Council on Aging of St. Lucie – COASL

Case Managers and support staff will improve Caregiver supports.

Case Managers and support staff will provide education on related illnesses.

All staff will continue to have ongoing collaboration with the aging network for training, information and continuing education opportunities.

# All staff will continue to seek out appropriate individuals from faith based organizations for volunteer companions.

- 1. Case Managers and support staff are able to effectively identify Caregiver stress and burnout.
- 2. Case Managers, Case Manager Director and Program Specialist will ensure services meet not only the client's needs but also that of the caregiver.
- 3. Case Managers and support staff will make training and information available and accessible. (Coping Skills, Conflict Strategies, Family Dynamics in Care giving)
- 4. Case Managers, Case Manager Director and Program Specialist will ensure frequency and duration of available services are fluid and flexible to meet the changing needs of the client and the caregiver.
- 5. The agency will offer Caregiver Support Groups and Educational Conferences on site.

- 6. Case Managers and support staff will work with the caregiver to develop coping strategies.
- 7. Provide in-home and in-facility based Respite.
- 8. Case Manager will make referrals for caregiver counseling when applicable.

9. The Case Manager will refer clients and caregivers to all appropriate programs and services that provide for caregiver supports.

10. The Council on Aging will provide the following services under CCE: Case Mgmt, Case Aide, Adult Day Care, Homemaking, Chore, Companionship, Counseling (Mental Health/Screening), Gerontological Counseling, EAR, Home Delivered Meals, Legal Assistance, Medication Mgmt, Personal Care, Pest Control, Pest Control (Imitation), Pest Control (Rodent), in-home respite, Medical Equipment, Services and Supplies, and Enhanced Chore.

11. The Council on Aging will provide the following services under ADI: Case Mgmt, Case Aide, In-Facility Respite, In-Home Respite, Medical Equipment, Services and Supplies.

12. The Council on Aging will provide the following services under HCE: Background Screening, Background Screening Retention – Vendor, Basic Subsidy, Case Mgmt, Case Aide, Medical Equipment, Services & Supplies, and Respite

# **Okeechobee Senior Services**

- Refer caregivers to the caregiver support groups already in place in the County.
- Inform caregivers of the 211 Daily Sunshine Call provided by 211 of Palm Beach / Treasure Coast.
- Provide respite services to caregivers.
- Encourage caregivers of clients who are still able to function in public to attend the Okeechobee Senior Services Senior Center.

Encourage caregivers to attend the annual Fearless Caregiver Conference

# Palm Beach County Division of Senior Services

- Provide educational, recreational and social service programs to caregivers at Senior Centers
- Continue to administer the RELIEF respite program
- Provide adult day care, in-home and in-facility respite
- Assist in arranging volunteer services to provide needed respite to caregivers

# Senior Resource Association - SRA

1. SRA staff will connect caregivers to supporting services which will assist the caregiver to continue to provide care (i.e., Adult Day Care, caregiver training, Mental Health Association)

2. SRA case managers will talk with the caregiver(s) at the assessment and/or annual reassessment about their ability of continuing to provide care. At that time, SRA case manager will address any unmet needs to assist the caregiver.

3. SRA case manager will provide the caregiver with information and assistance on how to access and utilize needed health and social services.

4. SRA provides Adult Day Care, Adult Day Health Care, Chore, Companionship, Homemaker, Outreach, Personal Care, Respite In-Home Care, Facility Based Respite, Screening and Assessment, Congregate Meals, Home Delivered Meals, Nutrition Counseling, Nutrition Education, Nutrition Outreach and Specialized Medical Equipment, Services and Supplies to meet the specific needs of caregivers.

5. SRA will continue to work to ensure that the transportation needs of seniors are met

# The Volen Center – TVC

A. TVC offers free caregiver support groups at a variety of locations throughout our service area.

B. Training events are offered throughout the year to caregivers.

C. TVC offers three adult day care locations to DoEA clients and caregivers offering relief from providing care. When DoEA program funds are not available, TVC maintains a scholarship program for caregivers to receive free or low cost services.

D. A day program referred to as the Life Enrichment Plus is offered to clients who are experiencing the early signs of dementia and whom have a caregiver.

#### **OUTCOMES:**

#### Alzheimer's Community Care

- Standardize the calculation of an at risk consumer for nursing home placement using the BIMS survey tool for patients and the Zarit Burden survey for calculating a high-risk caregiver for implementing timely interventions.
- Standardize a neurocognitive disorder patient's ADL that would provide services for those at-risk endangered patients which would access services rather than formulating their needs based on a person's physical impairment, not on his/her cognition impairment.
- Standardize the 701(S) protocols to be conducted in person rather than over the phone for those referrals that are classified to be a probable neurocognitive disorder or an overwhelmed caregiver.
- Specialized support groups that address specific needs could access very troubled caregivers that routinely declare themselves as being just fine and not needing any help.

#### **Senior Resource Association**

- 90% of customers at imminent risk of nursing home placement are served with community based services.
- 89% of family and family-assisted caregivers served by SRA will self-report they are very likely to provide care.

DOEA Internal Performance Measures:

- Percent of customers who are at imminent risk of nursing home placement who are served with community-based services
- After service intervention, the percentage of caregivers who self-report being very confident about their ability to continue to provide care

#### OUTPUTS:

#### Palm Beach County Division of Senior Services

- Provide 200,000 hours of in-home services during the contract year
- Provide 13,000 volunteer service hours during the contract year
- Serve 110,000 home delivered meals during the contract year
- Provide 25,000 hours of ADC/RESF during the contract year

#### Senior Resource Association- SRA

- 278 family and family-assisted caregivers served by SRA will self-report they are very likely to provide care
- 281 customers at imminent risk of nursing home placement were served with community based services

<u>GOAL 3</u>: Empower seniors and their caregivers to live active, healthy lives to improve their mental and physical health status

#### **<u>OBJECTIVE 3.1</u>**: Continue to increase the use of Evidence-Based (EB) programs at the community level

**EXPLANATION:** The primary intent of this objective is for the AAA to detail how evidenced-based programs will be incorporated into the PSA.

#### STRATEGIES/ACTION STEPS:

Healthy Living will continue to promote and deliver Evidence-Based Programs with a focus on Fall Prevention; workshops will include Tai Ji Quan Moving for Better Balance and A Matter of Balance, Chronic Disease Self-Management and Diabetes Self-Management.

Healthy Living will work with the St. Lucie County Department of Health to accomplish Action Step 1.2.1.4 of the St. Lucie County Community Health Improvement Plan to increase the availability of evidence-based inpresson and virtual physical activity programs for older adults and those limited to home.

Healthy Living will work with the St. Lucie County Department of Health to accomplish Action Step 1.3.1.2 of the St. Lucie County Community Health Improvement Plan to increase the number of providers and volunteers delivering chronic disease self-management programs.

Healthy Living will continue virtual delivery of Evidence Based Programs.

In 2020, Healthy Living will expand the number of counties in which fall prevention programs are offered in from three to five by conducting at least one fall prevention program in Okeechobee and one in Indian River Indian River County. – Completed.

Dependent upon additional funding, Healthy Living will increase the number of participants in Evidenced-Based programs from 212 to 240 – a 13.5% increase.

In 2020, Healthy Living will increase the number of Evidence-Based Chronic Disease and Diabetes Self-Management Programs from 2 to 5 allowing us to four out of five counties.

Healthy Living will do outreach in local libraries to educate and encourage new participants/volunteers to participant in Evidence Based Programs throughout the PSA.

Healthy Living will participate in community collaborations with community partners, providers, and health professionals to increase awareness and recognition of mental and physical health in older adults.

Pamphlets and tools that allow an individual to become self-aware of the possibility of depression or anxiety and how to seek help if needed (from appropriate community partners) is made available to participants in all Evidence Based workshops.

Through participation local county Community Health Needs Assessments and Community Health Improvement Plan Consumer Care and Planning will promote the need for evidence-based programs.

#### OUTCOMES:

OUTPUTS: <Enter Text Here>

#### **<u>OBJECTIVE 3.2</u>**: Promote good nutrition and physical activity to maintain healthy lifestyles

**EXPLANATION:** The primary intent of this objective is to focus specifically on nutrition and physical activity, since they are two key components to maintaining health. Many elders are not aware of the long-term implications of a less-than-adequate diet and how it may exacerbate chronic health conditions. Likewise, they may be unaware of the positive effect physical activity might have on their overall health and/or chronic conditions.

#### **STRATEGIES/ACTION STEPS:**

The Communications department will help to raise awareness and promote activities and programs designed to encourage the adoption of healthy behaviors through outreach resource events, email, website and social media as appropriate.

The Foster Grandparent Program will continue to conduct in-services which frequently incorporate education on healthy choices and behaviors for a better quality of life.

All Evidence-Based workshops delivered by the Healthy Living Department will provide educational material on healthy eating and balanced meal planning.

Healthy Living will continue to update resources available, including physical activity, nutrition education and Workshops available regarding Chronic Disease and Diabetes Self-Management on the Agency website.

The Healthy Living department will support good nutrition and physical activity to maintain healthy lifestyles through the Evidence Based programs contained within the scope of services provided by the department. These include Chronic Disease and Diabetes Self-Management (which has a nutrition component), Matter of Balance (a fall prevention program) and the like.

Consumer Care and Planning will help link Palm Beach County Food Bank outreach specialists with communities where seniors can benefit from assistance in completing SNAP applications.

The Director of Consumer Care and Planning will continue as chair of the Senior Workgroup for the Palm Beach County Hunger Relief program to engage stakeholders and community partners in a coordinated effort to end senior hunger by implementing the tactics of the United Way Hunger Relief Project Strategic Plan.

The Director of Consumer Care and Planning will participate in the meeting of the Committee Chairs for the United Way of Palm Beach County Hunger Relief Program.

Consumer Care and Planning will continue to share with communities in all the PSA data regarding seniors in poverty, senior SNAP participation, and OAA meals participation by zip code.

Consumer Care and Planning will provide congregate meal providers with information from DOEA's GIS system to help identify appropriate sites for additional congregate meal sites.

Consumer Care and Planning will share information regarding the location of and activities at congregate meals sites as part of the department's participation in community meetings.

Program Compliance/Quality Assurance Monitors will ensure that providers' nutrition education programs conform to DOEA requirements.

Healthy Living will participate in the Florida Department of Health in St. Lucie County Physical Activity Committee.

#### **OUTCOMES:**

<Enter Text Here>

# OUTPUTS:

<Enter Text Here>

#### **<u>OBJECTIVE 3.3</u>**: Promote the adoption of healthy behaviors

**EXPLANATION:** The primary intent of this objective is to focus on lifestyle choices beyond nutrition and physical activity as in objective 3.2. Lifestyle choices include such activities as smoking, alcohol, and/or drug consumption, average nightly hours of sleep, amount of stress, amount of socialization, engaging in enjoyable pursuits, etc.

# **STRATEGIES/ACTION STEPS:**

The Communications department will continue to raise awareness and promote activities and programs designed to encourage the adoption of healthy behaviors through outreach resource events, email and website as appropriate.

The Foster Grandparent, Elder Rights, SHINE and Healthy Living departments will recruit volunteers and encourage volunteerism as a path toward healthy behaviors.

Healthy Living will attend monthly Florida Department of Health of St. Lucie "physical activity" to share the needs of seniors and use the tools and resources to guide local seniors.

The Foster Grandparent Program will continue to conduct in-services which frequently incorporate education on healthy choices and behaviors for a better quality of life.

Consumer Care and Planning will share information regarding reducing smoking, alcohol, and/or drug consumption, and encouraging sleep and stress management from community meetings with other departments in order for promote this information among senior clients.

# **Contracted Providers Strategies and Action Steps**

# **Alzheimer's Community Care**

- Alzheimer's Community Care (Organization) provides specialized attention to the needs of the Hispanic community because Alzheimer's patients exhibit behaviors earlier than their Caucasian peers by five (5) to eight (8) years sooner. The Black community exhibits behaviors for a longer period and many are vascular, hence the pathology is much different than Alzheimer's disease or the other neurocognitive disorders.
- The Organization must provide attention to sleeping and drinking of alcohol, which in many cultures is very acceptable, however the negative effects that they have on a patient's lifestyle is much different than it was before they became afflicted with a neurocognitive disorder. Only education can help alleviate and/or diminish a catastrophic event, as well as sustaining a family's safety and wellbeing.
- The Organization provides access to nurses that maintain a link with medical providers on behalf of their families during all stages, which unknowingly prescribed medications that may not be needed and are very expensive. Once medical providers understand the course of the disease process and their behaviors, there may not be a need to be an introduction of medications, but rather training on redirecting therapies or alternative solutions.
- The Organization's Family Nurse Consultants educate caregivers of all cultures that unfortunately they cannot do the care alone and advocate that services and resources are available to them and many times to their surprise. Also providing Alzheimer's conversations within churches and other acceptable

venues within ethnic communities breaks down many barriers and has proven to be most positive to all involved.

#### OUTCOMES:

#### Alzheimer's Community Care

- Breaking down barriers will enable Alzheimer's Community Care's services and resources to be
  accessible as well as bridging families to resources provided through the ADRCs and other health and
  human resources that will enable caregivers to remain working and the families embracing the care of
  patients for a longer period of time.
- Blending the understanding that wandering is a behavior that is most evident during the disease process will lessen the fear of law enforcement agencies on behalf of all cultures, which has been a strong community cohesiveness that is most rewarding at every level of society.

#### OUTPUTS:

<Enter Text Here>

# **<u>OBJECTIVE 3.4</u>**: Advocate for prevention and early intervention of mental health and substance abuse services for elders

**EXPLANATION:** The primary intent of this objective is to enable the AAA to focus on advocacy specific to the need for mental health and substance abuse services. Strategy examples can include the plan for the AAA to work with the Department to ensure that individuals who have been identified at-risk due to emotional or psychological distress receive the appropriate referral, and/or how the AAA tracks and confirms that an appropriate action is taken on behalf of each client in distress and the status update that is provided to the contract manager at the Department on a quarterly basis.

#### **STRATEGIES/ACTION STEPS:**

The Communications department will include a presentation designed to increase understanding of mental health and substance use disorders in its Bagels & Brains educational series.

Consumer Care and Planning will research with providers and provide feedback to DOEA regarding information on the Quarterly Mental Stress Reports.

Healthy Living Evidence- Based Programs will provide a section focused on depression and knowing the signs of needing professional help.

Healthy Living will make resources available at each workshop regarding knowing the signs of depression as well as information on how to reach out to the Helpline.

Healthy Living will obtain training for coaches of evidence-based programs in order for them to identify individuals who are at-risk due to emotional or psychological distress and ensure they receive the appropriate referral

The REFER database maintained by the Helpline will list some agencies seeking volunteers to assist them in staying active and healthy.

The Helpline will continue to promote congregate meal sites and senior centers to encourage socialization and connectivity.

# OUTCOMES:

<Enter Text Here>

#### OUTPUTS: <Enter Text Here>

# **GOAL 4**: Ensure the legal rights of seniors are protected and prevent their abuse, neglect, and exploitation

# **<u>OBJECTIVE 4.1</u>**: Collaborate and coordinate within the community and aging network to increase accessible legal services

**EXPLANATION:** The primary intent of this objective is to enable the AAA to detail efforts to make legal services more accessible to seniors in greatest economic or social need, as well as to improve the quality of legal services.

# **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning, Elder Rights and the Helpline will engage in joint planning with contracted legal service providers to identify target groups and priority legal issues for the Older Floridians Legal Assistance Program (OFLAP) in order to ensure that OAA services are reaching the most vulnerable seniors in the community.

The Center will seek to have input to legal services providers needs assessments.

Consumer Care and Planning will include legal service providers in annual senior forums to gather information regarding senior and caregiver needs and to facilitate legal service providers providing education and outreach to forum participants.

As part of the annual provider application review process Consumer Services Consultants will assess legal service providers' adherence to the DOEA Programs and Services Handbook legal service priority areas and local needs for legal service delivery.

Consumer Services Consultants will review legal service providers semi-annual outreach reports to review their performance to reaching targeted populations and provide technical assistance as required.

Consumer Services Consultants will annually monitor legal service providers' service delivery to determine if they are addressing priority legal issue areas.

Appropriate staff will participate in Older Floridians Legal Assistance Program Training by DOEA.

Consumer Services Consultants and Elder Rights staff will work with IIIB legal providers to Implement DOEA's best practices for developing strong, coordinated and integrated legal programs.

Implement requirements of DOEA Programs and Services Handbook as well as Notices of Instruction regarding the statewide standard for IIIB legal assistance.

Elder Rights, Consumer Care and Planning, the Helpline and contracted legal service providers will review the OFLAP Joint Planning Action Plan to monitor progress of strategies.

DOEA's SHINE program is now the State of Florida's Senior Medicare Patrol program, and SHINE counselors will begin to help beneficiaries prevent Medicare fraud and exploitation through proper reporting and resource connections.

The Helpline will maintain resources for Legal providers to include Legal Aid Society and Florida Rural Legal Services. In addition to Elder Law Attorneys who are providing Medicaid Planning services.

# OUTCOMES:

<Enter Text Here>

#### OUTPUTS:

<Enter Text Here>

#### **<u>OBJECTIVE 4.2</u>**: **A**Facilitate the integration of Older Americans Act elder rights programs into Aging Services

**EXPLANATION:** The primary intent of this objective is to make legal services a more visible and mainstream part of the aging network package of services.

#### **STRATEGIES/ACTION STEPS:**

Elder Rights provides direct services to victims of fraud and exploitation through Victim Of Crimes Act (VOCA) funding. Elder Rights also provides community education and outreach efforts to older adults, caregivers, and professionals serving older adults through DOEA funding.

As an expansion of Elder Abuse prevention and detection efforts, particularly the efforts focused on elder fraud and financial exploitation, the Elder Rights department will contact at least 3 employers and educators of professionals serving older adults, such as legal professionals, medical/mental health personnel, financial institutions and other financial professionals, and/or home health care workers to develop partnerships where the Elder Rights department provides training on recognizing and reporting elder abuse, neglect, and exploitation.

Elder Rights will train both employees and those who train employees to recognize signs of abuse, neglect, and financial exploitation while working with older adults and will educate employees about legal services and other services available for older crime victims. These trainings may use technology, such as webinars, to reach a wider audience of professionals in the service area. The Elder Rights department will also offer to assist these professionals on an as-needed basis with reporting exploitation and abuse to APS and Law Enforcement.

The Elder Rights department will write at least two articles per quarter to be published on the Agency website, which will educate older adults, the public, professionals, and aging community members about current events and topics related to fraud, scams, crime against older adults, and the services provided by the aging network.

Legal service providers will be included in the agendas for annual provider training in order for them to share information on both their OAA funded services for seniors and caregivers as well as services available through other grant funding.

Continue on-going cross-training among the Helpline, Elder Rights department, and legal service providers.

Healthy Living will invite the Elder Rights department to speak at the last session of Powerful Tools for Caregiver Workshops to help educate caregivers to the appropriate paper work to have in order through the aging process.

Consumer Care and Planning and the Helpline will included legal service providers in the Palm Beach County collaboration to develop strategies to address senior homelessness and housing.

Consumer Care and Planning will ensure legal service providers are invited to Indian River County Senior Collaborative meetings where senior and caregiver needs are discussed and resources shared.

Consumer Care and Planning will include legal service providers in the St. Lucie County Age-Friendly Public Health System Initiative.

Consumer Care and Planning will include legal service providers in the United Way of Palm Beach County Senior Hunger Relief Workgroup meeting.

The Helpline will continue to refer to OAA legal aid resources for a variety of reasons to include Medicaid planning, guardianship, landlord/tenant issues.

# OUTCOMES:

Legal professionals, medical/mental health personnel, and home health care workers will have an increased understanding of elder abuse, neglect, and financial exploitation and will know how to identify and access appropriate legal services and social services for older crime victims.

# OUTPUTS:

The Elder Rights department will provide at least 4 trainings per year to groups of legal professionals, medical/mental health personnel, and home health care workers. Trainings will include how to recognize and report signs of abuse, neglect, and financial exploitation while working with older adults. Trainings will educate attendees about legal services and other services available for older crime victims.

# **<u>OBJECTIVE 4.3</u>**: **A**mprove the identification and utilization of measurable consumer outcomes for elder rights programs

**EXPLANATION:** The primary intent of this objective is to enable the AAA to document efforts to ensure targeting of elder rights programs in the PSA and to demonstrate the value and impact of those services.

#### **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will participate in statewide efforts to develop a uniform statewide reporting system for legal services.

Consumer Care and Planning will implement OFLAP – Is Reporting with Legal Aid Society of Palm Beach County and Florida Rural Legal Services.

The Helpline, Consumer Care and Planning, Elder Rights and Legal Service Providers will participate in Senior Forums and other Community Needs Assessments as appropriate.

Consumer Care and Planning will ensure that legal service providers' service provider applications continue to include strategies for the Area Plan.

The PSA 9 Older Floridian's Legal Assistance Program Joint Planning Action Plan will include strategies for legal service provider to include the ADRC in legal service providers' needs assessment processes in order to identify gaps in service delivery.

Your ADRC will share with legal service providers other community needs assessments opportunities may be applicable to legal services.

The PSA 9 Older Floridian's Legal Assistance Program Joint Planning Action Plan includes strategies for legal service providers to advise Your ADRC of other community needs assessments opportunities that may be applicable to Your ADRC programs.

The PSA 9 Older Floridian's Legal Assistance Program Joint Planning Action Plan includes strategies for legal service provider to provide training to the aging network on case acceptance and priority settings.

Consumer Care and Planning will continue to include in legal service provider's quality assurance reviews a question to determine if the legal service providers are adhering to the priority services to seniors as outlined in the DOEA Services Handbook.

Your ADRC CEO will continue to hold quarterly calls with the legal service providers' CEOs to share specific trends and concerns.

Consumer Care and Planning will share information regarding the availability of OAA legal services at community meetings.

Consumer Care and Planning will review legal service providers' contractually required semi-annual outreach reports to determine if outreach and education is being conducted to OAA targeted populations and to provide assistance in locating targeted populations when needed.

The Elder Rights department will use data collected in its Elder Victims of Crime Database to track victimization and re-victimization rates for the PSA to determine and prioritize the needs of elder crime victims.

The Elder Rights department will review police reports for older victims of crime, which are provided to the Elder Rights department through partnerships with local law enforcement agencies, contact the crime victims, and document any activities undertaken on behalf of each crime victim and any services, information, and referrals provided to each crime victim. The Elder Rights department will document the type of crime that occurred, any items that were stolen/damaged as a result of the crime, and any financial losses to the victim. The Elder Rights departments and other community partners, as applicable, in order to improve awareness of the importance of these services.

SHINE will now provide cost avoidance and beneficiary assistance percentages throughout the implementation of the SMP grant for Medicare fraud and abuse.

# **OUTCOMES:**

The Elder Rights department will analyze victimization and re-victimization rates for the PSA to determine and prioritize the needs of elder crime victims.

#### **OUTPUTS:**

The Elder Rights department will provide data on victimization and re-victimization rates for the PSA.

#### **<u>OBJECTIVE 4.4</u>**: Promote primary prevention of elder abuse, neglect, and exploitation

**EXPLANATION**: The primary intent of this objective is for the AAA to expand existing education/outreach/awareness efforts such as websites, newsletters, presentations, etc., to include prevention of abuse, neglect, and exploitation.

# **STRATEGIES/ACTION STEPS:**

The Elder Rights department will provide intensive services targeted at the 18-20% of seniors who are victimized multiple times and seniors who are particularly vulnerable due to a cognitive, mental health, or physical condition or disability, or an expressed inability to respond to and recover from the crime on their own. Services will include:

1. Assessment of the senior's situation based on a review of any relevant documents and conversations with the senior and/or any caregivers, family members, involved professionals, and other third parties as needed. Assessment of Financial Capacity using the Lichtenberg Financial Capacity scale, as needed.

2. Creation of an individualized financial safety plan that specifically addresses the reported crimes/exploitation with services such as requesting and reviewing credit reports, communicating with creditors about fraud-related debts, establishing monitoring services for bank accounts, challenging the failure of financial institutions to repay fraudulent withdrawals, eviction or removal of exploitative caregivers, and replacement of in-home services, as needed.

3. Education of new or existing financial caregivers on specific financial risks that the senior may face in their situation and available resources and techniques to mitigate these risks.

4. Establish connections with 2 new community partners, such as older adult living communities, assisted living facilities, nursing homes, faith-based organizations, and other organizations serving older adults, to share information about the Elder Rights department services and educate older adults about elder abuse, neglect, exploitation, fraud, and scams.

5. Follow-up to track and revise the effectiveness of services.

The Elder Rights department will write and publish at least two website articles or Facebook posts per quarter to educate older people, caregivers, and professionals about current issues related to fraud, scams, identity theft, and other types of crimes.

The Elder Rights department will provide at least 24 community education/outreach/awareness events and educational material distributions each year, targeted to the needs of the community as shown by an analysis of senior crime victim data.

The Elder Rights department will participate in World Elder Abuse Awareness Day during the month of June of each <mark>year.</mark> The Elder Rights department will actively participate in multidisciplinary task forces in PSA 9 composed of law enforcement, banks and regulatory agencies who work together to address elder abuse and exploitation, such as the State Attorney's Office Elder Abuse Task Force, and Palm Beach Economic Crimes Unit. <del>and the 19<sup>th</sup> Judicial Circuit Victims Rights Coalition.</del>

The Advisory Council will promote the Elder Rights department's provision of intensive services targeted at the 18-20% of seniors who are victimized multiple times and seniors who are particularly vulnerable due to a cognitive, mental health, or physical condition or disability, or an expressed inability to respond to and recover from the crime on their own.

# **Contracted Providers Strategies and Action Steps**

# Alzheimer's Community Care

- Alzheimer's Community Care's (Organization) eight (8) hour Level I and II training, approved by DOEA and mandated as training for all staff and Board members, includes a component devoted to recognizing abuse, neglect and self-neglect, and exploitation. As the Organization is a mandatory reporter of such incidences, this education is critical to its work and mission.
- The Organization advocates when families receive a diagnosis, that they obtain legal counsel for designating financial and medical surrogates, sign a Florida-approved living will and directives that are legally binding documents. It also advocates to establish a plan if the caregiver's capacity to provide care becomes impaired or is deceased, designating a person to manage the needs of the diagnosed person. This best practice diminishes the risk of exploitation and any misunderstandings on behalf of the caregiver/patient with siblings or other preferred representatives that they may have wished to appoint to manage their legal, health and financial affairs. These practices are documented along with a medical diagnosis, which could be included within the Organization's EMR system and is a recognized component of its guiding principles. This principle is believed to ensure a family's safety and security throughout the disease process. This is one of the Organization's operational standards that could be conceded as a qualifying duty of a dementia-specific service provider.
- The Organization continually provides over a period of a year a minimum of one (1) educational seminar on the topic, and provides printed materials for caregivers, staff, law enforcement, health and service providers and other interested persons on how to prevent elder abuse, self-neglect, and exploitation which would diminish a family having to cope with this experience.
- The Organization has established a list of vetted legal attorneys who are certified as Elder Law Attorneys and/or other legal counsel that have been recommended by caregivers on their quality of work, affordability and accessibility, and is available upon request.
- The CEO of the Organization regularly attends state-run meetings for the Elder Abuse Task Force, held monthly by the State Attorney's Office, to keep apprised of the newest information in this realm.

# Council on Aging of Martin County – COAMC

1. COAMC case managers discuss with clients at initial intake their right to choose providers, the Grievance Procedures and Complaint Policies.

2. COAMC case managers identify legal issues during the 701B assessment process, both at initial intake and reassessment. Clients are referred to Florida Rural Legal Aid, and local attorneys, as appropriate.

Council on Aging of St. Lucie – COASL

Provide training for case managers, direct service providers, support staff and caregivers.

# All agency staff will continue to access community partners and faith based

organizations for supports and services not available through funded programs to prevent high risk situations.

# Provide community awareness and outreach in regard to elder abuse, neglect and exploitation.

1. Case Managers and support staff will discuss with clients and caregivers their rights and empower them with the information regarding who is a victim and what constitutes abuse, neglect and exploitation.

2. Display posters that include the 1-800-962-2873 (ABUSE) Hotline number in the Senior Campus, Bingo Hall, all Congregate Dining Sites, ADC, Consumer Service Office, Case Manager's Office, and Reception area.

3. Case Managers and support staff will offer crisis management, coping skills training and information for Caregivers.

4. Flexible and fluid service delivery of available services to accommodate ever changing needs of client and caregiver.

5. Distribute information and materials including abuse hotline phone # at all health fairs and Outreach opportunities.

6. The Council on Aging has mandatory timelines on vendor response to service authorizations.

7. The Council on Aging will provide the following services under CCE: Case Mgmt, Case Aide, Adult Day Care, Homemaking, Chore, Companionship, Counseling (Mental Health/Screening), Gerontological Counseling, EAR, Home Delivered Meals, Legal Assistance, Medication Mgmt, Personal Care, Pest Control, Pest Control (Enhanced Imitation), Pest Control (Initiation), Pest Control (Rodent), in-home respite, Medical Equipment Services & Supplies, and Enhanced Chore.

8. The Council on Aging will provide the following services under ADI: Case Mgmt, Case Aide, In-Facility Respite, In-Home Respite, Medical Equipment, Services & Supplies.

9. The Council on Aging will provide the following services under HCE: Background Screening, Background Screening Retention – Vendor, Basic Subsidy, Case Mgmt, Case Aide, Medical Equipment, Services & Supplies, and Respite

# **Okeechobee Senior Services**

- Post the Elder Abuse Hotline number on the Senior Services page of the County website.
- Include in public speaking opportunities a synopsis of what constitutes elder abuse, the signs to look for, and provide the Elder Abuse Hotline number.
- Include the Elder Abuse Hotline number on our agency brochure.
- Include the Elder Abuse Hotline number on the back of our business cards.
- Emphasize to all staff and volunteers who come in contact with elders of the importance of watching for and reporting any signs or suspicions of A/N/E. Reminding them that we are "mandatory reporters."

Refer anyone who indicates they have knowledge of possible A/N/E to the Elder Abuse Hotline.

# Palm Beach County Division of Senior Services

- Collaborate with the Department of Children and Families Adult Protective Services (APS) to provide services to seniors who are victims or are at risk of elder abuse, neglect and exploitation
- Provide on-going training to staff and volunteers on APS topics
- Continue servicing high-risk APS referrals with the highest priority for services within 72 hours
- Provide ongoing training to staff and volunteers
- Join with DCF/APS staff and/or management as needed to discuss APS cases
- Inform clients and caregivers of the process to report suspected abuse, neglect and exploitation

#### Senior Resource Association – SRA

SRA will promote education to the public about the special needs of elders and the risk factors for abuse in vulnerable adults.

SRA will train all staff and volunteers in recognizing and reporting elder abuse of all types.

SRA will collaborate with local organizations to address elder abuse in the community.

SRA will use social media, websites and printed collateral to increase outreach on elder abuse and neglect.

SRA will include materials on elder abuse in all opportunities for outreach including home visits, outside organization in-service visits, and healthfairs.

# The Volen Center – TVC

A. Neglect is prevented by intervening within 72 hours after receiving a referral from

Department of Children and Families.

B. Stringent policies are in place to assure that if Care Management staff becomes aware that elder abuse, neglect or exploitation is occurring that it is reported immediately.

C. When elders who are experiencing cognitive disorders or who need more constant care during hours when their caregivers cannot be present are put at risk, Care Management staff will recommend programs such as adult day care covered by CCE, HCE and ADI if the family is unable to cover the cost of adult day care/respite without assistance.

D. Center staff members will continue outreach efforts designed to educate the public and address the urgent needs of seniors who may be put at risk due to inappropriate care, neglect, and lack of funding being available to provide critical community based services.

E. Center staff will continue to work with Emergency Services and first responders to educate them about risks to individuals experiencing cognitive failure or health problems such as diabetes that can lead to erratic behavior and the appropriate methods to use in approaching and assisting such individuals.

F. Consumers at risk of falling or other in-home crises will be encouraged to use an Emergency Alert Response System in their homes so that they can call for assistance if needed.

#### **OUTCOMES:**

# **Alzheimer's Community Care**

- Providing these resources to the caregivers and their families and documenting them within Alzheimer's Community Care's EMR system will increase the family's security and safety throughout the disease process. Only Alzheimer's Community Care's designated staff designee is permitted to release such documentation if requested, i.e., to the President and CEO.
- Establishing this safety and security standard for caregivers and their families to achieve and value as a best practice makes them more aware and protected for all involved. Alzheimer's Community Care's staff and its governance body believes that it sustains family members' peace of mind at every stage of the disease process.
- Annual training/in-service refresher courses will be provided to all employees regarding abuse risk factors and reporting procedures.
- Support Groups will be provided to participants regarding abuse, self-neglect, neglect, and exploitation and its risk factors, how to protect oneself from it happening, and who to report it to if one learns of such a dilemma.
- Alzheimer's Community Care will remain a mandatory reporter for those that have been abused, neglected or exploited.

# OUTPUTS:

# Palm Beach County Division of Senior Services

- Serve 450 clients through Federal, State and local funding during the contract year
- Provide 200,000 hours of in-home services during the contract year
- Provide 13,000 volunteer service hours during the contract year
- Serve 110,000 home delivered meals during the contract year
- Serve 22 APS high risk clients during the contract year
- Provide 25,000 hours of ADC/RESF during the contract year

# **<u>OBJECTIVE 4.5</u>**: Reduce the rate of abuse, neglect, and exploitation (ANE) recidivism through education, outreach, and the provision of services

**EXPLANATION:** The intent of this objective is to expand existing efforts supporting ANE interventions.

#### **STRATEGIES/ACTION STEPS:**

Consumer Services Consultants will continue to work the APS exception report.

Consumer Services Consultants will continue to include APS consumer files as part of annual quality assurance review to ensure providers adhere to MOU and Adult Protective Services Operations Manual requirements for serving high risk APS consumers. Where issues are found include high risk APS consumer files as part of quarterly file reviews.)

Consumer Services Consultants will provide technical assistance to lead agencies regarding high risk APS referrals.

Consumer Services Consultants will provide training to Lead Agencies on changes to the APS Operations Manual.

Consumer Services Consultants will arrange for APS training for new case managers quarterly.

The Director of Consumer Care and Planning will share information regarding caregiver counseling and education and training at community meetings.

The Elder Rights department will establish and maintain collaborative relationships with those providing services to seniors and adults with disabilities. The Elder Rights department will actively participate in multidisciplinary task forces in PSA 9 composed of law enforcement, banks and regulatory agencies who work together to address elder abuse and exploitation, such as the State Attorney's Office Elder Abuse Task Force, Palm Beach Economic Crimes Unit, and the 19<sup>th</sup> Judicial Circuit Victims Rights Coalition. The Elder Rights department will collaborate with task force members and other agencies and entities on cases related to older people and adults with disabilities who are the victim of a crime. These agencies and entities may include law enforcement agencies, APS, county Consumer Affairs offices, Better Business Bureau, financial institutions, and others.

As an expansion of Elder Abuse prevention and detection efforts, particularly the efforts focused on elder fraud and financial exploitation, the Elder Rights department will contact at least 3 employers and educators of professionals serving older adults, such as legal professionals, medical/mental health personnel, financial institutions and other financial professionals, and/or home health care workers to develop partnerships where the Elder Rights department provides training on recognizing and reporting elder abuse, neglect, and exploitation.

The Elder Rights department will write and publish at least two website articles or Facebook posts per month to educate older people, caregivers, and professionals about current issues related to fraud, scams, identity theft, and other types of crimes.

The Elder Rights department will provide at least 30 community education/outreach/awareness events and educational material distributions each year, targeted to the needs of the community as shown by an analysis of senior crime victim data.

# **Contracted Providers Strategies and Action Steps**

# Alzheimer's Community Care

- Alzheimer's Community Care (Organization)'s Education and Quality Assurance outreach with medical providers advocates for an appropriate diagnosis as early as is possible so that caregivers can have them prepare their legal, health, financial, living wills and all directives be legally put in order so that the financial, health and care planning can move forward for the short and long term.
- Unless there is a proper medical diagnosis, the Organization's Family Nurse Consultant, as a specialist in care planning, cannot recommend designated protocols, decisions to be made, or follow-up on safety and security issues. It just is not ethical to do otherwise. Fortunately, there are medical providers, and two Memory Disorder Clinics in PSA 9 that can accommodate that best practice to accomplish that task by caregivers and family members.
- The Organization's specialists work closely with law enforcement deputies/officers, and Adult and Protective Services when an abuse, financial exploitation, neglect or self-neglect case has been reported. The Organization's specialists will follow established protocols and standards established as guiding principles when evaluating a reported case. Once such principles are set in motion and conclusions have been made, the specialist can then become an advocate and evaluator on behalf of a reported incident and will stand by the APS agent if requested.
- The Organization's CEO has testified as an expert witness when the Florida Department of Finance accused an insurance agent of exploiting five (5) elders on insurance fraud. The elder's children had suspected Alzheimer's disease and realized that the elder had been exploited by paying excessive high insurance premiums for which benefits could never be collected. The Department won its case, and the agent lost his insurance license, no longer being able to practice again in the state of Florida. More such cases should be tried when abuse becomes apparent. The establishment of expert witness' credentials may be a good practice that should be put in place for the protection of other all-too-common cases.
- The Organization's Education and Quality Assurance division conducts training seminars on exploitation, abuse and self-neglect periodically and upon request throughout the year, as well as it is an important component of its Level I and II mandated information standards and DOEA approved within its self-composed Assisted Living and Long-Term Care and Specialized Alzheimer's Day Licensed Service Center curricula.
- The Organization is a member of the Palm Beach County Elder Abuse Task Force, supports its mission and work, and educates others to join in connecting with other health and human services providers of its existence.
- The Organization solicits and provides booth space for the Sheriff's Department, Attorney General's office and other protected agencies for availability at its annual conference and caregivers forums, so that they can answer questions and address concerns that attendees may have on how to protect themselves from abuse, neglect, self-neglect and exploitation.
- The Organization's Support Group's topic of discussion routinely centers on and embraces the importance in learning what exploitation, abuse and self-neglect means and how it can jeopardize their own and other persons safety and wellbeing, financial status, independence and welfare should

they become exploited and abused. In addition, where to report such an occurrence is reviewed and how to ensure that such an unseemly living condition does not occur that will compromise their quality of life.

# Council on Aging of Martin County – COAMC

- 1. A 701B comprehensive assessment is completed in person within 72 hours of receipt of the ARTT referral packet for high-riskreferrals received during business hours.
- 2. High-risk clients referred by APS are given the highest priority for receiving services (per DoEA) and will receive services within 72 hours of the initial contact by APS. Services arranged are determined by the recommendation of the APS investigator and the 701B assessment completed by the case manager, and includes core services, such as, homemaker services, personal care, adult day care, in-home respite, companion, emergency alert, pest control, chore services, medication management and home-delivered meals.
- 3. COAMC case managers confirm services are initiated, and conduct a follow-up within 14 days with client and/or caregivers to determine satisfaction with services, and again after 31 days to determine if services are still needed.
- 4. COAMC case managers staff the outcome of the 31 day visit with the APS investigator to obtain input and agreement on the status of the case.
- 5. COAMC staff will meet semi-annually, or as needed, with APS staff to ensure compliance with local protocols and to identify problems and plan solutions.

COAMC staff and subcontractors are trained to report suspected abuse, neglect, or exploitation of vulnerable adults. The available methods of reporting are reviewed.

# **Okeechobee Senior Services**

- Encourage caregivers in crisis to participate in local caregiver support groups, and/or to seek counseling for strategies to deal with the stresses of being a caregiver.
- Maintain strong working relationship with law enforcement, in-home services provider agencies, the Okeechobee Department of Health and others serving the elder population to work together in identifying, reporting and preventing A/N/E.

# Palm Beach County Division of Senior Services

- Offer priority to high-risk Adult Protective Services referrals, evaluating abuse and neglect, exploitation
  and other potential hazards, ensure service compliance to provide necessary services within 72 hours
- Provide in-home and in-facility respite for caregivers
- Collaborate with the Department of Children and Families Adult Protective Services to provide services to seniors who are victims or are at risk of elder abuse, neglect and exploitation
- Provide on-going training to staff and volunteers on topics, including the detection and reporting of abuse, neglect and exploitation of senior consumers
- Continue the provision of services within 72 hours to high-risk APS referrals
- Provide Adult Day Care and in-home respite
- Provide Powerful Tools for Caregivers self-care education program for family caregivers to improve selfcare behaviors, manage emotions, and use community resources and tools to meet the challenges of caregiving

#### Senior Resource Association – SRA

SRA will promote education to the public about the special needs of elders and the risk factors for abuse in vulnerable adults.

SRA will do outreach and education to caregivers and clients to encourage the utilization of support services and reduce recidivism rates.

SRA will train all staff and volunteers in recognizing and reporting elder abuse of all types.

SRA will collaborate with local organizations to address elder abuse in the community.

SRA will use social media, websites and printed collateral to increase outreach on elder abuse and neglect.

SRA will include materials on elder abuse in all opportunities for outreach including home visits, outside organization in-service visits, and healthfairs.

#### The Volen Center – TVC

A. Any client referred for emergency provision services that is expected still considered to be at risk after 31 days of services are provided to the client, the client will remain in the program and receive services until the client demonstrates the ability to remove themselves from the situation which caused the initial referral to take place.

B. Center staff members will continue outreach efforts designed to educate the public and address the urgent needs of seniors who may be put at risk due to inappropriate care, neglect, and lack of funding being available to provide critical community based services.

F. Center staff will continue to work with Emergency Services and first responders to educate them about risks to individuals experiencing cognitive failure or health problems such as diabetes that can lead to erratic behavior and the appropriate methods to use in approaching and assisting such individuals.

G. Consumers at risk of falling or other in-home crises will be encouraged to use an Emergency Alert Response System in their homes so that they can call for assistance if needed.

#### OUTCOMES:

#### **Alzheimer's Community Care**

- To lower the number of cases of neglect, abuse and self-abuse and exploitation within the state of Florida.
- Report such cases to the proper authorities to avoid potential bankruptcy or financial exposure, and stop the experience as soon as possible, decreasing the potential financial devastation such a situation could inflict.

DOEA Internal Performance Measures:

• Percent of Adult Protective Services (APS) referrals who are in need of immediate services to prevent further harm who are served within 72 hours

#### OUTPUTS:

#### Palm Beach County Division of Senior Services

- Serve 450 clients through Federal, State and local funding during the contract year
- Provide 200,000 hours of in-home services during the contract year

- Provide 13,000 volunteer service hours during the contract year
- Serve 110,000 home delivered meals during the contract year
- Serve 22 APS high risk clients during the contract year
- Provide 25,000 hours of ADC/RESF during the contract year

#### **<u>OBJECTIVE 4.6</u>**: Increase the awareness of health care fraud and other elder rights issues

**EXPLANATION:** The intent of this objective is for the AAA to use existing mechanisms to increase public awareness.

#### **STRATEGIES/ACTION STEPS:**

The Elder Rights department will write and publish at least two website articles or Facebook posts per month to educate older people, caregivers, and professionals about current issues related to fraud, scams, identity theft, and other types of crimes.

The Elder Rights department will contact at least 2 local media sources to pursue additional opportunities for raising public awareness, such as radio shows, news segments, or newspaper articles.

The Elder Rights department will contact Senior Medicare Patrol and attempt to schedule a Medicare fraud presentation to train the Elder Rights' volunteer team about Medicare fraud, to empower our volunteers to recognize and respond to health care fraud issues when working with crime victims.

The Elder Rights department will provide at least 30 community education/outreach/awareness events and educational material distributions each year, targeted to the needs of the community as shown by an analysis of senior crime victim data. These events may feature Elder Rights' staff presenting on issues such as fraud, scams, identity theft, elder abuse, neglect, and exploitation.

OUTCOMES: <Enter Text Here>

OUTPUTS: <Enter Text Here> **GOAL 5**: Participate in community efforts to ensure your PSA is addressing the state's mission to create livable communities by promoting this work through the eight domains of livability framework. Support the work DOEA is doing in collaboration with AARP and the World Health Organization's (WHO) Age-Friendly Cities and Communities Program.

# OBJECTIVE 5.1: ▲ Community Support and Health System: Coordinate with community partners for increased access to affordable, person-centered health care and social services to promote active and independent living.

**EXPLANATION:** The primary intent of this objective is to establish a working relationship with the local county health departments to promote planning and development of the age-friendly public health system.

# **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will work with the Florida Health Departments in all five counties and with ADRC staff to include age-friendly strategies in the Community Health Improvement Plan

Consumer Care and Planning will continue work with the Florida Department of Health in St. Lucie on their Age-Friendly Public Health Initiative.

Consumer Care and Planning will work with the St. Lucie County Department of Health Age-Friendly Initiative to accomplish Action Step 3.1.1.6 of the St. Lucie County Community Health Improvement Plan to educate about the need for additional funding.

Healthy Living will work with the St. Lucie County Department of Health Age-Friendly Initiative to accomplish Action Step 1.2.3.1 of the St. Lucie County Community Health Improvement Plan to identify and promoted exisiting programs offered in the community (Matter of Balance, Tai Chi, Walk with Ease, Stepping on.)

Healthy Living will work with the St. Lucie County Department of Health Age-Friendly Initiative to accomplish Action Step 1.2.3.2 of the St. Lucie County Community Health Improvement Plan to identify partners that can recognize those at risk for falls to increase referrals and program utilization.

Healthy Living will work with the St. Lucie County Department of Health Age-Friendly Initiative to accomplish Action Step 1.2.3.3 of the St. Lucie County Community Health Improvement Plan to identify/develop programs within the community that help improve balance.

Consumer Care and Planning will continue to work with the Florida Department of Health in Palm Beach County on their Age-Friendly Public Health Initiative.

Consumer Care and Planning with share with other departments contracted providers' opportunities to participate in fun, unique programs that support being healthy, inluding free exercise programs in local parks.

Consumer Care and Planning will work with with Palm Beach Neuroscience Memory Disorder Clinic and Louis and Anne Green Memory & Wellness Center to promote awareness of the Dementia Care and Cure Initiative.

Healthy Living will participate in the Florida Department of Health in St. Lucie Physical Activity Program.

Healthy Living will participate on the monthly State Health Improvement Plan Fall Prevention Conference Calls

Working with county health departments, Healthy living will promote the availability of existing public health programs and share with the health departments the evidence-based programs available to meet senior needs.

Consumer Care and Planning will participate in County Health Departments' Needs Assessments to share information on social determinants of health and the incidence of chronic disease among seniors.

Consumer Care and Planning will participate in County Health Departments' Community Health Improvement Plans to make them aware of our resources for evidence-based programs for fall prevention, chronic disease self-management, diabetes self-management and long-term care supports.

The Helpline will continue to provide resources that address the social determinants of health such as transportation, low cost health clinics, food, housing resources, opportunities to reduce social isolation and more.

SHINE counselors will provide free unbiased counseling to help Seniors and Persons with a Disability understand their Medicare benefit, how to reduce prescription drug cost and assistance with application for Low Income Subsidy and the Medicare Savings Program.

The Benefit Enrollment Center will assist under insured Medicare Beneficiaries apply for Medicaid and Food stamps.

# OUTCOMES:

<Enter Text Here>

# **OUTPUTS:** <Enter Text Here>

# **<u>OBJECTIVE 5.2</u>**: AHousing: Promote safe, accessible, and affordable housing that supports aging in place.

**EXPLANATION:** The primary intent of this objective is to work together with community partners to ensure a wide range of housing options are available for residents, and the community has access to home modification programs.

#### **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will share the Elder Needs Index for all counties within the PSA to demonstrate the need for more affordable senior housing.

Consumer Care and Planning and the Helpline will attend the Palm Beach County Homeless and Housing Alliance Meetings to learn of programs available for homeless seniors as well as affordable housing options. We will also use this opportunity to give input as to the needs of seniors for affordable housing and the avoidance of homelessness.

Consumer Care and Planning and the Helpline will attend the Palm Beach County Housing Inventory/Unmet Needs Committee Meetings to share senior housing needs.

Consumer Care and Planning will share information regarding those providers who offer home modification programs with other staff.

The Helpline will remain current with low income housing opportunities for Seniors and Persons with a disability.

#### OUTCOMES:

<Enter Text Here>

OUTPUTS:

# **<u>OBJECTIVE 5.3</u>**: **A**<u>Transportation</u>: Increase awareness of and promote safe and reliable transportation options to increase mobility and community participation.

**EXPLANATION:** The primary intent of this objective is to make sure your community offers alternative transportation options that allows members to still have access to health care, shopping, social engagement programs, civic participation, employment, and services.

### **STRATEGIES/ACTION STEPS:**

Consumer Services Consultants will continue to participate on the transportation boards representing all counties within the PSA to ensure that the needs of seniors and individuals with disabilities are addressed.

Consumer Care and Planning will work with community transportation partners to learn of opportunities to develop ambassador leaders in the community to educate on the use of public transit system.

Consumer Care and Planning will investigate opportunities to create partnerships to work together to implement neighborhood/community volunteer transportation programs.

### OUTCOMES:

<Enter Text Here>

OUTPUTS:

**<u>OBJECTIVE 5.4</u>**: **<u>ACommunication and Information</u>**: Increase access to information through various methods including print, tv, and digital media.</u>

**EXPLANATION:** The primary intent of this objective is to ensure multiple means of communication are being used within a PSA to link people to information, services, and resources. These efforts need to take into consideration persons with disabilities.

### STRATEGIES/ACTION STEPS:

The Communications department will build upon existing marketing strengths to include:

- Utilizing Facebook
- o Utilizing Twitter
- Utilizing the website
- Designing and publishing a monthly quarterly digital newsletter
- Promoting and offering DOEA's Elder Update and Livable Communities Newsletter
- o Sending press releases with impactful stories to print, tv and radio media contacts
- Engaging a supportive staff, Board of Directors and Advisory Council as ambassadors
- o Increasing strategic collaborations with service organizations serving our target populations
- Expanding the reach of collateral materials
- Participating in offsite events and presentations
- Establishing relationships with legislators and key decision makers
- Educating a strong volunteer base
- o Expanding relationships with business partners with sponsorship and underwriting capabilities

OUTCOMES:

<Enter Text Here>

# OUTPUTS:

**<u>OBJECTIVE 5.5</u>**: A<u>Respect and Social Inclusion</u>: Promote, engage, and celebrate the valuable contributions of all adults in the community.

**EXPLANATION:** The primary intent of this objective is to promote intergenerational programs through the PSA.

#### **STRATEGIES/ACTION STEPS:**

Your Aging & Disability Resource Center The Communications Department will continue to promote, engage and celebrate seniors through its intergenerational Foster Grandparent Program operating in Palm Beach, Martin, St. Lucie and Okeechobee counties.

Your Aging & Disability Resource Center The Communications Department will celebrate senior volunteers throughout the PSA at its annual Prime Time Celebration held in May in honor of Older Americans Month.

The Helpline will be trained annually on cultural sensitivity and working with diverse populations.

The Helpline will continue to offer tri – lingual specialists who are sensitive to cultural differences.

### OUTCOMES:

<Enter Text Here>

OUTPUTS: <Enter Text Here>

<b><u>OBJECTIVE 5.6:</u> <u>ACivic Participation and Employment</u>: Increase awareness of opportunities to contribute in</b>
the workplace and volunteer to make a difference in the community.
<b>EXPLANATION:</b> The primary intent of this objective is to promote the Senior Community Service Employment Program
(SCSEP), community service, and volunteer opportunities.
STRATEGIES/ACTION STEPS:
The Foster Grandparent Program will continue to recruit and increase awareness of volunteer opportunities

The Helpline will stay current on the availability of work opportunities for Seniors offered through AARP senior employment program and Career Source.

As part of Palm Beach County Hunger Relief Program, Consumer Care and Planning will help to share opportunities to volunteer at contract providers' congregate meal sites.

Consumer Care and Planning will conduct outreach to recruit volunteers for the Respite for Elders Living in Everyday Families program.

 The Communications Department will coordinate as a focal point for all volunteer recruitment activities (non DOEA related) for PSA 9. The Communications Department will coordinate inquiries regarding volunteer opportunities that come in through the website or phone calls.

OUTCOMES: <Enter Text Here>

for low-income seniors.

OUTPUTS:

# **<u>OBJECTIVE 5.7:</u> <u>ASocial Participation</u>: Increase awareness of and promote easy access to social and cultural activities for increased quality of life.</u>**

**EXPLANATION:** The primary intent of this objective is to work collaboratively with the local senior centers and other organizations to prevent social isolation and increase engagement through evidence-based programs.

#### STRATEGIES/ACTION STEPS:

Healthy Living will outreach to local senior centers to make them aware of the opportunity to participate in or volunteer in evidence-based programs.

Healthy Living will participate in Healthy Jupiter and Healthy St. Lucie virtual events to promote evidencebased programs available.

Through the United Way of Palm Beach County Senior Hunger Relief Workgroup, Consumer Care and Planning will continue to advertise the opportunities for seniors to volunteer at congregate meal sites.

Consumer Care and Planning will share information at community meeting regarding social isolation and other determinants of health.

Consumer Care and Planning will share the GIS mapping information regarding availability of congregate meal sites throughout the Planning and Service Area.

#### OUTCOMES:

<Enter Text Here>

#### **OUTPUTS:**

# **<u>OBJECTIVE 5.8:</u>** <u>AOutdoor Spaces and Buildings</u>: Work with community partners to ensure accessible, inviting, and safe outdoor spaces and buildings that encourage active participation and recreation.

**EXPLANATION:** The primary intent of this objective is to work collaboratively with local partners to ensure safe, accessible outdoor spaces.

#### **STRATEGIES/ACTION STEPS:**

Consumer Services Consultants will share information from Safe Street workshops at appropriate community settings.

As part of introducing the Age-Friendly Initiative, Consumer Care and Planning will educate regarding the Outdoor Spaces and Building dimension and what it means.

OUTCOMES: <Enter Text Here>

#### OUTPUTS:

# **GOAL 6**: Maintain effective and responsive management

#### **OBJECTIVE 6.1**: Promote and incorporate management practices that encourage greater efficiency

**EXPLANATION:** Best practice strategies may include internal monitoring, quality assurance, and performance-based standards and outcomes.

#### **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will annually conduct programmatic, fiscal and administrative quality assurance reviews of contracted providers.

Consumer Service Consultants will track providers' subcontracts to ensure that they are timely renewed and include required language.

Over the next three years, organizational Integrity will implement internal program to review management systems, implement quality improvement activities and measure performance throughout the Agency's departments. This information will be shared with the Board of Directors and Advisory Council as appropriate.

The Helpline will continue using FAX Finder software, Global Search Document Management and Time Tap scheduler as best practices for efficiency.

Human Resources will strengthen partnerships with local institutions of higher learning in order to strengthen Your ADRC's internship program to develop a talent pool for future openings and to gain the insights and benefit of the talents of students who can learn about the aging network while assisting in key areas of the Agency.

Human Resources will work with partner agencies to expand the talent pool for Agency staff.

# Enhance financial controls

The Fiscal Department will provide financial reports to the Board of Directors at least six times per year.

The Fiscal Department will provide accounts payable and accounts receivable aging reports to the Board of Directors at least six times per year.

The Fiscal Department will reallocate funds as necessary to ensure that all DOEA funds are expended in PSA 9.

The Fiscal Department will review provider invoices monthly to detect extraordinary or unusual service trends.

IT will maintain the staffing and infrastructure to support the information technology needs of the organization.

IT will ensure that HIPAA compliance takes place.

IT will maintain and build the Agency's database.

IT will ensure that firewalls are up-to-date.

IT will provide one-on-one assistance to staff as needed and required.

IT will periodically review DOEA and other funder's request for data and reports so we are supporting all.

OUTCOMES: <Enter Text Here>

OUTPUTS:

<Enter Text Here>

# **<u>OBJECTIVE 6.2</u>**: Effectively manage state and federal funds to ensure consumers' needs are met and funds are appropriately spent

**EXPLANATION:** The intent of this objective is for all state and federal funds to be appropriately spent, as well as to identify alternate resources for funding. In addition, the intent is for the funds to be spent on those populations for which the funds were intended.

### **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will continue to participate in monthly Fiscal/Consumer Services meetings to review providers' spending and ensure that appropriate steps are taken to address surplus/deficits and to analyze management policies to reduce and eliminate unspent contracted program funds.

Consumer Services Consultants will continue to implement their portion of the Consumer Activation Protocol to ensure dollars are available to sustain new clients that providers request to be added to programs.

Consumer Services Consultants will continue to review providers' surplus/deficit reports monthly and ask for reliable explanations regarding plans to address surpluses or deficits.

IT will create ways to maximize use of acquired equipment.

IT will engage staff in fully understanding and utilizing equipment.

Complete the procurement of the general revenue RFP and complete contracts with providers.

Establish a fund raising plan and continue progress with local foundations.
 Complete the procurement of the Older Americans Act RFP and complete contracts with providers.

The Fiscal Department will provide oversight of all program expenditures to ensure funds are being utilized appropriately.

The Fiscal Department will monitor on a monthly basis revenue and expenditure for each program.

# Achieve a unqualified (clean) audit opinion for 2020.

- Improve the financial position reducing debts/obligations.
- Support the claims process with Philadelphia insurance.

Develop a debt repayment plan to reduce financial obligations.

# **Contracted Providers Strategies and Action Steps**

# **Alzheimer's Community Care**

- Alzheimer's Community Care (Organization)'s President and CEO meets with its division's leadership (Vice President of Education and Quality Assurance, Vice President of Finance, Vice President of Human Resources, and Vice President of Grants and Fund Development) monthly, and quarterly jointly with its second tier leadership (Director of the Family Nurse Consultants, Director of Specialized Day Services, Director of Development, and Director of Case Management), to review the financial and grants obligations along with achievements, challenges, goals and objectives and other details so that all funds are expended efficiently, effectively, and within expectations. These meetings are guided by a pre-approved agenda and all attendees receive a report with stated action items discussed and agreed upon and highlighted for follow up and follow through with accountability and transparency. These meeting reports are always available to the Organization's Board of Directors.
- The Organization's Leadership reports on emerging needs within its budget presentation and to be approved if the human and financial resources are available and they fit into its three (3) year strategic plan. If an emerging need becomes critical and is not within the plan, special considerations may be approved following procedures as vetted by the affected Standing Committee(s), and recommendations are forwarded to the governing body for approval, which is the Board of Directors.
- The Organization's (501(c) (3) nonprofit) care model incorporates the fundamentals which adhere to the cost-effective practices at an annual reimbursement rate of approximately \$21,000.00 per patient. This model affords services at a licensed Specialized Day Service Center for five (5) days a week, ten (10) hours daily, and meets the standards mandated within the Specialized Alzheimer's Day Care Act (passed into law on July 1, 2012) License. Presently there are eleven (11) Alzheimer's Day Care Licensed (SDS) centers operated by the Organization, with a plan to open a twelfth (12) on the Treasure Coast within the next 18 months. Within the AAA's time plan, three (3) more centers are planned to be in operation, focusing on under-served communities.
- Of the Organization's Centers' attendees, more than 70% have a cognition score (capacity eligibility for nursing home placement) of 7 and below, with normal being 15, using the BIMS Tool. Assisted Living Facilities' costs may start at \$5,000.00 monthly up to more than \$15,000.00 monthly, which translates that the SDS centers are the only financially feasible buffer for the 96% of families wanting to keep their loved ones at home for as long as possible. The difference in cost savings for both the families and state/federal agencies (Medicaid) are millions of dollars, and shares the care with families (at night and on weekends) with a high approval rating of excellence and support. Families are

involved with the Organization on an average of four (4) to ten (10) years during the duration of the disease process.

# Council on Aging of Martin County – COAMC

- 1. COAMC Case Managers are trained to explore all possible resources, including community resources, available support from family and/or friends and the client's ability to privately pay for services before utilizing state and federal funds for client services.
- 2. Existing care plans are reviewed semi-annually. When improvements are experienced in a client's ability to perform ADL's and IADL's, or care becomes available through caregivers, care plans are adjusted.
- 3. On a monthly basis, existing care plan amounts are reviewed to determine if additional clients can be removed from the waitlist for services, to ensure funds are appropriately spent.

# Council on Aging of St. Lucie – COASL

# Knowledgeable Case Management

### Fully expend all funds according to contract requirements

Submit accurate expenditure reports and invoices in the mandated time frames.

Contract annually with an independent auditor to review the Council's fiscal and programmatic compliance.

1. The Case Manager Director will ensure that case management training continues to include tools to enhance interviewing and people skills, needs assessment, cost effective care planning strategies, and community networking.

2. Case Managers will work to identify alternative funding sources prior to accessing DOEA program funds in meeting the client's needs. The Case Manager will explore formal and in-formal resources.

3. All programs are administered in accordance with the current DOEA Client Services Manual and any subsequent Notices of Instruction (NOI).

4. Inactive cases will be closed in a timely fashion to allow for new enrollments.

5. The Council will continue to track new referrals to ensure timely enrollment progress.

6. To ensure accurate expenditure reports, the Council on Aging maintains its own database (PLUMS) which runs in tandem with CIRTS. Service units are reconciled and in balance before they are entered into CIRTS.7. Vendor contracts address billing due dates and closeout dates to ensure units can be reconciled, entered and invoiced within contractual timelines.

8. The Council on Aging will continue to engage an independent auditor firm to perform annual financial and programmatic audits.

9. The Council on Aging will reconcile service delivery on a weekly basis. After each monthly report cycle, the Program & Finance Director will meet to review and discuss encumbrance reports, outreach, projections, and department issues.

10. The Council on Aging will provide the following services under CCE: Case Mgmt, Case Aide, Adult Day Care, Homemaking, Chore, Companionship, Counseling (Mental Health/Screening), Gerontological Counseling, EAR, Home Delivered Meals, Legal Assistance, Medication Mgmt, Personal Care, Pest Control, Pest Control (Imitation), Pest Control (Initiation), Pest Control (Rodent), in-home respite, Medical Equipment Services & Supplies, and Enhanced Chore.

11. The Council on Aging will provide the following services under ADI: Case Mgmt, Case Aide, In-Facility Respite, In-Home Respite, Medical Equipment, Services & Supplies.

12. The Council on Aging will provide the following services under HCE: Background Screening, Background Screening Retention – Vendor, Basic Subsidy, Case Mgmt, Case Aide, Medical Equipment, Services & Supplies, and Respite

# **Okeechobee Senior Services**

- Review weekly "missed visits" to identify solutions where possible, and to monitor the impact on overall unit production.
- Meet weekly with in-home service provider agencies to identify changing needs of clients served.
- Utilize the monthly Surplus/Deficit reports to identify adjustments to unit production rates based on the projections reflected.
- Utilize internal unit production analysis methodologies to make necessary adjustments to unit production rate(s).
- Utilize collected Co-Pay dollars to expand services.

Utilize observations at required client reviews, input from HDM route drivers and input from in-home service provider agencies to identify where level of services should be adjusted.

# Palm Beach County Division of Senior Services

- Continue DOSS's policy of supervisory review and approval of services prescribed by Case Managers before submitting to vendors
- Conduct monthly meetings with staff: fiscal, operations, administration and quality assurance to assure funds are depleted
- Prepare monthly Surplus/Deficits Reports to assure grant funds are utilized by the end of fiscal year
- Create a plan of action and/or explanation to maximize utilization of services and assure grant funds are utilized by the end of the year
- Continue to utilize the internal case management database Senior Tracking and Referral System (STARS) to authorize services provided directly by DOSS staff and those provided through vendor contracts
- Continue to utilize STARS Reports to:
  - Project future spending based on amount of services authorized
  - Track year to date grant dollars expended
  - Assure 100% utilization of state, federal and local funds
- Coordinate non-DOEA funded services in conjunction with DOEA funded services at a level for the consumer to remain safe at home
- Continue the volunteer stipend programs to increase in-home services to frail seniors to help deter placement at nursing home and reduce care plan costs

# Senior Resource Association – SRA

All invoices submitted to the Finance Department for payment must be approved for payment. Invoices are to be approved by a supervisor, manager, Director, Vice President or CEO/President. Invoices not approved will not be paid. All approved invoices submitted to the Finance Department will be paid according to the terms on the invoice unless otherwise noted. Finance staff reviews to verify allowable expenditures based on CFR, Title 45, Parts 74 and 92, as amended, or if expenditures have been made in accordance with all applicable state and federal rules. Unallowable expenses are not charged to Federal or State grants.

SRA's financial software maintains expenses by account number, services and grants.

SRA conducts an independent annual audit including a single audit in accordance with the provisions of 2 CFR Part 200.

SRA's Finance Committee meets a minimum of nine times a year to review monthlyfinances and annual budget making recommendations to the Board of Directors.

SRA completes encumbrance reports for Federal and General Revenue grants monthlyand submits the reports to the Aging and Disability Resource Center. SRA will continue analyze surplus/deficit projections, which includes monthly interdepartmentalmeetings, encumbrance report review and client addition recommendations. Client recommendations are approved by the CEO or CFO.

SRA will employ performance improvement initiatives and technologies to increase service quality, efficiency and data integrity.

SRA will monitor and train vendors for quality assurance purposes.

SRA will continuously monitor management policies and operation procedures to reduce and eliminate unspent funds.

# The Volen Center – TVC

A. Care Management staff will develop care plans that integrate non-DOEA funded services whenever possible, utilizing DOEA-funded services (CCE, HCE, ADI) only when necessary.

B. Care plans will specify the number of service units authorized and all service provider bills will be carefully reviewed to ensure that service instructions are precisely and accurately followed so that units not authorized are not paid for with DOEA funds.

DOEA funds will be utilized only for those purposes specified and to the benefit of consumers.

C. Care plans, service purchase orders, service bills, and all client records will be periodically monitored to ensure that appropriate services and service units are being expended.

D. Funding provided through CCE, HCE, and ADI will be budgeted, both by care plan and by program, so that commitments for using funds do not exceed the funds available.

E. Reports will be provided to the AAA as required so that proper oversight can be provided.

F. Use of funds will be planned to ensure that all funds are expended within the grant period.

# OUTCOMES:

#### **Alzheimer's Community Care**

- Annually, 80% of patients discharged from Alzheimer's Community Care's services do not go into a nursing home.
- Fall incidents at the SDS centers are diminished compared to those at home, with an average of 1 center fall for every 10 reported from home.
- Increase the spousal caregiver's longevity, so they can care for their loved one for as long as possible.
- SDS centers increase the level of patients' shared care with caregivers by 50%.

- Audited financial reports indicate for every \$1.00 donated to the Organization, 92 cents go directly to services and resources.
- 80% of the Organizations' centers are in partnership with local clergy facilities.
- 40% plus patients attending an SDS center are enrolled in the ID Locator Service and have radio frequency transmitter on their person as to increase their safety by 100%. Since 2013, over 800 patients have been served through this service, and 100% of those reported elopements were found quickly, safely and alive.

Note: The AAAs will not be monitored on the measures listed in italics, though the AAA must still include strategies to address them in this section.

- Average monthly savings per consumer for home and community-based care versus nursing home care for comparable client groups
- Average time in the Community Care for the Elderly program for Medicaid Waiver probable customers

DOEA Internal Performance Measures:

- Percent of co-pay goal achieved
- Percent of state and federal funds expended for consumer services

# OUTPUTS:

### Palm Beach County Division of Senior Services

- Serve 450 clients through Federal, State and local funding during the contract year
- Provide 200,000 hours of in-home services during the contract year
- Provide 13,000 volunteer service hours during the contract year
- Serve 110,000 home delivered meals during the contract year
- Provide 25,000 hours of ADC/RESF during the contract year

# **<u>OBJECTIVE 6.3</u>**: Ensure that providers continue to strengthen the disaster preparedness plans to address specific needs of elders

**EXPLANATION:** Strategies may include the development of formal agreements with local, state, and federal entities that provide disaster relief and recovery. Consideration should also be given to the planning and identification of consumer needs, the availability of special needs shelters in times of disaster, and educating clients on the importance of pre-registering for special needs shelters. Examples of actions may include the dissemination of evacuation zone rosters and maps to staff and partners, to ensure client locations are known for preparation and relief efforts.

# **STRATEGIES/ACTION STEPS:**

Consumer Services Consultants will review providers' disaster preparedness plans annually to ensure they comply with the requirements in the DOEA Programs and Services Handbooks.

Consumer Care and Planning will annually update Memorandums of Agreement for Senior Distribution Sites in Palm Beach County and input the information to the WEBEOC database.

IT will updated client information in DOEA evacuation zone rosters.

Consumer Care and Planning will disseminate evacuation zone rosters and maps to staff and partners, to ensure client locations are known for preparation and relief efforts.

# **Contracted Providers Strategies and Action Steps**

#### **Alzheimer's Community Care**

- Alzheimer's Community Care (Organization) provides nurses, staff and trained volunteers to work in Palm Bach County Special Needs Shelter II that accommodates patients and their caregivers to seek shelter during a category 3 or plus hurricane.
- The Organization provides training when requested to the Health Department, the Emergency
  Operations Center's staff, and the Palm Beach County Social Services departments on how to recognize
  Alzheimer's disease and other neurocognitive disorders for patients and their caregivers staying in a
  special needs shelter.
- The Organization's trained personnel oversees the registration for families, puts them in their locations where there are cots and provides other resources that they may require during their stay at the shelter.
- The Organization's staff are advocates on behalf of the families, oversees their needs throughout their stay in shelter, and helps them with discharging procedures, so they can go home by either driving their own car or taking the community transportation vehicles that have been provided to them.
- The Organization's personnel help with providing meals, water, etc., access to hygiene resources and duties, bathroom supervision, and maintain both caregiver and patient's safety while they're at the shelter. The Organization's personnel are available to shelter staff and medical providers when a question on medications are requested, as many do not know the medications that are specifically prescribed for those with memory loss.

# OUTCOMES:

<Enter Text Here>

### OUTPUTS:

### **OBJECTIVE 6.4:** Accurately maintain the Client Information and Registration Tracking System (CIRTS) data

**EXPLANATION:** The intent of this objective is to ensure that data is entered accurately in CIRTS and that data is updated in a timely manner as to reflect changes. Examples of quality assurance actions may also include the AAA working to ensure that addresses for active clients were entered by staff and partners into CIRTS accurately and in the most effective format or to make corrections if a client location cannot be identified, to ensure that individuals' home addresses have the highest likelihood of being properly located and mapped by the Department to identify their assigned evacuation zone.

#### **STRATEGIES/ACTION STEPS:**

Consumer Services Consultants will routinely review ACTV Clients with No Services in 14 Months and Clients Served Not Enrolled. Schedules are documented in the Consumer Services Consultant calendar at the start of each year.

Consumer Services Consultants will require Outcome Measure Reports from providers monthly with explanations for those instances that fall outside the acceptable range.

APS Exception Reports will be reviewed monthly by providers and Consumer Services Consultants.

Consumer Services consultants will require providers to run the following reports for the period January 1, 2015 through the 28<sup>th</sup> of the current month. Providers will be required to review and correct them and forward the final reports with any needed explanation to the Consumer Services Consultant by the 5<sup>th</sup> of the following month.

- 1) Assessment Due Report
- 2) Clients With No Care Plan
- 3) New Active Enrollees By Assessment Rank

**OUTCOMES:** 

# <Enter Text Here>

**OUTPUTS:** <Enter Text Here>

#### **OBJECTIVE 6.5:** Promote volunteerism by and for seniors when possible

**EXPLANATION:** The intent of this objective is to detail how incorporating volunteers might extend the AAA's capacity to provide services.

#### **STRATEGIES/ACTION STEPS:**

The Foster Grandparent Program will continue to recruit and increase awareness of volunteer opportunities for low-income seniors to mentor and tutor children with special needs in the public school classrooms.

Healthy Living will work to rebuild the volunteer base through recruitment at Volunteer Fairs and take a more active role in encouraging participants who have benefited from the programs to become workshop leaders.

The Elder Rights department will continue to recruit new volunteers, work to retain existing volunteers, and increase public awareness of volunteer opportunities for people interested in volunteering to provide Abuse, Neglect and Exploitation presentations and assist senior crime victims ages 60 and older and adults with disabilities with the Office of the Attorney General's Victim Compensation Program.

The Elder Rights Center will work with HR to investigate and pursue the possibility of developing an internship program to procure bachelor's or master's level student interns in fields such as criminal justice, social work, gerontology, and legal studies.

#### OUTCOMES:

<Enter Text Here>

DOEA Internal Performance Measures:

• Develop strategies for the recruitment and retention of volunteers

#### **OUTPUTS:**

#### **<u>GOAL 6</u>**: Maintain effective and responsive management

**OBJECTIVE 6.6:** Adhere to OAA requirements for developing and administering the Area Plan **EXPLANATION:** The Older Americans Act requires that the council shall advise the agency relative to:

- (1) Developing and administering the area plan;
- (2) Conducting public hearings;
- (3) Representing the interest of older persons; and

(4) Reviewing and commenting on all community policies, programs and actions which affect older persons with the intent of assuring maximum coordination and responsiveness to older persons.

### **STRATEGIES/ACTION STEPS:**

- The Advisory Council Planning Committee will review staff progress on Area Plan strategies and action steps as well as any proposed changes. The Committee will share appropriate updates with the Advisory Council.
- The Advisory Council Planning Committee will review the SCOT analysis to determine progress made and to identify potential strategies and action steps for the next cycle Area Plan.
- The Advisory Council Planning Committee will review new data regarding demographics and needs assessments on an ongoing basis to determine impact on the next cycle Area Plan
- Advisory Council Committee Chairs will ensure Advisory Council Committee work plans are consistent with the Area Plan and that all progress and any changes are reported for updates to the Area Plan.
- The Planning Committee will review DOEA proposed revisions to the Agency's 2020 Area Plan and revisions and make recommendations to the Advisory Council regarding their acceptance/rejection.
- The Advisory Council Membership Committee will continue to seek to recruit diverse and experienced community professionals, advocates and consumers that meet Council requirements contained in the Older Americans Act.
- The Planning Committee will advise the Director of Consumer Care and Planning regarding input about the needs of seniors for the United Way of Palm Beach County Hunger Relief Project and Healthier Boynton Beach.
- Promote legislative agenda to minimize the impact to Florida seniors.

# OUTCOMES:

OUTPUTS:

**Goal 7**: Co-establish and participate in at least one Dementia Care and Cure Initiative (DCCI) Task Force in your Planning and Service Area (PSA).

**<u>OBJECTIVE 7.1</u>**: **A**Coordinate with the Memory Disorder Clinic (MDC) and local community leaders in Alzheimer's disease and related dementias (ADRD) in your area to create a DCCI Task Force.

**EXPLANATION:** The primary intent of this objective is to form a Task Force to increase awareness of dementia and services and support for those living with dementia, along with their families and care partners, through public and private partnerships. The Task Force shall accomplish this through strategic planning and implementation of outreach and educational programs, partnerships with community leaders, and action-oriented plans.

#### **STRATEGIES/ACTION STEPS:**

Consumer Care and Planning will work with Palm Beach Neuroscience Memory Disorder Clinic and Louis and Anne Green Memory & Wellness Center to create at least one DCCI Task Force in the Planning and Service Area

Consumer Care and Planning will increase awareness of dementia and services through participation on community health needs assessments committees and community health improvement plans.

Consumer Care and Planning will share information on current community collaborations in each county of the PSA with the DCCI Task Force in order to promote outreach and educational programs.

# **Contracted Providers Strategies and Action Steps**

#### **Alzheimer's Community Care**

- Alzheimer's Community Care (Organization) strategically creates standing committees, advisory councils, initiatives with community leaders such as the HUGS program, with action-oriented plans, agendas, services and resources incorporating the ADRCs, DCF, APS, local foundations' initiatives, law enforcement, first responders, academia, federal and state initiatives, and health and human networks within all its service areas.
- The Organization would be most helpful in assisting the ADRCs for establishing a public sector DCCI.
- The Organization could easily provide recommendations for action-oriented plans as well turn those plans into solutions for the 70,000 plus projected diagnosed patients living within PSA (numbers understated).
- The Organization would be of help in planning the strategies for creating and establishing a Task Force that would identify the pre, during and post candidates for enlisting persons from government, business, medical, non-profit and for-profit systems/providers/industries.

# OUTCOMES:

### **Alzheimer's Community Care**

• To establish a DCCI Task Force that will be effective and identify an action-oriented plan that will be meaningful, accountable with goal driven, effective, far-reaching, inclusive, pragmatic in its approach to care and treatment, and have a lasting effect on society.

OUTPUTS:

#### **<u>OBJECTIVE 7.2</u>**: **ACollaborate with Task Force members to designate community entities as Dementia-Caring.**

**EXPLANATION:** The primary intent of this objective is to provide free dementia sensitivity trainings to government and public service agencies, community entities, caregivers and families, first responders, health care professionals, businesses, and community organizations with dementia sensitivity trainings that will allow recipients to receive the designation of being Dementia-Caring.

### STRATEGIES/ACTION STEPS:

- Collaborating with the DCCI Task Force, Consumer Care and Planning will share with Palm Beach County League of Cities and Treasure Coast League of Cities the availability of free dementia sensitivity trainings
- Collaborating with the DCCI Task Force, Consumer Care and Planning will share with the United Way of Palm Beach County and the United Way of St. Lucie County the availability of free dementia sensitivity trainings.
- Collaborating with the DCCI Task Force, Consumer and Planning will share with the Indian River County Senior Collaborative, Palm Beach County Community Revitalization Team, Healthier Boynton Beach, and the Palm Beach Coalition Health Services Advisory Group the availability of free dementia sensitivity trainings.

#### **OUTCOMES:**

<Enter Text Here>

#### OUTPUTS:

# **<u>OBJECTIVE 7.3</u>**: APromote DCCI education and outreach activities throughout your PSA.

**EXPLANATION:** The primary intent of this objective is to spread awareness and sensitivity about dementia throughout your PSA to encourage safe and inclusive communities for all who seek to continue to be engaged throughout their lifetime, and by linking those living with dementia, their families, and care partners to local resources.

### STRATEGIES/ACTION STEPS:

The Director of Accountability and Organizational Integrity will engage Advisory Council members in spreading awareness and sensitivity about dementia.

The Director of Accountability and Organizational Integrity will engage Advisory Council members in sharing local resources with those living with dementia, their families and care partners.

OUTCOMES: <Enter Text Here>

OUTPUTS: <Enter Text Here>

### **<u>OBJECTIVE 7.4</u>**: Aldentify areas of need within the ADRD community throughout your PSA.

**EXPLANATION:** The primary intent of this objective is to advocate for those living with dementia and recognize ways the Task Force can get involved in the community.

#### **STRATEGIES/ACTION STEPS:**

The Director of Consumer Care and Planning with share zip code data of seniors with cognitive issues with the DCCI Task Force in order to reach affected populations.

The Director of Consumer Care and Planning will share the Community Collaborations portion of this Area Plan with the DCCI Task Force and help to coordinate ways that the Task Force get also participate in these community collaborations.

OUTCOMES: <Enter Text Here>

OUTPUTS: <Enter Text Here>

# APPENDIX A

APPEND	IX A												
			/ER COUN	TY 2017 A	ND 2020 P	OPULATIO	ON PROJ	ECTIONS					
	April 1	, 2017 Proj	ection	April 1	, 2020 Popi	ulation		ange from	•				
		Counts			Projections		2017	to April 1,	2020				
					OPULATIO	N							
				Α	LL RACES								
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	11,998	6,342	5,656	13,182	6,927	6,255	10%	9%	11%				
65-69	12,035	6,429	5,606	12,896	6,766	6,130	7%	5%	9%				
70-74	10,497	5,618	4,879	11,775	6,333	5,442	12%	13%	12%				
75-79	8,324	4,428	3,896	9,314	4,969	4,345	12%	12%	12%				
80-84	3,198	3,375	2,823	6,468	3,520	2,948	102%	4%	4%				
85+	7,167	4,294	2,873	7,714	4,641	3,073	8%	8%	7%				
TOTAL 60+	53,219	30,486	25,733	61,349	33,156	28,193	15%	9%	10%				
		NON-HISPANIC WHITE											
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	10,399	5,590	4,890	11,232	5,937	5,295	8%	6%	8%				
65-69	10,800	5,758	5,042	11,428	5,978	5,450	6%	4%	8%				
70-74	9,619	5,127	4,492	10,703	5,733	4,970	11%	12%	11%				
75-79	7,732	4,104	3,628	8,603	4,564	4,038	11%	11%	11%				
80-84	5,837	3,177	2,660	6,049	3,291	2,758	4%	4%	4%				
85+	6,844	4,092	2,752	7,338	4,412	2,926	7%	8%	6%				
TOTAL 60+	51,231	27,848	23,464	55,353	29,915	25,437	8%	7%	8%				
				NON-HI	SPANIC BL	АСК							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	754	410	344	882	477	405	17%	16%	18%				
65-69	578	317	261	672	369	303	16%	16%	16%				
70-74	415	231	184	503	278	225	21%	20%	22%				
75-79	277	151	126	321	178	143	16%	18%	13%				
80-84	169	93	76	184	105	79	9%	13%	4%				
85+	167	109	58	189	118	71	13%	8%	22%				
TOTAL 60+	2,360	1,311	1,049	2,751	1,525	1,226	17%	16%	17%				

	INDIAN RIVER COUNTY 2017 AND 2020 POPULATION PROJECTIONS												
	April 1,	2017 Proje Counts	ection	• •	020 Popula ojections	ation	U	e from Apr April 1, 202					
				60+ P	OPULATIO	N							
_				н	ISPANIC								
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	707	349	358	909	428	481	29%	23%	34%				
65-69	523	284	239	650	342	308	24%	20%	29%				
70-74	384	217	167	477	272	205	24%	25%	23%				
75-79	273	147	126	340	196	144	25%	33%	14%				
80-84	163	87	76	203	104	99	25%	20%	30%				
85+	134	81	53	161	97	64	20%	20%	21%				
TOTAL 60+	2,184	1,165	1,019	2,740	1,439	1,301	25%	24%	28%				
		WHITE											
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	11,064	5,839	5,225	12,087	6,342	5,745	9%	9%	10%				
65-69	11,292	6,026	5 <i>,</i> 266	12,040	6,302	5,738	7%	5%	9%				
70-74	9,980	5,332	4,648	11,153	5,991	5,162	12%	12%	11%				
75-79	7,989	4,243	3,746	8,923	4,749	4,174	12%	12%	11%				
80-84	5,990	3,259	2,731	6,239	3,389	2,850	4%	4%	4%				
85+	6,971	4,169	2,802	7,490	4,504	2,986	7%	8%	7%				
TOTAL 60+	53 <i>,</i> 286	28,868	24,418	57,932	31,277	26,655	9%	8%	9%				
					BLACK								
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	788	427	361	923	496	427	17%	16%	18%				
65-69	605	331	274	703	384	319	16%	16%	16%				
70-74	434	241	193	525	290	235	21%	20%	22%				
75-79	289	158	131	335	187	148	16%	18%	13%				
80-84	176	97	79	192	110	82	9%	13%	4%				
85+	174	113	61	196	122	74	13%	8%	21%				
TOTAL 60+	2,466	1,367	1,099	2,874	1,589	1,285	17%	16%	17%				

			/ER COUM	NTY 2017 A	ND 2020 P	OPULAT	ON PROJ	ECTIONS				
	April 1,	2017 Proje	ection	April 1, 2	020 Popula	ation	% Change from April 2017					
		Counts		Pr	ojections		to April 1, 2020					
	60+ POPULATION											
		NON-WHITE										
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	934	503	431	1,095	585	510	17%	16%	18%			
65-69	743	403	340	856	464	392	15%	15%	15%			
70-74	517	286	231	622	342	280	20%	20%	21%			
75-79	335	185	150	391	220	171	17%	19%	14%			
80-84	208	116	92	229	131	98	10%	13%	7%			
85+	196	125	71	224	137	87	14%	10%	23%			
TOTAL 60+	2,933	1,618	1,315	3,417	1,879	1,538	17%	16%	17%			

	IN	DIAN RIV	ER COUN	ITY 2020	AND 203	0 POPUL		PROJECTI	ONS			
	April 1,	2020 Proj	ection	April 1	, 2030 Popi	ulation	% Chan	ge from Ap	oril 2020 to			
		Counts			Projections	;		April 1, 20	30			
				60+	POPULAT	ION						
					ALL RACES							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	13,182	6,927	6,255	12,231	6,453	5,778	-7%	-7%	-8%			
65-69	12,896	6,766	6,130	15,500	8 <i>,</i> 026	7,474	20%	19%	22%			
70-74	11,775	6,333	5,442	15 <i>,</i> 354	7,929	7,425	30%	25%	36%			
75-79	9,314	4,969	4,345	12,884	6,723	6,161	38%	35%	42%			
80-84	6,468	3,520	2,948	9,759	5 <i>,</i> 388	4,371	51%	53%	48%			
85+	7,714	4,641	3,073	10,058	6,093	3 <i>,</i> 965	30%	31%	29%			
TOTAL 60+	61,349	33,156	28,193	75,786	40,612	35,174	24%	22%	25%			
		NON-HISPANIC WHITE										
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	11,232	5 <i>,</i> 937	5,295	9,715	5,131	4,584	-14%	-14%	-13%			
65-69	11,428	5 <i>,</i> 978	5,450	13 <i>,</i> 045	6,731	6,314	14%	13%	16%			
70-74	10,703	5,733	4,970	13,398	6,915	6,483	25%	21%	30%			
75-79	8,603	4,564	4,039	11,568	5,990	5,578	34%	31%	38%			
80-84	6,049	3,291	2,758	8,970	4,918	4,052	48%	49%	47%			
85+	7,338	4,412	2,926	9,427	5,706	3,721	28%	29%	27%			
TOTAL 60+	55 <i>,</i> 353	29,915	25,438	66,123	35 <i>,</i> 391	30,732	19%	18%	21%			
				NON	HISPANIC	BLACK	-	,				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	882	477	405	891	508	383	1%	6%	-5%			
65-69	672	369	303	942	536	406	40%	45%	34%			
70-74	503	278	225	811	444	367	61%	60%	63%			
75-79	321	178	143	548	306	242	71%	72%	69%			
80-84	184	105	79	329	194	135	79%	85%	71%			
85+	189	118	71	273	170	103	44%	44%	45%			
TOTAL 60+	2,751	1,525	1,226	3,794	2,158	1,636	38%	42%	33%			
					HISPANIC							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	909	428	481	1,472	727	745	62%	70%	55%			
65-69	650	342	308	1,352	668	684	108%	95%	122%			
70-74	477	272	205	1007	494	513	111%	82%	150%			
75-79	340	196	144	674	374	300	98%	91%	108%			
80-84	203	104	99	404	243	161	99%	134%	63%			
85+	161	97	64	311	188	123	93%	94%	92%			
TOTAL 60+	2,740	1,439	1,301	5,220	2,694	2,526	91%	87%	94%			

	INDIAN RIVER COUNTY 2020 AND 2030 POPULATION PROJECTIONS											
	April 1,	2020 Proj	ection	April 1	, 2030 Pop	ulation	% Chan	ge from A	oril 2020 to			
		Counts			Projection	5		April 1, 20	)30			
				60+	POPULAT	ION						
					WHITE			I				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	12,087	6,342	5,745	11,100	5,819	5,281	-8%	-8%	-8%			
65-69	12,040	6,302	5,738	14,317	7,363	6,954	19%	17%	21%			
70-74	11,153	5,991	5,162	14,345	7,382	6,963	29%	23%	35%			
75-79	8,923	4,749	4,174	12,202	6,343	5,859	37%	34%	40%			
80-84	6,239	3,389	2,850	9,351	5,148	4,203	50%	52%	47%			
85+	7,490	4,504	2,986	9,718	5 <i>,</i> 883	3,835	30%	31%	28%			
TOTAL 60+	57,932	31,277	26,655	71,033	37,938	33,095	23%	21%	24%			
	BLACK											
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	923	496	427	946	533	413	2%	7%	-3%			
65-69	703	384	319	993	559	434	41%	46%	36%			
70-74	525	290	235	848	461	387	62%	59%	65%			
75-79	335	187	148	573	319	254	71%	71%	72%			
80-84	192	110	82	344	203	141	79%	85%	72%			
85+	196	122	74	284	176	108	45%	44%	46%			
TOTAL 60+	2,874	1,589	1,285	3,988	2,251	1,737	39%	42%	35%			
					NON-WHIT	E						
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	1,095	585	510	1,131	634	497	3%	8%	-3%			
65-69	856	464	392	1,183	663	520	38%	43%	33%			
70-74	622	342	280	1,009	547	462	62%	60%	65%			
75-79	391	220	171	682	380	302	74%	73%	77%			
80-84	229	131	98	408	240	168	78%	83%	71%			
85+	224	137	87	340	210	130	52%	53%	49%			
TOTAL 60+	3,417	1,879	1,538	4,753	2,674	2,079	39%	42%	35%			

	11		/ER COU	INTY 2030	) AND 204	10 POPUL	ATION P	ROJECTIO	NS		
	April 1	, 2030 Proj	ection	April 1	, 2040 Popu	ulation	% Chang	ge from Apr	il 2030 to		
		Counts			Projections			April 1, 204	0		
				60	+ POPULA	TION					
					ALL RACE						
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	12,231	6,453	5,778	11,434	5,994	5,440	-7%	-7%	-6%		
65-69	15,500	8 <i>,</i> 026	7,474	12,798	6,582	6,216	-17%	-18%	-17%		
70-74	15,354	7,929	7,425	14,292	7,424	6,868	-7%	-6%	-8%		
75-79	12,884	6,723	6,161	15,900	8,196	7,704	23%	22%	25%		
80-84	9,759	5,388	4,371	13,288	7,057	6,231	36%	31%	43%		
85+	10,058	6,093	3,965	14,671	8,834	5 <i>,</i> 837	46%	45%	47%		
TOTAL 60+	75,786	40,612	35,174	82,383	44,087	38,296	9%	9%	9%		
·	NON-HISPANIC WHITE										
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	9,715	5,131	4,584	8,616	4,565	4,051	-11%	-11%	-12%		
65-69	13,045	6,731	6,314	10,040	5,149	4,891	-23%	-24%	-23%		
70-74	13,398	6,915	6,483	11,844	6,108	5,736	-12%	-12%	-12%		
75-79	11,568	5 <i>,</i> 990	5,578	13,742	7,017	6,725	19%	17%	21%		
80-84	8,970	4,918	4,052	11,884	6,284	5,600	32%	28%	38%		
85+	9,427	5,706	3,721	13,561	8,148	5,413	44%	43%	45%		
TOTAL 60+	66,123	35,391	30,732	69 <i>,</i> 687	37,271	32,416	5%	5%	5%		
·			-	NON	I-HISPANIC	BLACK		T			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	891	508	383	964	533	431	8%	5%	13%		
65-69	942	536	406	869	503	366	-8%	-6%	-10%		
70-74	811	444	367	779	450	329	-4%	1%	-10%		
75-79	548	306	242	723	421	302	32%	38%	25%		
80-84	329	194	135	522	306	216	59%	58%	60%		
85+	273	170	103	458	285	173	68%	68%	68%		
TOTAL 60+	3,794	2,158	1,636	4,315	2,498	1,817	14%	16%	11%		
					HISPANIC	2					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	1,472	727	745	1,488	805	884	1%	11%	19%		
65-69	1,352	668	684	1,276	844	897	-6%	26%	31%		
70-74	1,007	494	513	909	789	747	-10%	60%	46%		
75-79	674	374	300	564	686	625	-16%	83%	108%		
80-84	404	243	161	312	414	379	-23%	70%	135%		
85+	311	188	123	274	353	222	-12%	88%	80%		
TOTAL 60+	5,220	2,694	2,526	4,823	3,891	3,754	-8%	44%	49%		

	INDIAN RIVER COUNTY 2030 AND 2040 POPULATION PROJECTIONS										
	April 1	L, 2030 Pro	jection	April	1, 2040 Pop	oulation	% Chan	ge from Apr			
		Counts			Projection			April 1, 204	0		
				60	+ POPULA	TION					
		- ·			WHITE						
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	11,100	5,819	5,281	10,204	5,326	4,878	-8%	-8%	-8%		
65-69	14,317	7,363	6,954	11,677	5,947	5,730	-18%	-19%	-18%		
70-74	14,345	7,382	6,963	13,288	6,853	6,435	-7%	-7%	-8%		
75-79	12,202	6,343	5,859	14,976	7,666	7,310	23%	21%	25%		
80-84	9,351	5,148	4,203	12,629	6,675	5 <i>,</i> 954	35%	30%	42%		
85+	9,718	5 <i>,</i> 883	3,835	14,102	8,482	5,620	45%	44%	47%		
TOTAL 60+	71,033	37,938	33,095	76,876	40,949	35,927	8%	8%	9%		
	BLACK										
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	946	533	413	1,027	561	466	9%	5%	13%		
65-69	993	559	434	935	533	402	-6%	-5%	-7%		
70-74	848	461	387	837	478	359	-1%	4%	-7%		
75-79	573	319	254	772	445	327	35%	39%	29%		
80-84	344	203	141	552	321	231	60%	58%	64%		
85+	284	176	108	479	297	182	69%	69%	69%		
TOTAL 60+	3,988	2,251	1,737	4,602	2,635	1,967	15%	17%	13%		
					NON-WHI	TE					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	1,131	634	497	1,230	668	562	9%	5%	13%		
65-69	1,183	663	520	1,121	635	486	-5%	-4%	-7%		
70-74	1,009	547	462	1,004	571	433	0%	4%	-6%		
75-79	682	380	302	924	530	394	35%	39%	30%		
80-84	408	240	168	659	382	277	62%	59%	65%		
85+	340	210	130	569	352	217	67%	68%	67%		
TOTAL 60+	4,753	2,674	2,079	5 <i>,</i> 507	3,138	2,369	16%	17%	14%		

		MA	RTIN COU	INTY 2017	7 AND 2020	POPULATIO	N PROJEC	TIONS	
	April 1	, 2017 Proj	ection	April	1, 2020 Pop		-	ge from Apri	
		Counts			Projection	<b>_</b>		April 1, 202	0
					60+ POPUL				
					ALL RAC				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	12,552	6,534	6,018	14,009	7,185	6,824	12%	10%	13%
65-69	12,098	6,299	5,799	12,820	6,685	6,135	6%	6%	6%
70-74	10,815	5,687	5,128	11,652	6,032	5,620	8%	6%	10%
75-79	8,704	4,642	4,062	9,720	5,251	4,469	12%	13%	10%
80-84	6,413	3,456	2,957	6,664	3,581	3,083	4%	4%	4%
85+	7,522	4,470	3,052	8,080	4,804	3,276	7%	7%	7%
TOTAL 60+	58,104	31,088	27,016	62 <i>,</i> 945	33,538	29,407	8%	8%	9%
					N-HISPANI				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	11,334	5,950	5,384	12,468	6,450	6,018	10%	8%	12%
65-69	11,242	5,863	5,379	11,840	6,199	5 <i>,</i> 641	5%	6%	5%
70-74	10,209	5,347	4,862	10,930	5,638	5,292	7%	5%	9%
75-79	8,316	4,413	3,903	9,252	4,975	4,277	11%	13%	10%
80-84	6,167	3,313	2,854	6,404	3,421	2,983	4%	3%	5%
85+	7,258	4,300	2 <i>,</i> 958	7,766	4,607	3,159	7%	7%	7%
TOTAL 60+	54,526	29,186	25,340	58,660	31,290	27,370	8%	7%	8%
					DN-HISPANI	C BLACK			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	463	221	242	557	272	285	20%	23%	18%
65-69	347	169	178	397	188	209	14%	11%	17%
70-74	242	133	109	299	163	136	24%	23%	25%
75-79	158	92	66	171	102	69	8%	11%	5%
80-84	95	56	39	108	63	45	14%	13%	15%
85+	95	60	35	104	65	39	9%	8%	11%
TOTAL 60+	1,400	731	669	1,636	853	783	17%	17%	17%
					HISPAN	IC		I	
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	602	281	321	808	367	441	34%	31%	37%
65-69	399	203	196	462	230	232	16%	13%	18%
70-74	296	166	130	341	182	159	15%	10%	22%
75-79	184	113	71	248	147	101	35%	30%	42%
80-84	125	71	54	123	79	44	-2%	11%	-19%
85+	151	98	53	188	117	71	25%	19%	34%
TOTAL 60+	1,757	932	825	2,170	1,122	1,048	24%	20%	27%

		MARTIN COUNTY 2017 AND 2020 POPULATION PROJECTIONS											
	April	1, 2017 Pro	jection	Apr	il 1, 2020 P	-	% Char	ige from Ap					
		Counts			Projecti			April 1, 20	20				
					60+ POPUL								
_	_	-	_	-	WHIT	<b>I</b>	-		-				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	11,865	6,201	5,664	13,181	6,778	6,403	11%	9%	13%				
65-69	11,595	6,045	5,550	12,248	6,404	5,844	6%	6%	5%				
70-74	10,470	5,495	4,975	11,231	5,800	5,431	7%	6%	9%				
75-79	8,479	4,514	3 <i>,</i> 965	9,471	5,106	4,365	12%	13%	10%				
80-84	6,277	3,376	2,901	6,513	3,492	3,021	4%	3%	4%				
85+	7,392	4,388	3,004	7,933	4,712	3,221	7%	7%	7%				
TOTAL 60+	56,078	30,019	26,059	60,577	32,292	28,285	8%	8%	9%				
	BLACK												
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	490	235	255	591	288	303	21%	23%	19%				
65-69	367	182	185	419	201	218	14%	10%	18%				
70-74	254	139	115	312	169	143	23%	22%	24%				
75-79	163	93	70	178	104	74	9%	12%	6%				
80-84	96	57	39	110	64	46	15%	12%	18%				
85+	101	65	36	111	71	40	10%	9%	11%				
TOTAL 60+	1,471	771	700	1,721	897	824	17%	16%	18%				
					NON-WH	IITE							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	687	333	354	828	407	421	21%	22%	19%				
65-69	503	254	249	572	281	291	14%	11%	17%				
70-74	345	192	153	421	232	189	22%	21%	24%				
75-79	225	128	97	249	145	104	11%	13%	7%				
80-84	136	80	56	151	89	62	11%	11%	11%				
85+	130	82	48	147	92	55	13%	12%	15%				
TOTAL 60+	2,026	1,069	957	2,368	1,246	1,122	17%	17%	17%				

		MARTI	N COUNT	Y 2020 AI	ND 2030 F	POPULA <sup>-</sup>	TION PRO	OJECTION	5
	April 1	L, 2020 Pro	ojection	• •	2030 Popu	lation	% Chan	ge from Apr	
		Counts			rojections + POPULA			April 1, 203	0
				60	ALL RACES				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	14,009	7,185	6,824	12,123	6,258	5,865	-13%	-13%	-14%
65-69	12,820	6,685	6,135	15,623	7,998	7,625	22%	20%	24%
70-74	11,652	6,032	5,620	15,284	7,740	7,544	31%	28%	34%
75-79	9,720	5,251	4,469	12,236	6,462	5,774	26%	23%	29%
80-84	6,664	3,581	3,083	9,303	4,983	4,320	40%	39%	40%
85+	8,080	4,804	3,276	10,428	6,244	4,184	29%	30%	28%
TOTAL 60+	62,945	33,538	29,407	74,997	39,685	35,312	19%	18%	20%
				NON	-HISPANIC	WHITE			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	12,468	6,450	6,018	10,117	5,344	4,773	-19%	-17%	-21%
65-69	11,840	6,199	5,641	13,927	7,149	6,778	18%	15%	20%
70-74	10,930	5,638	5,292	13,988	7,072	6,916	28%	25%	31%
75-79	9,252	4,975	4,277	11,485	6,057	5,428	24%	22%	27%
80-84	6,404	3,421	2,983	8,835	4,710	4,125	38%	38%	38%
85+	7,766	4,607	3,159	9,948	5,932	4,016	28%	29%	27%
TOTAL 60+	58,660	31,290	27,370	68,300	36,264	32,036	16%	16%	17%
				NON	-HISPANIC	BLACK			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	557	272	285	667	293	374	20%	8%	31%
65-69	397	188	209	628	289	339	58%	54%	62%
70-74	299	163	136	492	263	229	65%	61%	68%
75-79	171	102	69	307	166	141	80%	63%	104%
80-84	108	63	45	177	107	70	64%	70%	56%
85+	104	65	39	143	90	53	38%	38%	36%
TOTAL 60+	1,636	853	783	2,414	1,208	1,206	48%	42%	54%
r		<b>I</b>			HISPANIC	2		T	
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	808	367	441	1,167	536	631	44%	46%	43%
65-69	462	230	232	904	476	428	96%	107%	84%
70-74	341	182	159	674	329	345	98%	81%	117%
75-79	248	147	101	363	191	172	46%	30%	70%
80-84	123	79	44	242	134	108	97%	70%	145%
85+	188	117	71	299	196	103	59%	68%	45%
TOTAL 60+	2,170	1,122	1,048	3,649	1,862	1,787	68%	66%	71%

	MARTIN COUNTY 2020 AND 2030 POPULATION PROJECTIONS											
	April	1, 2020 Pr	ojection	April :	1, 2030 Pop		% Chai	nge from Ap				
		Counts			Projection			April 1, 2030				
				60 <sup>.</sup>	+ POPULA	ΓΙΟΝ						
					WHITE							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	13,181	6,778	6,403	11,147	5,823	5,324	-15%	-14%	-17%			
65-69	12,248	6,404	5,844	14,726	7,575	7,151	20%	18%	22%			
70-74	11,231	5,800	5,431	14,583	7,366	7,217	30%	27%	33%			
75-79	9,741	5,106	4,365	11,806	6,228	5,578	21%	22%	28%			
80-84	6,513	3,492	3,021	9,050	4,830	4,220	39%	38%	40%			
85+	7,933	4,712	3,221	10,213	6,107	4,106	29%	30%	27%			
TOTAL 60+	60,847	32,292	28,285	71,525	37,929	33,596	18%	17%	19%			
	BLACK											
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	591	288	303	706	310	396	19%	8%	31%			
65-69	419	201	218	659	304	355	57%	51%	63%			
70-74	312	169	143	515	273	242	65%	62%	69%			
75-79	178	104	74	319	172	147	79%	65%	99%			
80-84	110	64	46	186	112	74	69%	75%	61%			
85+	111	71	40	152	96	56	37%	35%	40%			
TOTAL 60+	1,721	897	824	2,537	1,267	1,270	47%	41%	54%			
					NON-WHIT	ΓE						
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	828	407	421	976	435	541	18%	7%	29%			
65-69	572	281	291	897	423	474	57%	51%	63%			
70-74	421	232	189	701	374	327	67%	61%	73%			
75-79	249	145	104	430	234	196	73%	61%	88%			
80-84	151	89	62	253	153	100	68%	72%	61%			
85+	147	92	55	215	137	78	46%	49%	42%			
TOTAL 60+	2,368	1,246	1,122	3,472	1,756	1,716	47%	41%	53%			

		MARTIN		Y 2030 A	ND 2040	POPULA	<b>FION PRO</b>	OJECTIONS	
	April 1	, 2030 Proj	jection	-	, 2040 Popi		% Chan	ge from Apri	
		Counts			Projections			April 1, 2040	)
				60	)+ POPULA				
	Tatal	Famala	Mala	Tatal	ALL RACE	1	Total	Famala	Mala
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	12,123	6,258	5,865	9,839	4,855	4,984	-19%	-22%	-15%
65-69 70-74	15,623	7,998	7,625	10,980	5,560	5,420	-30%	-30%	-29%
70-74	15,284 12,236	7,740 6,462	7,544 5,774	13,315 15,435	6,839 8,015	6,476 7,420	-13%	-12%	-14%
80-84	9,303	4,983	4,320	12,889	,		26%	24%	29%
85+	10,428	6,244	4,320	12,889	6,763 8,545	6,126 5,841	39%	36% 37%	42% 40%
TOTAL 60+	74,997	39,685	35,312	76,844	40,577	36,267	38%		
TOTAL 00+	74,997	59,065	55,512		40,377	,	2%	2%	3%
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	10,117	5,344	4,773	7,735	3,944	3,791	-24%	-26%	-21%
65-69	13,927	7,149	6,778	9,151	4,686	4,465	-24%	-20%	-34%
70-74	13,927	7,072	6,916	11,671	6,028	5,643	-34%	-34%	-34%
75-79	11,485	6,057	5,428	14,149	7,317	6,832	23%	-13%	26%
80-84	8,835	4,710	4,125	12,050	6,301	5,749	36%	34%	39%
85+	9,948	5,932	4,016	13,618	8,067	5,551	37%	36%	33%
TOTAL 60+	68,300	36,264	32,036	68,374	36,343	32,031	0%	0%	0%
101712 001	00,000	30,201	52,000		N-HISPANIC	,	070	070	070
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	667	293	374	615	244	371	-8%	-17%	-1%
65-69	628	289	339	552	237	315	-12%	-18%	-7%
70-74	492	263	229	551	266	285	12%	1%	24%
75-79	307	166	141	470	243	227	53%	46%	61%
80-84	117	107	70	297	176	121	154%	64%	73%
85+	143	90	53	241	149	92	69%	66%	74%
TOTAL 60+	2,354	1,208	1,206	2,726	1,315	1,411	16%	9%	17%
					HISPANI	С			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	1,167	536	631	1,331	596	735	14%	11%	16%
65-69	904	476	428	1,134	568	566	25%	19%	32%
70-74	674	329	345	948	467	481	41%	42%	39%
75-79	363	191	172	692	384	308	91%	101%	79%
80-84	242	134	108	463	235	228	91%	75%	111%
85+	299	196	103	463	286	177	55%	46%	72%
TOTAL 60+	3,649	1,862	1,787	5,031	2,536	2,495	38%	36%	40%

		MARTIN COUNTY 2030 AND 2040 POPULATION PROJECTIONS										
	April 1	L, 2030 Pro	ojection	April	1, 2040 Po	-	% Chai	nge from Ap				
		Counts			Projectio			April 1, 204	10			
				60	)+ POPULA	TION						
					WHITE							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	11,147	5,823	5,324	8,909	4,477	4,432	-20%	-23%	-17%			
65-69	14,726	7,575	7,151	10,153	5,194	4,959	-31%	-31%	-31%			
70-74	14,583	7,366	7,217	12,509	6,446	6,063	-14%	-12%	-16%			
75-79	11,806	6,228	5 <i>,</i> 578	14,762	7,661	7,101	25%	23%	27%			
80-84	9,050	4,830	4,220	12,459	6,511	5 <i>,</i> 948	38%	35%	41%			
85+	10,213	6,107	4,106	14,029	8,323	5,706	37%	36%	39%			
TOTAL 60+	71,525	37,929	33 <i>,</i> 596	72,821	38,612	34,209	2%	2%	2%			
					BLACK							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	706	310	396	659	262	397	-7%	-15%	0%			
65-69	659	304	355	591	255	336	-10%	-16%	-5%			
70-74	515	273	242	583	281	302	13%	3%	25%			
75-79	319	172	147	493	255	238	55%	48%	62%			
80-84	186	112	74	312	183	129	68%	63%	74%			
85+	152	96	56	256	158	98	68%	65%	75%			
TOTAL 60+	2,537	1,267	1,270	2,894	1,394	1,500	14%	10%	18%			
					NON-WHI	TE						
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	976	435	541	930	378	552	-5%	-13%	2%			
65-69	897	423	474	827	366	461	-8%	-13%	-3%			
70-74	701	374	327	806	393	413	15%	5%	26%			
75-79	430	234	196	673	354	319	57%	51%	63%			
80-84	253	153	100	430	252	178	70%	65%	78%			
85+	215	137	78	357	222	135	66%	62%	73%			
TOTAL 60+	3,472	1,756	1,716	4,023	1,965	2,058	16%	12%	20%			

		OKEECH	OBEE COU	NTY 2017	AND 2020 F	POPULA	TION PROJE	CTIONS		
	April :	1, 2017 Proj Counts	ection	• •	2020 Popul rojections	ation	-	e from Apri pril 1, 2020		
					POPULATIO	ON		<u> </u>		
					ALL RACES					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	2,443	1,199	1,244	2,649	1,307	1,342	8%	9%	8%	
65-69	2,216	1,111	1,105	2,293	1,129	1,164	3%	2%	5%	
70-74	1,907	950	957	1,966	982	984	3%	3%	3%	
75-79	1,512	756	756	1,589	791	798	5%	5%	6%	
80-84	989	486	503	1,101	569	532	11%	17%	6%	
85+	876	500	376	943	525	418	8%	5%	11%	
TOTAL 60+	9,943	5,002	4,941	10,541	5,303	5,238	6%	6%	6%	
		NON-HISPANIC WHITE								
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	2,009	1,033	976	2,152	1,116	1,036	7%	8%	6%	
65-69	1,903	971	932	1,932	987	945	2%	2%	1%	
70-74	1,696	852	844	1,719	858	861	1%	1%	2%	
75-79	1,389	700	689	1,439	722	717	4%	3%	4%	
80-84	922	453	469	1,029	535	494	12%	18%	5%	
85+	823	476	347	878	494	384	7%	4%	11%	
TOTAL 60+	8,742	4,485	4,257	9,149	4,712	4,437	5%	5%	4%	
				NON-H	ISPANIC B	LACK				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	118	44	74	136	53	83	15%	20%	12%	
65-69	103	46	57	108	42	66	5%	-9%	16%	
70-74	81	42	39	90	50	40	11%	19%	3%	
75-79	53	26	27	69	32	37	30%	23%	37%	
80-84	27	16	11	29	16	13	7%	0%	18%	
85+	17	8	9	20	11	9	18%	38%	0%	
TOTAL 60+	399	182	217	452	204	248	13%	12%	14%	
r					HISPANIC	-				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	286	107	179	329	122	207	15%	14%	16%	
65-69	186	79	107	229	87	142	23%	10%	33%	
70-74	107	48	59	134	64	70	25%	33%	19%	
75-79	61	25	36	70	31	39	15%	24%	8%	
80-84	38	16	22	40	16	24	5%	0%	9%	
85+	34	15	19	43	19	24	26%	27%	26%	
TOTAL 60+	712	290	422	845	339	506	19%	17%	20%	

		OKEECH	OBEE COU	NTY 2017	AND 2020 F	POPULAT	ION PROJE	CTIONS	
	April	1, 2017 Proj	ection	•	2020 Popu	lation		ge from Ap	
		Counts			rojections		to	April 1, 20	20
				60+	POPULATIO	ON			
					WHITE			<u> </u>	
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	2,283	1,135	1,148	2,468	1,233	1,235	8%	9%	8%
65-69	2,081	1,046	1,035	2,151	1,070	1,081	3%	2%	4%
70-74	1,799	898	901	1,847	919	928	3%	2%	3%
75-79	1,448	724	724	1,507	752	755	4%	4%	4%
80-84	958	468	490	1,067	550	517	11%	18%	6%
85+	855	490	365	919	512	407	7%	4%	12%
TOTAL 60+	9,424	4,761	4,663	9,959	5 <i>,</i> 036	4,923	6%	6%	6%
					BLACK				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	125	47	78	142	55	87	14%	17%	12%
65-69	106	49	57	112	45	67	6%	-8%	18%
70-74	83	44	39	92	52	40	11%	18%	3%
75-79	53	26	27	69	32	37	30%	23%	37%
80-84	27	16	11	29	16	13	7%	0%	18%
85+	19	9	10	21	11	10	11%	22%	0%
TOTAL 60+	413	191	222	465	211	254	13%	10%	14%
				Ν	ON-WHITE				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	160	64	96	181	74	107	13%	16%	11%
65-69	135	65	70	142	59	83	5%	-9%	19%
70-74	108	52	56	119	63	56	10%	21%	0%
75-79	64	32	32	82	39	43	28%	22%	34%
80-84	31	18	13	34	19	15	10%	6%	15%
85+	21	10	11	24	13	11	14%	30%	0%
TOTAL 60+	519	241	278	582	267	315	12%	11%	13%

	C	KEECHOE	BEE COU	NTY 2020	) AND 203		ATION P	ROJECTIO	NS
	April 1	, 2020 Proj	ection	-	2030 Popu	llation	-	ge from Apri	
		Counts			Projections + POPULA			April 1, 2030	)
				60	ALL RACE				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	2,649	1,307	1,342	2,417	1,119	1,298	-9%	-14%	-3%
65-69	2,293	1,129	1,164	2,660	1,316	1,344	16%	17%	15%
70-74	1,966	982	984	2,410	1,182	1,228	23%	20%	25%
75-79	1,589	791	798	1,809	880	929	14%	11%	16%
80-84	1,101	569	532	1,300	668	632	18%	17%	19%
85+	943	525	418	1,297	744	553	38%	42%	32%
TOTAL 60+	10,541	5,303	5,238	11,893	5,909	5 <i>,</i> 984	13%	11%	14%
				NON	I-HISPANIC	WHITE			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	2,152	1,116	1,036	1,847	886	961	-14%	-21%	-7%
65-69	1,932	987	945	2,199	1,121	1,078	14%	14%	14%
70-74	1,719	858	861	2,019	1,025	994	17%	19%	15%
75-79	1,439	722	717	1,564	778	786	9%	8%	10%
80-84	1,029	535	494	1,169	597	572	14%	12%	16%
85+	878	494	384	1,194	693	501	36%	40%	30%
TOTAL 60+	9,149	4,712	4,437	9,992	5,100	4,892	9%	8%	10%
				NON	I-HISPANIC	BLACK			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	136	53	83	108	38	70	-21%	-28%	-16%
65-69	108	42	66	112	55	57	4%	31%	-14%
70-74	90	50	40	126	52	74	40%	4%	85%
75-79	69	32	37	81	35	46	17%	9%	24%
80-84	29	16	13	48	27	21	66%	69%	62%
85+	20	11	9	31	16	15	55%	45%	67%
TOTAL 60+	452	204	248	506	223	283	12%	9%	14%
					HISPANIC	2			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	329	122	207	438	185	253	33%	52%	22%
65-69	229	87	142	323	124	199	41%	43%	40%
70-74	134	64	70	236	90	146	76%	41%	109%
75-79	70	31	39	146	58	88	109%	87%	126%
80-84	40	16	24	72	37	35	80%	131%	46%
85+	43	19	24	64	30	34	49%	58%	42%
TOTAL 60+	845	339	506	1,279	524	755	51%	55%	49%

	C	OKEECHOBEE COUNTY 2020 AND 2030 POPULATION PROJECTIONS										
	April	1, 2020 Pro	jection	April	1, 2030 Poj	oulation	% Chan	ge from Apr				
		Counts			Projection		April 1, 2030					
				60	+ POPULA	TION						
			F		WHITE							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	2,468	1,233	1,235	2,266	1,063	1,203	-8%	-14%	-3%			
65-69	2,151	1,070	1,081	2,508	1,239	1,269	17%	16%	17%			
70-74	1,847	919	928	2,245	1,111	1,134	22%	21%	22%			
75-79	1,507	752	755	1,704	834	870	13%	11%	15%			
80-84	1,067	550	517	1,239	633	606	16%	15%	17%			
85+	919	512	407	1,256	722	534	37%	41%	31%			
TOTAL 60+	9,959	5,036	4,923	11,218	5,602	5,616	13%	11%	14%			
		BLACK										
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	142	55	87	116	41	75	-18%	-25%	-14%			
65-69	112	45	67	118	58	60	5%	29%	-10%			
70-74	92	52	40	130	54	76	41%	4%	90%			
75-79	69	32	37	84	36	48	22%	13%	30%			
80-84	29	16	13	50	28	22	72%	75%	69%			
85+	21	11	10	33	17	16	57%	55%	60%			
TOTAL 60+	465	211	254	531	234	297	14%	11%	17%			
					NON-WHI	TE						
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	181	74	107	151	56	95	-17%	-24%	-11%			
65-69	142	59	83	152	77	75	7%	31%	-10%			
70-74	119	63	56	165	71	94	39%	13%	68%			
75-79	82	39	43	105	46	59	28%	18%	37%			
80-84	34	19	15	61	35	26	79%	84%	73%			
85+	24	13	11	41	22	19	71%	69%	73%			
TOTAL 60+	582	267	315	675	307	368	16%	15%	17%			

	(	OKEECHO	DBEE COU	NTY 2030	AND 2040	) POPUL	ATION P	ROJECTIO	NS
	April :	1, 2030 Pr	ojection	April 1,	2040 Popul	ation	% Chang	ge from Apr	il 2030 to
		Counts			Projections			April 1, 204	0
				60-	+ POPULAT	ION			
r		r			ALL RACES				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	2,417	1,119	1,298	2,372	1,151	1,221	-2%	3%	-6%
65-69	2,660	1,316	1,344	2,283	1,138	1,145	-14%	-14%	-15%
70-74	2,410	1,182	1,228	2,225	1,024	1,201	-8%	-13%	-2%
75-79	1,809	880	929	2,187	1,071	1,116	21%	22%	20%
80-84	1,300	668	632	1,684	857	827	30%	28%	31%
85+	1,297	744	553	1,664	956	708	28%	28%	28%
TOTAL 60+	11,893	5,909	5 <i>,</i> 984	12,415	6,197	6,218	4%	5%	4%
				NON	-HISPANIC V	VHITE			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	1,847	886	961	1,694	878	816	-8%	-1%	-15%
65-69	2,199	1,121	1,078	1,722	902	820	-22%	-20%	-24%
70-74	2,019	1,025	994	1,794	842	952	-11%	-18%	-4%
75-79	1,564	778	786	1,877	931	946	20%	20%	20%
80-84	1,169	597	572	1,474	765	709	26%	28%	24%
85+	1,194	693	501	1,488	868	620	25%	25%	24%
TOTAL 60+	9,992	5,100	4,892	10,049	5,186	4,863	1%	2%	-1%
				NON	-HISPANIC E	BLACK			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	108	38	70	136	54	82	26%	42%	17%
65-69	112	55	57	113	45	68	1%	-18%	19%
70-74	126	52	74	96	36	60	-24%	-31%	-19%
75-79	81	35	46	87	46	41	7%	31%	-11%
80-84	48	27	21	68	31	37	42%	15%	76%
85+	31	16	15	47	24	23	52%	50%	53%
TOTAL 60+	506	223	283	547	236	311	8%	6%	10%
					HISPANIC				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	438	185	253	510	203	307	16%	10%	21%
65-69	323	124	199	422	178	244	31%	44%	23%
70-74	236	90	146	313	135	178	33%	50%	22%
75-79	146	58	88	204	82	122	40%	41%	39%
80-84	72	37	35	126	52	74	75%	41%	111%
85+	64	30	34	118	57	61	84%	90%	79%
TOTAL 60+	1,279	524	755	1,693	707	986	32%	35%	31%

	(	OKEECHOBEE COUNTY 2030 AND 2040 POPULATION PROJECTIONS											
	April	1, 2030 P	•	April 1	L, 2040 Popu		% Chan	ge from Ap					
		Counts	5		Projections		April 1, 2040						
				60-		ON							
					WHITE			1					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	2,266	1,063	1,203	2,182	1,072	1,110	-4%	1%	-8%				
65-69	2,508	1,239	1,269	2,125	1,072	1,053	-15%	-13%	-17%				
70-74	2,245	1,111	1,134	2,094	971	1,123	-7%	-13%	-1%				
75-79	1,704	834	870	2,073	1,010	1,063	22%	21%	22%				
80-84	1,239	633	606	1,595	815	780	29%	29%	29%				
85+	1,256	722	534	1,600	922	678	27%	28%	27%				
TOTAL 60+	11,218	5,602	5,616	11,669	5,862	5,807	4%	5%	3%				
-		Г — П			BLACK								
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	116	41	75	145	58	87	25%	41%	16%				
65-69	118	58	60	121	49	72	3%	-16%	20%				
70-74	130	54	76	102	39	63	-22%	-28%	-17%				
75-79	84	36	48	90	47	43	7%	31%	-10%				
80-84	50	28	22	70	32	38	40%	14%	73%				
85+	33	17	16	49	25	24	48%	47%	50%				
TOTAL 60+	531	234	297	577	250	327	9%	7%	10%				
					NON-WHITE	<b>-</b>							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	151	56	95	190	79	111	26%	41%	17%				
65-69	152	77	75	158	66	92	4%	-14%	23%				
70-74	165	71	94	131	53	78	-21%	-25%	-17%				
75-79	105	46	59	114	61	53	9%	33%	-10%				
80-84	61	35	26	89	42	47	46%	20%	81%				
85+	41	22	19	64	34	30	56%	55%	58%				
TOTAL 60+	675	307	368	746	335	411	11%	9%	12%				

		PALN	I BEACH CO	UNTY 2017	AND 2020	POPULATI	ON PROJE	CTIONS		
	April 1	, 2017 Pro Counts	jection	-	2020 Popu rojections	lation	-	ge from Apr April 1, 202		
		counts				ON		April 1, 202	0	
					ALL RACES					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	92,769	49,289	43,480	101,780	53,665	48,115	10%	9%	11%	
65-69	87,243	47,355	39,888	92,953	50,104	42,849	7%	6%	7%	
70-74	76,154	41,715	34,439	84,361	45,962	38,399	11%	10%	11%	
75-79	60,692	33,602	27,090	67,967	37,505	30,462	12%	12%	12%	
80-84	45,756	26,088	19,668	47,125	26,837	20,288	3%	3%	3%	
85+	59,434	36,181	23,253	61,591	37,819	23,772	4%	5%	2%	
TOTAL 60+	422,048	234,230	187,818	455,777	251,892	203,885	8%	8%	9%	
		NON-HISPANIC WHITE								
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	66,088	35,038	31,050	70,288	37,082	33,206	6%	6%	7%	
65-69	67,357	36,362	30,995	69,061	36,919	32,142	3%	2%	4%	
70-74	61,822	33,682	28,140	67,407	36,472	30,935	9%	8%	10%	
75-79	50,535	27,800	22,735	56,103	30,728	25,375	11%	11%	12%	
80-84	38,897	22,039	16,858	38,995	22,033	16,962	0%	0%	1%	
85+	53,541	32,415	21,126	54,361	33,259	21,102	2%	3%	0%	
TOTAL 60+	338,240	187,336	150,904	356,215	196,493	159,722	5%	5%	6%	
				NON-	HISPANIC E	BLACK				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	12,461	6,791	5,670	14,493	7,814	6,679	16%	15%	18%	
65-69	9,438	5,042	4,396	11,422	6,188	5,234	21%	23%	19%	
70-74	6,413	3,480	2,933	7,750	4,110	3,640	21%	18%	24%	
75-79	4,352	2,414	1,938	5,108	2,860	2,248	17%	18%	16%	
80-84	2,700	1,563	1,137	3,243	1,846	1,397	20%	18%	23%	
85+	2,366	1,603	763	2,815	1,874	941	19%	17%	23%	
TOTAL 60+	37,730	20,893	16,837	44,831	24,692	20,139	19%	18%	20%	
					HISPANIC					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	11,917	6,225	5,692	14,405	7,387	7,018	21%	19%	23%	
65-69	8,774	5,033	3,741	10,489	5,901	4,588	20%	17%	23%	
70-74	6,774	3,942	2,832	7 <i>,</i> 854	4,673	3,181	16%	19%	12%	
75-79	5,086	3,010	2,076	5,919	3,467	2,452	16%	15%	18%	
80-84	3,690	2,225	1,465	4,335	2,653	1,682	17%	19%	15%	
85+	3,202	1,965	1,237	4,013	2,439	1,574	25%	24%	27%	
TOTAL 60+	39,443	22,400	17,043	47,015	26,520	20,495	19%	18%	20%	

		PALN	I BEACH CO	UNTY 2017	AND 2020	POPULATI	ON PROJE	CTIONS	
	April	1, 2017 Pro	ojection	April 1	, 2020 Popi	ulation	% Chan	ge from Apr	il 2017 to
		Counts			Projections			April 1, 202	0
				60+	POPULATI	ON			
					WHITE			[]	
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	77,020	40,785	36,235	83,501	43,902	39,599	8%	8%	9%
65-69	75,412	41,009	34,403	78,688	42,367	36,321	4%	3%	6%
70-74	68,042	37,322	30,720	74,619	40,787	33,832	10%	9%	10%
75-79	55,205	30,579	24,626	61,537	33 <i>,</i> 929	27,608	11%	11%	12%
80-84	42,286	24,093	18,193	42,977	24,482	18,495	2%	2%	2%
85+	56,482	34,229	22,253	58,048	35,511	22,537	3%	4%	1%
TOTAL 60+	374,447	208,017	166,430	399,370	220,978	178,392	7%	6%	7%
					BLACK				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	13,116	7,121	5,995	15,263	8,194	7,069	16%	15%	18%
65-69	9,954	5,321	4,633	12,014	6,503	5,511	21%	22%	19%
70-74	6,775	3,688	3,087	8,160	4,350	3,810	20%	18%	23%
75-79	4,655	2,590	2,065	5,445	3,052	2,393	17%	18%	16%
80-84	2,917	1,683	1,234	3,486	1,984	1,502	20%	18%	22%
85+	2,564	1,719	845	3,050	2,011	1,039	19%	17%	23%
TOTAL 60+	39,981	22,122	17,859	47,418	26,094	21,324	19%	18%	19%
				1	NON-WHITI	E			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	15,749	8,504	7,245	18,279	9,763	8,516	16%	15%	18%
65-69	11,831	6,346	5 <i>,</i> 485	14,265	7,737	6,528	21%	22%	19%
70-74	8,112	4,393	3,719	9,742	5,175	4,567	20%	18%	23%
75-79	5,487	3,023	2,464	6,430	3,576	2,854	17%	18%	16%
80-84	3,470	1,995	1,475	4,148	2,355	1,793	20%	18%	22%
85+	2,952	1,952	1,000	3 <i>,</i> 543	2,308	1,235	20%	18%	24%
TOTAL 60+	47,601	26,213	21,388	56,407	30,914	25,493	18%	18%	19%

	F	PALM BE	ACH COU	NTY 2020 A	ND 2030	POPULAT	TION PRO	DJECTIONS	
	April 1,	2020 Proj	ection	April 1, 2	2030 Popul	ation	% Chang	e from Apri	l 2020 to
		Counts			ojections			April 1, 203	0
				<b>60</b> +	POPULATIC	<b>DN</b>			
					LL RACES				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	101,780	53,665	48,115	95,762	50,895	44,867	-6%	-5%	-7%
65-69	92 <i>,</i> 953	50,104	42,849	111,781	60,037	51,744	20%	20%	21%
70-74	84,361	45,962	38,399	108,041	57 <i>,</i> 480	50,561	28%	25%	32%
75-79	67,967	37,505	30,462	91,477	48,870	41,607	35%	30%	37%
80-84	47,125	26,837	20,288	69,637	39,070	30,567	48%	46%	51%
85+	61,591	37,819	23,772	75,325	46,489	28,836	22%	23%	21%
TOTAL 60+	455,777	251,892	203,885	552,023	302,841	248,182	21%	20%	22%
		r		NON-H	ISPANIC W	HITE		<b>1</b>	
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	70,288	37,082	33,206	56,794	30,206	26,588	-19%	-19%	-20%
65-69	69,061	36,919	32,142	74,796	39,644	35,152	8%	7%	9%
70-74	67 <i>,</i> 407	36,472	30,935	78,683	41,516	37,167	17%	14%	20%
75-79	56,103	30,728	25,375	69,682	37,082	32,600	24%	21%	28%
80-84	38 <i>,</i> 995	22,033	16,962	56,108	31,090	25,018	44%	41%	47%
85+	54,361	33,259	21,102	62,532	38,522	24,010	15%	16%	14%
TOTAL 60+	356,215	196,493	159,722	398,595	218,060	180,535	12%	11%	13%
		1		NON-H	ISPANIC BL	ACK		<b>1</b>	
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	14,493	7,814	6,679	15,989	8,919	7,070	10%	14%	6%
65-69	11,422	6,188	5,234	15,768	8,617	7,151	38%	39%	37%
70-74	7,750	4,110	3,640	13,426	7,150	6,276	73%	74%	72%
75-79	5,108	2,860	2,248	9,629	5,269	4,360	89%	84%	94%
80-84	3,243	1,846	1,397	5,871	3,260	2,611	81%	77%	87%
85+	2,815	1,874	941	4,996	3,200	1,796	77%	71%	91%
TOTAL 60+	44,831	24,692	20,139	65,679	36,415	29,264	47%	47%	45%
				ŀ	IISPANIC				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	14,405	7,387	7,018	20,422	10,336	10,086	42%	40%	44%
65-69	10,489	5,901	4,588	18,696	10,391	8,305	78%	76%	81%
70-74	7 <i>,</i> 854	4,673	3,181	13,786	7,665	6,121	76%	64%	92%
75-79	5,919	3,467	2,452	9,626	5,672	3,954	63%	64%	61%
80-84	4,335	2,653	1,682	6,719	4,196	2,523	55%	58%	50%
85+	4,013	2,439	1,574	6,997	4,252	2,745	74%	74%	74%
TOTAL 60+	47,015	26,520	20,495	76,246	42,512	33,734	62%	60%	65%

	F	PALM BEACH COUNTY 2020 AND 2030 POPULATION PROJECTIONS											
	April 1	, 2020 Pro	jection	April 1, 2	2030 Popul	ation	-	e from Apri					
		Counts		-	rojections		4	April 1, 2030	)				
				60+	POPULATIC	)N							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	83,501	43,902	39,599	75,525	39,749	35,776	-10%	-9%	-10%				
65-69	78,688	42,367	36,321	91,956	49,238	42,718	17%	16%	18%				
70-74	74,619	40,787	33,832	91,336	48,593	42,743	22%	19%	26%				
75-79	61,537	33,929	27,608	78,522	42,319	36,203	28%	25%	31%				
80-84	42,977	24,482	18,495	62,281	34,965	27,316	45%	43%	48%				
85+	58,048	35,511	22,537	68,959	42,448	26,511	19%	20%	18%				
TOTAL 60+	399,370	220,978	178,392	468,579	257,312	211,267	17%	16%	18%				
					BLACK								
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	15,263	8,194	7,069	16,972	9,400	7,572	11%	15%	7%				
65-69	12,014	6,503	5,511	16,664	9,100	7,564	39%	40%	37%				
70-74	8,160	4,350	3,810	14,088	7,507	6,581	73%	73%	73%				
75-79	5,445	3,052	2,393	10,090	5,533	4,557	85%	81%	90%				
80-84	3,486	1,984	1,502	6,191	3,455	2,736	78%	74%	82%				
85+	3 <i>,</i> 050	2,011	1,039	5,330	3 <i>,</i> 398	1,932	75%	69%	86%				
TOTAL 60+	47,418	26,094	21,324	69 <i>,</i> 335	38 <i>,</i> 393	30,942	46%	47%	45%				
				N	ON-WHITE								
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male				
60-64	18,279	9,763	8,516	20,237	11,146	9,091	11%	14%	7%				
65-69	14,265	7,737	6,528	19,825	10,799	9,026	39%	40%	38%				
70-74	9,742	5,175	4,567	16,705	8,887	7,818	71%	72%	71%				
75-79	6,430	3,576	2,854	11,955	6,551	5,404	86%	83%	89%				
80-84	4,148	2,355	1,793	7,356	4,105	3,251	77%	74%	81%				
85+	3,543	2,308	1,235	6,366	4,041	2,325	80%	75%	88%				
TOTAL 60+	56,407	30,914	25,493	82,444	45,529	36,915	46%	47%	45%				

	P	ALM BEA		NTY 2030 AN	ND 2040 P	OPULAT	ION PRO	JECTIONS	5	
	April 1,	2030 Proje	ection	April 1, 2	2040 Popul	ation		e from Ap		
		Counts			ojections		April 1, 2040			
					OPULATIO	N				
		<b></b>	[]		L RACES	[		r r		
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	95,762	50,895	44,867	84,515	44,656	39,859	-12%	-12%	-11%	
65-69	111,781	60,037	51,744	92,278	49,639	42,639	-17%	-17%	-18%	
70-74	108,041	57,480	50,561	101,190	54,495	46,695	-6%	-5%	-8%	
75-79	90,477	48,870	41,607	111,429	60,037	51,392	23%	23%	24%	
80-84	69,637	39 <i>,</i> 070	30,567	93,577	51,325	42,252	34%	31%	38%	
85+	75,325	46,489	28,836	106,298	64 <i>,</i> 787	41,511	41%	39%	44%	
TOTAL 60+	551,023	302,841	248,182	589,287	324,939	264,348	7%	7%	7%	
		NON-HISPANIC WHITE								
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	56,794	30,206	26,588	43,213	22,586	20,627	-24%	-25%	-22%	
65-69	74,796	39,644	35,152	53 <i>,</i> 360	28,402	24,958	-29%	-28%	-29%	
70-74	78,683	41,516	37,167	66,267	35,249	31,018	-16%	-15%	-17%	
75-79	69,682	37,082	32,600	80,097	42,259	37,838	15%	14%	16%	
80-84	56,108	31,090	25,018	70,709	38,235	32,474	26%	23%	30%	
85+	62,532	38,522	24,010	84,757	51,413	33,344	36%	33%	39%	
TOTAL 60+	398,595	218,060	180,535	398,403	218,144	180,259	0%	0%	0%	
				NON-HI	SPANIC BL	ACK				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	15,989	8,919	7,070	16,716	9,394	7,322	5%	5%	4%	
65-69	15,768	8,617	7,151	15,919	8,834	7,085	1%	3%	-1%	
70-74	13,426	7,150	6,276	14,121	7,804	6,317	5%	9%	1%	
75-79	9,629	5 <i>,</i> 269	4,360	12,980	7,147	5 <i>,</i> 833	35%	36%	34%	
80-84	5,871	3,260	2,611	10,116	5 <i>,</i> 653	4,463	72%	73%	71%	
85+	4,996	3,200	1,796	9,221	5 <i>,</i> 800	3,421	85%	81%	90%	
TOTAL 60+	65,679	36,415	29,264	79,073	44,632	34,441	20%	23%	18%	
				Н	ISPANIC					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	20,422	10,336	10,086	21,914	11,166	10,748	7%	8%	7%	
65-69	18,696	10,391	8 <i>,</i> 305	20,454	10,983	9,471	9%	6%	14%	
70-74	13,786	7,665	6,121	18,545	10,188	8,357	35%	33%	37%	
75-79	9,626	5,672	3,954	16,277	9,482	6,795	69%	67%	72%	
80-84	6,719	4,196	2,523	11,135	6,529	4,606	66%	56%	83%	
85+	6,997	4,252	2,745	10,845	6,642	4,203	55%	56%	53%	
TOTAL 60+	76,246	42,512	33,734	99,170	54,990	44,180	30%	29%	31%	

	PALM BEACH COUNTY 2030 AND 2040 POPULATION PROJECTIONS									
	April 1,	2030 Proje	ection	April 1, 2	040 Popula	tion	% Change	e from Apr	il 2030 to	
		Counts			ojections		April 1, 2040			
				60+ P	OPULATIO	N				
					WHITE					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	75,525	39,749	35,776	63,313	32,895	30,418	-16%	-17%	-15%	
65-69	91,956	49,238	42,718	72,128	38,542	33,586	-22%	-22%	-21%	
70-74	91,336	48,593	42,743	83,287	44,656	38,631	-9%	-8%	-10%	
75-79	78,522	42,319	36,203	95,043	51,014	44,029	21%	21%	22%	
80-84	62,281	34,965	27,316	80,933	44,263	36,670	30%	27%	34%	
85+	68,959	42,448	26,511	94,718	57 <i>,</i> 545	37,173	37%	36%	40%	
TOTAL 60+	468,579	257,312	211,267	489,422	268,915	220,507	4%	5%	4%	
					BLACK					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	16,972	9,400	7,572	17,769	9,913	7,856	5%	5%	4%	
65-69	16,664	9,100	7,564	16,901	9,345	7,556	1%	3%	0%	
70-74	14,088	7,507	6,581	15,011	8,278	6,733	7%	10%	2%	
75-79	10,090	5 <i>,</i> 533	4,557	13,760	7,589	6,171	36%	37%	35%	
80-84	6,191	3,455	2,736	10,648	5,956	4,692	72%	72%	71%	
85+	5 <i>,</i> 330	3,398	1,932	9,739	6,109	3,630	83%	80%	88%	
TOTAL 60+	69,335	38 <i>,</i> 393	30,942	83,828	47,190	36,638	21%	23%	18%	
				NO	N-WHITE					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male	
60-64	20,237	11,146	9,091	21,202	11,761	9,441	5%	6%	4%	
65-69	19,825	10,799	9,026	20,150	11,097	9 <i>,</i> 053	2%	3%	0%	
70-74	16,705	8,887	7,818	17,903	9,839	8,064	7%	11%	3%	
75-79	11,955	6,551	5,404	16,386	9,023	7,363	37%	38%	36%	
80-84	7,356	4,105	3,251	12,644	7,062	5,582	72%	72%	72%	
85+	6,366	4,041	2,325	11,580	4,242	4,338	82%	5%	87%	
TOTAL 60+	82,444	45,529	36,915	99,865	53 <i>,</i> 024	43,841	21%	16%	19%	

		ST. LUCIE COUNTY 2017 AND 2020 POPULATION PROJECTIONS										
	April 1,	2017 Proje Counts	ection	-	2020 Popu rojections	lation		ange from to April 1,	-			
				60+ POPULATION								
				ALL	L RACES							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	20,290	10,715	9,575	22,925	12,053	10,872	13%	12%	14%			
65-69	19,154	10,088	9,066	20,443	10,803	9,640	7%	7%	6%			
70-74	15,931	8,480	7,451	17,846	9,410	8,436	12%	11%	13%			
75-79	12,076	6,384	5,692	13,229	7,113	6,116	10%	11%	7%			
80-84	8,443	4,542	3,901	8,897	4,752	4,145	5%	5%	6%			
85+	8,506	5,103	3,403	9,306	5,582	3,724	9%	9%	9%			
TOTAL 60+	84,400	45,312	39,088	92,646	49,713	42,933	10%	10%	10%			
				NON-HISP	PANIC WHI	TE						
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	14,707	7,685	7,022	16,179	8,427	7,752	10%	10%	10%			
65-69	14,479	7,518	6,961	14,916	7,743	7,173	3%	3%	3%			
70-74	12,502	6,574	5,928	13,695	7,107	6,588	10%	8%	11%			
75-79	9,852	5,177	4,675	10,634	5,675	4,959	8%	10%	6%			
80-84	7,122	3,796	3,326	7,370	3,899	3,471	3%	3%	4%			
85+	7,505	4,478	3,027	8,114	4,848	3,266	8%	8%	8%			
TOTAL 60+	66,167	35,228	30,939	70,908	37,699	33,209	7%	7%	7%			
				NON-HISI	PANIC BLA	СК						
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	3,164	1,716	1,448	3,711	2,039	1,672	17%	19%	15%			
65-69	2,755	1,531	1,224	3,251	1,804	1,447	18%	18%	18%			
70-74	1,988	1,105	883	2,440	1,379	1,061	23%	25%	20%			
75-79	1,300	701	599	1,498	814	684	15%	16%	14%			
80-84	736	421	315	872	487	385	18%	16%	22%			
85+	553	352	201	639	404	235	16%	15%	17%			
TOTAL 60+	10,496	5,826	4,670	12,411	6,927	5,484	18%	19%	17%			
				HIS	PANIC							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	2,053	1,094	959	2,613	1,335	1,278	27%	22%	33%			
65-69	1,577	852	725	1,887	1,042	845	20%	22%	17%			
70-74	1,216	670	546	1,439	764	675	18%	14%	24%			
75-79	800	437	363	950	541	409	19%	24%	13%			
80-84	509	276	233	565	311	254	11%	13%	9%			
85+	405	247	158	499	297	202	23%	20%	28%			
TOTAL 60+	6,560	3,576	2,984	7,953	4,290	3,663	21%	20%	23%			

		ST. LUCIE COUNTY 2017 AND 2020 POPULATION PROJECTIONS										
	April 1, 2	2017 Projec	ction	April 1, 20	20 Populat	ion %	-	e from Apri				
		Counts		-	ections		to April 1, 2020					
					PULATION							
				1	/HITE		1					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	16,577	8,681	7,896	18,559	9,642	8,917	12%	11%	13%			
65-69	15,916	8,294	7,622	16,635	8,692	7,943	5%	5%	4%			
70-74	13,610	7,184	6,426	15,007	7,803	7,204	10%	9%	12%			
75-79	10,581	5,575	5,006	11,499	6,167	5,332	9%	11%	7%			
80-84	7,585	4,047	3,538	7,885	4,182	3,703	4%	3%	5%			
85+	7,874	4,703	3,171	8,568	5,119	3,450	9%	9%	9%			
TOTAL 60+	72,143	38,484	33 <i>,</i> 659	78,153	41,605	36,549	8%	8%	9%			
				В	LACK	-		r				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	3,292	1,785	1,507	3,874	2,123	1,751	18%	19%	16%			
65-69	2,858	1,590	1,268	3,372	1,874	1,498	18%	18%	18%			
70-74	2,074	1,155	919	2,538	1,433	1,105	22%	24%	20%			
75-79	1,351	728	623	1,559	848	711	15%	16%	14%			
80-84	776	443	333	914	510	404	18%	15%	21%			
85+	583	371	212	675	426	249	16%	15%	17%			
TOTAL 60+	10,934	6,072	4,862	12,932	7,214	5,718	18%	19%	18%			
				NON	I-WHITE							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	3,713	2,034	1,679	4,366	2,411	1,955	18%	19%	16%			
65-69	3,238	1,794	1,444	3,808	2,111	1,697	18%	18%	18%			
70-74	2,321	1,296	1,025	2,839	1,607	1,232	22%	24%	20%			
75-79	1,495	809	686	1,730	946	784	16%	17%	14%			
80-84	858	495	363	1,012	570	442	18%	15%	22%			
85+	632	400	232	737	463	274	17%	16%	18%			
TOTAL 60+	12,257	6,828	5,429	14,492	8,108	6,384	18%	19%	18%			

	ST	LUCIE CO	DUNTY 2	020 AND 2	2030 POP	ULATIO	N PROJ	ECTIONS	
	April 1,	2020 Proje	ection	April 1,	2030 Popu	lation	% Ch	ange from	April
		Counts		Р	rojections		2020	to April 1,	2030
				60+ PC	PULATION				
				1	RACES				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	22,925	12,053	10,872	23,269	12,172	11,097	2%	1%	2%
65-69	20,443	10,803	9,640	27,065	14,172	12,893	32%	31%	34%
70-74	17,846	9,410	8,436	24,290	12,790	11,500	36%	36%	36%
75-79	13,229	7,113	6,116	17,969	9,542	8,427	36%	34%	38%
80-84	8,897	4,752	4,145	12,786	6,914	5,872	44%	45%	42%
85+	9,306	5,582	3,724	12,262	7,399	4,863	32%	33%	31%
TOTAL 60+	92,646	49,713	42,933	117,641	62,989	54,652	27%	27%	27%
				NON-HISE	PANIC WHI	TE			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	16,179	8,427	7,752	14,496	7,501	6,995	-10%	-11%	-10%
65-69	14,916	7,743	7,173	18,254	9,408	8,846	22%	22%	23%
70-74	13,695	7,107	6,588	16,991	8,764	8,227	24%	23%	25%
75-79	10,634	5,675	4,959	13,337	6,951	6,386	25%	22%	29%
80-84	7,370	3,899	3,471	10,109	5,369	4,740	37%	38%	37%
85+	8,114	4,848	3,266	10,302	6,200	4,102	27%	28%	26%
TOTAL 60+	70,908	37,699	33,209	83,489	44,193	39,296	18%	17%	18%
				NON-HIS	PANIC BLA	СК			
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	3,711	2,039	1,672	4,010	2,172	1,838	8%	7%	10%
65-69	3,251	1,804	1,447	4,399	2,478	1,921	35%	37%	33%
70-74	2,440	1,379	1,061	4,049	2,336	1,713	66%	69%	61%
75-79	1,498	814	684	2,728	1,530	1,198	82%	88%	75%
80-84	872	487	385	1,564	919	645	79%	89%	68%
85+	639	404	235	1,049	638	411	64%	58%	75%
TOTAL 60+	12,411	6,927	5,484	17,799	10,073	7,726	43%	45%	41%
				HIS	PANIC				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	2,613	1,335	1,278	4,340	2,264	2,076	66%	70%	62%
65-69	1,887	1,042	845	3,947	2,017	1,930	109%	94%	128%
70-74	1,439	764	675	2,822	1,437	1,385	96%	88%	105%
75-79	950	541	409	1,616	895	721	70%	65%	76%
80-84	565	311	254	947	526	421	68%	69%	66%
85+	499	297	202	800	492	308	60%	66%	52%
TOTAL 60+	7,953	4,290	3,663	14,472	7,631	6,841	82%	78%	87%

	ST	ST. LUCIE COUNTY 2020 AND 2030 POPULATION PROJECTIONS										
	April 1, 2	2020 Projec	tion	April 1, 20	30 Populat	ion %	-	from Apri				
		Counts			ections		to April 1, 2030					
					PULATION							
				Т	/HITE							
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	18,559	9,642	8,917	18,450	9,563	8,887	-1%	-1%	0%			
65-69	16,635	8,692	7,943	21,851	11,246	10,605	31%	29%	34%			
70-74	15,007	7,803	7,204	-	10,072	9,489	30%	29%	32%			
75-79	11,499	6,167	5,332	14,809	7,766	7,043	29%	26%	32%			
80-84	7,885	4,182	3,703	10,972	5,848	5,124	39%	40%	38%			
85+	8,569	5,119	3,450	11,030	6,647	4,383	29%	30%	27%			
TOTAL 60+	78,154	41,605	36,549	96,673	51,142	45,531	24%	23%	25%			
				В	LACK		-					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	3,874	2,123	1,751	4,274	2,312	1,962	10%	9%	12%			
65-69	3,372	1,874	1,498	4,639	2,603	2,036	38%	39%	36%			
70-74	2,538	1,433	1,105	4,221	2,425	1,796	66%	69%	63%			
75-79	1,559	848	711	2,827	1,586	1,241	81%	87%	75%			
80-84	914	510	404	1,622	952	670	77%	87%	66%			
85+	675	426	249	1,098	668	430	63%	57%	73%			
TOTAL 60+	12,932	7,214	5,718	18,681	10,546	8,135	44%	46%	42%			
				NON	I-WHITE		•					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male			
60-64	4,366	2,411	1,955	4,819	2,609	2,210	10%	8%	13%			
65-69	3,808	2,111	1,697	5,214	2,926	2,288	37%	39%	35%			
70-74	2,839	1,607	1,232	4,729	2,718	2,011	67%	69%	63%			
75-79	1,730	946	784	3,160	1,776	1,384	83%	88%	77%			
80-84	1,012	570	442	1,814	1,066	748	79%	87%	69%			
85+	737	463	274	1,232	752	480	67%	62%	75%			
TOTAL 60+	14,492	8,108	6,384	20,968	11,847	9,121	45%	46%	43%			

	ST	LUCIE CO	DUNTY 2	030 AND 2	2040 POP	ULATIO	N PROJ	ECTIONS			
	April 1,	2030 Proje	ection	April 1,	2040 Popu	lation	% Ch	ange from	April		
		Counts		Р	rojections		2030 to April 1, 2040				
				60+ PC	60+ POPULATION						
				ALL	RACES						
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	23,269	12,172	11,097	24,080	12,566	11,514	3%	3%	4%		
65-69	27,065	14,172	12,893	25,327	13,493	11,834	-6%	-5%	-8%		
70-74	24,290	12,790	11,500	24,648	12,918	11,730	1%	1%	2%		
75-79	17,969	9,542	8,427	24,162	12,708	11,454	34%	33%	36%		
80-84	12,786	6,914	5,872	17,912	9,673	8,239	40%	40%	40%		
85+	12,262	7,399	4,863	17,388	10,458	6,930	42%	41%	43%		
TOTAL 60+	117,641	62 <i>,</i> 989	54,652	133,517	71,816	61,701	13%	14%	13%		
				NON-HIS	PANIC WHI	TE					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	14,496	7,501	6,995	13,441	6,874	6,567	-7%	-8%	-6%		
65-69	18,254	9,408	8,846	14,801	7,647	7,154	-19%	-19%	-19%		
70-74	16,991	8,764	8,227	15,557	7,971	7,586	-8%	-9%	-8%		
75-79	13,337	6,951	6,386	16,980	8,786	8,194	27%	26%	28%		
80-84	10,109	5,369	4,740	13,281	7,012	6,269	31%	31%	32%		
85+	10,302	6,200	4,102	14,023	8,381	5,642	36%	35%	38%		
TOTAL 60+	83 <i>,</i> 489	44,193	39,296	88,083	46,671	41,412	6%	6%	5%		
				NON-HIS	PANIC BLA	СК					
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	4,010	2,172	1,838	4,538	2,465	2,073	13%	13%	13%		
65-69	4,399	2,478	1,921	4,596	2,636	1,960	4%	6%	2%		
70-74	4,049	2,336	1,713	4,207	2,380	1,827	4%	2%	7%		
75-79	2,728	1,530	1,198	3,602	2,058	1,544	32%	35%	29%		
80-84	1,564	919	645	2,602	1,557	1,045	66%	69%	62%		
85+	1,049	638	411	1,899	1,176	723	81%	84%	76%		
TOTAL 60+	17,799	10,073	7,726	21,444	12,272	9,172	20%	22%	19%		
				HIS	PANIC						
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male		
60-64	4,340	2,264	2,076	5,622	2,960	2,662	30%	31%	28%		
65-69	3,947	2,017	1,930	5,443	2,924	2,519	38%	45%	31%		
70-74	2,822	1,437	1,385	4,439	2,309	2,130	57%	61%	54%		
75-79	1,616	895	721	3,199	1,641	1,558	98%	83%	116%		
80-84	947	526	421	1,753	935	818	85%	78%	94%		
85+	800	492	308	1,264	773	491	58%	57%	59%		
TOTAL 60+	14,472	7,631	6,841	21,720	11,542	10,178	50%	51%	49%		

	ST	LUCIE CO	DUNTY	2030 AND	2040 POP	ULATIO	N PROJ	ECTIONS	
	April 1, 2	2030 Proje	ction	April 1, 20	40 Populat	ion %	6 Change	from Apri	l 2030
		Counts			ections		to April 1, 2040		
					PULATION				
				1	/HITE			-	
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	18,450	9 <i>,</i> 563	8,887	18,564	9,570	8,994	1%	0%	1%
65-69	21,851	11,246	10,605	19,760	10,310	9,450	-10%	-8%	-11%
70-74	19,561	10,072	9,489	19,602	10,074	9,528	0%	0%	0%
75-79	14,809	7,766	7,043	19,894	10,280	9,614	34%	32%	37%
80-84	10,972	5,848	5,124	14,878	7,864	7,014	36%	34%	37%
85+	11,030	6,647	4,383	15,174	9,085	6,089	38%	37%	39%
TOTAL 60+	96,673	51,142	45,531	107,872	57,183	50,689	12%	12%	11%
				В	LACK				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	4,274	2,312	1,962	4,880	2,648	2,232	14%	15%	14%
65-69	4,639	2,603	2,036	4,928	2,817	2,111	6%	8%	4%
70-74	4,221	2,425	1,796	4,478	2,523	1,955	6%	4%	9%
75-79	2,827	1,586	1,241	3,796	2,159	1,637	34%	36%	32%
80-84	1,622	952	670	2,709	1,615	1,094	67%	70%	63%
85+	1,098	668	430	1,976	1,224	752	80%	83%	75%
TOTAL 60+	18,681	10,546	8,135	22,767	12,986	9,781	22%	23%	20%
				NON	I-WHITE				
Age Group	Total	Female	Male	Total	Female	Male	Total	Female	Male
60-64	4,819	2,609	2,210	5,516	2,966	2,520	14%	14%	14%
65-69	5,214	2,926	2,288	5 <i>,</i> 567	3,183	2,384	7%	9%	4%
70-74	4,729	2,718	2,011	5,046	2,844	2,202	7%	5%	9%
75-79	3,160	1,776	1,384	4,268	2,428	1,840	35%	37%	33%
80-84	1,814	1,066	748	3,034	1,809	1,225	67%	70%	64%
85+	1,232	752	480	2,214	1,373	841	80%	83%	75%
TOTAL 60+	20,968	11,847	9,121	25,645	14,603	11,012	22%	23%	21%

## APPENDIX B

## SEMI-ANNUAL REPORT OF PROVIDER OUTREACH

ATTACHMENT XVII

			<b>COUNCIL ON</b>	AGING OF MARTIN	
	PROVIDER	NAME	CO.		
	SEMI-ANNU	JAL PERIOD	Jan 2018- Jun	e 2018	-
			Total # of		
Type of Event		Location (Including	Participants	Individual Service	<b>Referral Sources or</b>
or Activity	Date	Zip Code)	Reached	Needs Identified	Information Provided
Fitness Fest	5/9/2018	Kane Center	20	N/A	Elder Helpline
				-	-
					Number of Persons
					Within the Targeted
					Population Reached
		OAA Target	ed Categories		through Outreach
					Activities During the
					last 6 months
	Older indiv	iduals residing in rural a	areas		0
		e older individuals			5
		e minorities			1
	-	iduals with the greates	t social need		0
	Older indiv	iduals with severe disal	hilities		1
		iduals with limited Engl			0
		iduals with Alzheimer's		lated disorders with	0
		al and organic brain dys			
	such individ				0
	Older indiv	iduals at risk for institu	tional placeme	nt	0
	Caregivers	of older individuals wit	h Alzheimer's c	lisease and related	
		vith neurological and or			0
	Grandpare	nts or older individuals	e caregivers who		
	-	e for children with seve	0	0	
	•				
		who are older individua			0
	-	who are older individua	-		
	(with partio	cular attention to low-in	ncome older in	dividuals)	0
	Caregivers	who are older individua	als who provide	e care to individuals	
	with severe	e disabilities, including o	children with se	evere disabilities.	0
	TOTAL: Ple	than one category			

## SEMI-ANNUAL REPORT OF PROVIDER OUTREACH ATTACHMENT XVII

PROVIDER NAME

Council on Aging St. Lucie

SEMI-ANNUAL PERIOD 2018 January-June								
			Location	Total # of		<b>Referral Sources or</b>		
Event	Type of Event		(Including	Participants	Individual Service	Information		
Number	or Activity	Date	Zip Code)	Reached	Needs Identified	Provided		
			Ft. Pierce	Viewing				
11	TV Show	1/24/18	34950	Audience	All COASL Services	COA, Elder Helpline		
	Health & Info		Ft. Pierce					
12	Fair	1/25/18	34982	50	All COASL Services	COA, Elder Helpline		
	Senior Care							
17	Event	2/7/18	PSL 34952	40	All COASL Services	COA Elder Helpline		
	Health &							
21	Resource F air	2/14/18	PSL 34952	70	All COASL Services	COA, Elder Helpline		
	Information							
22	Event	2/14/18	PSL 34953	20	All COASL Services	COA, Elder Helpline		
	Resource & Info							
25	Fair	2/17/18	PSL 34984	75	All COASL Services	COA, Elder Helpline		
	Senior Health &							
30	Info Festival	3/8/18	PSL 34952	150	All COASL Services	COA, Elder Helpline		
	Senior							
	Networking							
34	Event	3/14/18	PSL 34952	75	All COASL Services	COA Elder Helpline		
	Health & Info							
45	Fair	4/11/18	PSL 34986	75	All COASL Services	COA Elder Helpline		
	Information		Ft. Pierce					
51	Event	4/19/18	34947	75	All COASL Services	COA Elder Helpline		
	Health & Info							
54	Fair	4/20/18	PSL 34986	100	All COASL Services	COA Elder Helpline		
	WPSL Radio		Ft. Pierce	Listening				
55	Show	4/23/18	34950	Audience	All COASL Services	COA Elder Helpline		
	Information							
57	Event	4/25/18	PSL 34952	25	All COASL Services	COA, Elder Helpline		
	Information	- / - /						
65	Festival	5/6/18	PSL 34952	100	All COASL Services	COA Elder Helpline		
	Unity for	- / - /	Ft. Pierce					
68	Poverty/Info	5/10/18	34950	10	All COASL Services	COA Elder Helpline		
	Business							
70	Summit/Info	= /4 0 /4 0		100				
72	Event5/17/18	5/10/18	PSL 34952	100	All COASL Services	COA Elder Helpline		
	Law							
	Enforcement							
70	Info	F /17/40		50		COA Elder Haleler		
73	Event5/18/18	5/17/18	PSL 34952	50	All COASL Services	COA Elder Helpline		
0.1	Health & Info	E /20/40	Ft. Pierce	20		COA Eldor Halalina		
81	Fair	5/30/18	34950	30	All COASL Services	COA Elder Helpline		

	Hurricane			100		
83	Expo/Info Event	6/2/18	PSL 34952	100	All COASL Services	COA Elder Helpline
85	Health & Info Event	6/6/2018	PSL 34986	40	All COASL Services	COA Elder Helpline
			OAA Tai	ies	Number of Persons Within the Targeted Population Reached through Outreach Activities During the last 6 months	
				g in rural areas		20
		-	e older individ	luals		150
			e minorities			100
				e greatest soci		100
				vere disabilitie		20
		Older indiv	iduals with lin	nited English p	roficiency	15
					ase and related brain dysfunction	
			retakers of su		20	
		Older indiv	iduals at risk f	l placement	3	
		-			neimer's disease and organic brain	
		dysfunctio				15
				dividuals who are for childre		
		disabilities	·			2
		Caregivers need	who are older	20		
		-	who are older need (with par iduals)	20		
		individuals	with severe d	no provide care to uding children with	20	
		severe disabilities. TOTAL				20
		.01/12				

	SEMI-AN	NUAL REPOR	T OF PROVID	DER OUTREACH	ATTACHMENT XVII
	PROVIDER		MorseLife Ca	re Management	
	NAME		& Counseling	l l	
	SEMI-				
	ANNUAL				
	PERIOD		Jan 1- June 3	1, 2018	
Type of		Location	Total # of	Individual	
Event or		(Including	Participants	Service Needs	<b>Referral Sources or Information</b>
Activity	Date	Zip Code)	Reached	Identified	Provided
		Delray			
		Beach,			
Health Fair	8-Jan	33444	120	Caregiver	support groups, resources
		Boca Raton,			
Presentation	10-Jan	33434	100	Caregiver, CM	support groups, resources
		Boynton			
		Beach,		Grandparents,	
Presentation	12-Jan	33473	90	CG	CM, Grandparents
		Boynton			
		Beach,			
Presentation	15-Jan	33473	20	Caregiver, CM	support groups, resources
		Boca Raton,			
Presentation	18-Jan	33434	40	Caregiver	counseling, resources
		Riviera			
		Beach,		Grandparents,	
Health Fair	22-Jan	33419	25	CG	grandparents, counseling
		Boynton			
		Beach,			
Health Fair	26-Jan	33473	60	Caregiver	counseling, resources
		Royal Palm			
Meeting	5-Feb	Beach	20	Caregiver, CM	community resources
		Boynton			
		Beach,			
Health Fair	8-Feb	33473	80	Caregiver, CM	counseling, resources
		Lake Worth,			
Health Fair	13-Feb	33465	60	Caregiver, CM	community resources
		West Palm			
		Beach,			
Presentation	16-Feb	33417	60	Caregiver, CM	support groups, resources
		Delray			
	40 - 1	Beach,		Grandparents,	grandparents, community
Presentation	19-Feb	33445	50	СМ	resources
		Delray			
Description	22 <del>-</del> 1	Beach,		Carrie	
Presentation	22-Feb	33444	60	Caregiver	support groups, resources
		Riviera			
	0.84-	Beach,		Construct Cha	
Health Fair	8-Mar	33418	80	Caregiver, CM	counseling, resources

		Delray			
		Beach,	100		
Health Fair	19-Mar	33484	100	Caregiver, CM	counseling, support groups
Presentation	23-Mar	Boca Raton, 33434	80	Caregiver	counseling support groups
		Boca Raton,			
Presentation	26-Mar	33434	100	Caregiver, CM	support groups, counseling
		Delray			
Health Fair	28-Mar	Beach, 33445	125	Caregiver, CM	support groups, resources
		Boynton			
		Beach,		Grandparent,	
Presentation	31-Mar	33473	70	CG	counseling, resources
		Boynton Beach,			
Presentation	6-Apr	33473	80	Caregiver, CM	counseling, resources
		West Palm			
	•	Beach,			
Conference	9-Apr	33417 Delray	120	Caregiver, CM	education, resources
		Beach,		Grandparents,	grandparent, community
Presentation	16-Apr	33444	90	CG	resources
				Counseling, CG,	
Mitzvah Day	19-Apr	WPB, 33417	380	CM	Counseling resources
		Boynton Beach,			
Health Fair	23-Apr	33473	120	Caregiver	community resources,
Presentation	26-Apr	RPB, 33411	60	Caregiver, CM	counseling, community resources
		Boynton			
Health Fair		Beach, 33473	85	Caragivar CM	corogivor, community recourses
	4-May	Jupiter,	60	Caregiver, CM	caregiver, community resources counseling, caregiver, community
Health Fair	7-May	33468	120	Counseling, CG	resources
		Delray			
Deconstation	11	Beach,	70	Conscience CM	
Presentation	11-May	33444 Delray	70	Caregiver, CM	support groups, resources
		Beach,			
Health Fair	14-May	33444	125	Caregiver, CM	counseling, support groups
		Lake Worth,		Grandparent,	grandparents, community
Health Fair	17-May	33460 Boynton	100	CG	resources
		Boynton Beach,			caregiver, grandparents,
Health Fair	21-May	33473	90	Caregiver, CM	community resources
		Boynton			
Drocontation		Beach,	70	Grandparents,	
Presentation	25-May	33473	70	СМ	counseling, community resources

Presentation	28-May	RPB, 33411	70	Counseling	caregiver, community resources
		Boca Raton,		Grandparents,	
Presentation	29-May	33434	70	СМ	caregiver information
		Delray			
		Beach,		Grandparents,	grandparents, community
Health Fair	30-May	33446	90	CG	resources
		Riviera			
		Beach,			caregiver, grandparents,
Presentation	31-May	33418	100	Caregiver, CM	community resources
		Delray			
		Beach,	120	Grandparents,	en en la constante en esta
Health Fair	4-Jun	33444	130	СМ	counseling, support groups
		Boynton			
Duccontation	0.1	Beach,	100	Grandparents,	caregiver information, support
Presentation	8-Jun	33473	100	СМ	groups
		West Palm			
Hoolth Fair	11 Jun	Beach,	50	Carogivor CM	counseling, caregiver, community
Health Fair	11-Jun	33417	50	Caregiver, CM	resources
		Riviera			
Health Fair	15 100	Beach, 33418	100	Crandnaranta	caragivar support groups
	15-Jun	Wellington,	100	Grandparents	caregiver, support groups
Health Fair	18-Jun	33414	100	Caregiver, CM	counseling, community resources
Tieaití Tali	10-Juli	Delray	100	Caregiver, Civi	courseling, community resources
		Beach,			caregiver, grandparents,
Presentation	22-Jun	33444	50	Caregiver, CM	community resources
Tresentation	22 3011	Lake Worth,		Grandparents,	grandparents, community
Health Fair	27-Jun	33460	50	CM	resources
			1		Number of Persons Within the
					<b>Targeted Population Reached</b>
					through Outreach Activities
		OAA Targ	eted Categorie	es	During the last 6 months
	Older indiv	iduals residing i	n rural areas		
	Low income	e older individu	als		325
	Low income	e minorities			300
	Older indiv	iduals with the	260		
	Older indiv	iduals with seve	190		
	Older indiv	iduals with limi <sup>.</sup>	200		
	Older indiv	iduals with Alzh			
	disorders w	vith neurologica			
	(and the ca	retakers of suc			
	with neuro	logical and orga	anic brain dysfu	unction (and the	
	caretakers	of			
	such individ	duals)	700		

Old	ler individuals at risk for institutional placement	275
Car	egivers of older individuals with Alzheimer's disease	
and	d related disorders with neurological and organic brain	
dys	function	
dis	orders with neurological and organic brain dysfunction	725
Gra	andparents or older individuals who are relative	
car	egivers who provide care for children with severe	
dis	abilities.	
pro	wide care for children with severe disabilities.	125
Car	egivers who are older individuals with greatest social	
nee	ed	225
Car	egivers who are older individuals with greatest	
eco	pnomic need (with particular attention to low income	
old	er individuals).	
par	ticular attention to low income older individuals.	200
Car	egivers who are older individuals who provide care to	
ind	ividuals with severe disabilities including children with	
sev	vere disabilities.	
wit	h severe disabilities including children with severe	
dis	abilities.	140
ТО	TAL	3,665

# SEMI-ANNUAL REPORT OF PROVIDER OUTREACH ATTACHMENT XVII Morsel ife Care Management and

			MorseLife Ca	re Management and	
	PROVIDER NAME		Counseling		Treasure Coast
	SEMI-ANNU	IAL PERIOD	January-June	2018	
		Location	Total # of		Referral Sources
Type of Event or		(Including Zip	Participants	Individual Service	or Information
Activity	Date	Code)	Reached	Needs Identified	Provided
Community		Cascades, PSL			
event	1/29/2018	34986	100	caregiver SG	caregiver SG
Educational		TC Hospice,		caregiver	caregiver
Event	1/31/2018	Stuart 34997	35	counseling/ SG	counseling/ SG
					CG
Alz. Caregiver		Kane Center,		caregiver	counsel/support
Event	2/23/2018	Stuart 34997	80	counseling/SG	group
PD Educational		Kane Center,		caregiver	caregiver
Event	3/2/2018	Stuart 34997	100	counseling/SG	counseling/ SG
employee		Martin Memorial			caregiver
educational		Hospital, Stuart		caregiver/GRG	counseling/
event	5/9/2018	34995	45	counseling/SG	SG/helpline
		Kane Center,			
GRG event	5/17/2018	Stuart 34997	40	GRG counseling/SG	GRG counseling
		Suncoast, Fort			GRG
GRG event	6/28/2018	Pierce, 34982	20	GRG counseling/SG	counseling/SG

0AA Targeted Categories	Number of Persons Within the Targeted Population Reached through Outreach Activities During the last 6 months
Older individuals residing in rural areas	
Low-income older individuals	5
Low-income minorities	2
Older individuals with the greatest social need	10
Older individuals with severe disabilities	2
Older individuals with limited English proficiency	1
Older individuals with Alzheimer's disease and related disorders	
with neurological and organic brain dysfunction (and the caretakers	
of such individuals)	20
Older individuals at risk for institutional placement	
Caregivers of older individuals with Alzheimer's disease and related	
disorders with neurological and organic brain dysfunction	17
Grandparents or older individuals who are relative caregivers who	
provide care for children with severe disabilities	
Caregivers who are older individuals with greatest social need	
Caregivers who are older individuals with greatest economic need	
(with particular attention to low-income older individuals)	4
Caregivers who are older individuals who provide care to	
individuals with severe disabilities, including children with severe	
disabilities.	10
TOTAL	80

## SEMI-ANNUAL REPORT OF

#### **PROVIDER OUTREACH**

### PROVIDER NAME: Senior Resource

#### Association

#### SEMI-ANNUAL

PERIOD: January 1, 2018 - June 30, 2018

_	,	Location	-,	Individual	
		(Includin	Total # of	Service	
Type of Event or		g Zip	Participant	Needs	Referral Sources or Information
Activity	Date	Code)	s Reached	Identified	Provided
Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	1/3/2018	32963	1	HDM	ADI, EHEAP)
Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	1/4/2018	32966	1	HDM	ADI, EHEAP)
					ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	1/5/2018	32960	2	ADC	HCE,ADI, EHEAP)
					ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	1/8/2018		1	ADC	HCE,ADI, EHEAP)
Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	1/8/2018	32966	1	HDM	ADI, EHEAP)
					ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	1/8/2018	32960	2	ADC	HCE,ADI, EHEAP)
		32962,			
		32967,			
Emergency Meal		and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	1/9/2018	32960	3	HDM	ADI, EHEAP)
					SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
SRA Campus Tour	1/9/2018	32960	1	All	EHEAP)
Community					
Services Alliance	1/11/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Luncheon	8	32967	10	All	,
Coffee With The	1/12/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Mayor Breakfast	8	32960	5	All	,
Emergency Meal	1/13/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32962	1	HDM	ADI, EHEAP)
	1/16/201				ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	8	32958	1	ADC	
	1/16/201				ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	2	ADC	. , ,
Emergency Meal	1/17/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32966	1	HDM	ADI, EHEAP)
Healthy Start					
Coalition Ribbon	1/18/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Cutting Event	8	32960	5	All	,
	1/23/201				ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	8		1	ADC	HCE,ADI, EHEAP)

Emergency Meal	1/25/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	1	HDM	ADI, EHEAP)
	1/25/201				ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	2	ADC	HCE,ADI, EHEAP)
	1/25/201				ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	2	ADC	HCE,ADI, EHEAP)
Emergency Meal	1/26/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32962	1	HDM	ADI, EHEAP)
Emergency Meal	1/27/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32963	1	HDM	ADI, EHEAP)
	1/29/201				ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	2	ADC	HCE,ADI, EHEAP)
					ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	2/1/2018		1	ADC	HCE,ADI, EHEAP)
					ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	2/2/2018		1	ADC	HCE,ADI, EHEAP)
					ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	2/5/2018		1	ADC	HCE,ADI, EHEAP)
First Presbyterian					SRA, AAA/ADRC (OAA, CCE, HCE, ADI,
Church Health Fair	2/6/2018	32960	20	All	EHEAP)
SRA Radio Show					SRA, AAA/ADRC (OAA, CCE, HCE, ADI,
Recording	2/6/2018	32960	2	All	EHEAP)
					ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	2/8/2018	32958	1	ADC	HCE,ADI, EHEAP)
		32960			
Emergency Meal		and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	2/8/2018	32960	2	HDM	ADI, EHEAP)
Community					
Services Alliance					SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Luncheon	2/8/2018	32967	5	All	EHEAP)
Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	2/9/2018	32967	1	HDM	ADI, EHEAP)
	2/12/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
SRA Golf Event	8	32963	20	All	EHEAP)
		32962			
Emergency Meal	2/13/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32958	2	HDM	ADI, EHEAP)
Sebastian River					
Chamber of					
Commerce	2/13/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Luncheon	8	32958	5	All	EHEAP)
Emergency Meal	2/14/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32967	1	HDM	ADI, EHEAP)
Emergency Meal	2/16/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32962	1	HDM	ADI, EHEAP)
We Care	2/17/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Foundation Gala	8	32967	10	All	EHEAP)

Emergency Meal	2/20/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	1	HDM	ADI, EHEAP)
Day of Hope	2/22/201				SRA, AAA/ADRC (OAA, CCE, HCE, ADI,
Health Fair	8	32960	15	All	EHEAP)
	2/23/201				ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	8	32958	1	ADC	HCE,ADI, EHEAP)
Sebastian ADC	2/23/201				ADC, SRA, AAA/ADRC (OAA, CCE,
Tour	8	32958	2	ADC	HCE,ADI, EHEAP)
		32958			
Emergency Meal	2/26/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32966	2	HDM	ADI, EHEAP)
Woodfield Club	2/26/201				SRA, AAA/ADRC (OAA, CCE, HCE, ADI,
Health Fair	8	32966	35	All	EHEAP)
Vero Business					
Networking	2/27/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Luncheon	8	32966	35	All	• • • • • •
HealthSouth					
Presentation to					SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Case Management	3/2/2018	32960	6	All	•••••
Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	3/5/2018	32960	1	HDM	
					ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	3/5/2018	32960	2	ADC	••••
					ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	3/7/2018		1	ADC	
Emergency Meal	, ,				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	3/7/2018	32958	1	HDM	· · · · · ·
Community					
, Services Alliance					SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Luncheon	3/8/2018	32967	3	All	••••••
		32962			
Emergency Meal		and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	3/9/2018	32962	2	HDM	ADI, EHEAP)
		32958			, , ,
Emergency Meal	3/12/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	2	HDM	ADI, EHEAP)
	3/13/201				ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	8		1	ADC	HCE,ADI, EHEAP)
		32967			
Emergency Meal	3/13/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32962	2	HDM	ADI, EHEAP)
Emergency Meal	3/14/201	22002	-		EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32966	1	HDM	ADI, EHEAP)
	3/14/201	52500	1		SRA, AAA/ADRC (OAA, CCE, HCE, ADI,
SRA Bingo Event	3, 14, 201	32967	50	All	••••••
Emergency Meal	3/15/201	52507		, (1	EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32967	1	HDM	ADI, EHEAP)
///////////////////////////////////////	U	52507	I	ואוטוו	

United Way					
Leadership	3/15/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Meeting	8	32960	5	All	EHEAP)
Emergency Meal	3/19/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32958	1	HDM	ADI, EHEAP)
Meals On Wheels	3/19/201				
Champions	8	32960	8	MOW	Meals on Wheels
Meals On Wheels	3/20/201				
Champions	8	32960	5	MOW	Meals on Wheels
Emergency Meal	3/21/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	1	HDM	ADI, EHEAP)
Meals On Wheels	3/21/201				
Champions	8	32958	5	MOW	Meals on Wheels
	3/22/201				ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	2	ADC	HCE,ADI, EHEAP)
Emergency Meal	3/26/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	1	HDM	ADI, EHEAP)
	3/26/201				ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	2	ADC	HCE,ADI, EHEAP)
		32962			
Emergency Meal	3/27/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32958	2	HDM	ADI, EHEAP)
Vero Business					
Networking	3/27/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Luncheon	8	32966	4	All	EHEAP)
Emergency Meal	3/29/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32966	1	HDM	ADI, EHEAP)
Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	4/2/2018	32962	1	HDM	ADI, EHEAP)
					ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	4/3/2018	32958	1	ADC	
Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	4/3/2018	32958	1	HDM	ADI, EHEAP)
					ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	4/4/2018	32958	1	ADC	
Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	4/9/2018	32966	1	HDM	ADI, EHEAP)
We Are Vero					
Networking	4/11/201				SRA, AAA/ADRC (OAA, CCE, HCE, ADI,
Luncheon	8	32967	5	All	EHEAP)
Indian River					
County Health	4/12/201				SRA, AAA/ADRC (OAA, CCE, HCE, ADI,
Ехро	8	32960	18	All	· · ·
	4/13/201				ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	8	32958	1	ADC	HCE,ADI, EHEAP)

		32966			
Emergency Meal	4/13/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32968	2	HDM	ADI, EHEAP)
		32960,			
		32962,			
		32962			
Emergency Meal	4/18/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	4	HDM	ADI, EHEAP)
	4/19/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
ADC Vero Tour	8	32960	2	All	EHEAP)
	4/23/201				ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	2	ADC	HCE,ADI, EHEAP)
	4/23/201				ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	2	ADC	HCE,ADI, EHEAP)
Vero Business					
Networking	4/24/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Luncheon	8	32966	3	All	EHEAP)
HealthSouth	4/25/201				SRA, AAA/ADRC (OAA, CCE, HCE, ADI,
Health Fair	8	32960	15	All	EHEAP)
		32967			
Emergency Meal	4/27/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	2	HDM	ADI, EHEAP)
		32963,			
		32963,			
		32960			
Emergency Meal		and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	5/1/2018	32967	4	HDM	ADI, EHEAP)
Emergency Meal		32966,			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	5/2/2018	32960	2	HDM	ADI, EHEAP)
Speak At Florida					
Baptist Retirement					SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Home	5/2/2018	32960	10	All	EHEAP)
Emergency Meal	0, _, _0_0				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	5/7/2018	32958	1	HDM	ADI, EHEAP)
Meeting with VIP	37772020	02000			SRA, AAA/ADRC (OAA, CCE, HCE,ADI)
Home Care	5/7/2018	32960	1	All	•••••
Emergency Meal	37772010	32300		7.00	EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	5/8/2018	32958	1	HDM	ADI, EHEAP)
We Are Vero	5/ 5/ 2010	52550	<b>1</b>		
Networking					SRA, AAA/ADRC (OAA, CCE, HCE,ADI
Luncheon	5/9/2018	32967	5	All	
	5/10/201	32307	5	All	ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	5/10/201	32960	2	ADC	HCE,ADI, EHEAP)
Community	T				
Services Alliance	5/10/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI
Luncheon	8	32967	5	All	EHEAP)

		32960			
Emergency Meal	5/11/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32962	2	HDM	ADI, EHEAP)
Emergency Meal	5/15/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	1	HDM	ADI, EHEAP)
	5/15/201				ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	2	ADC	HCE,ADI, EHEAP)
		32962			
Emergency Meal	5/16/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	2	HDM	ADI, EHEAP)
	5/17/201				ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	8		1	ADC	HCE,ADI, EHEAP)
Adams Media					
	5/17/201		_		SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
House	8	32963	5	All	EHEAP)
	5/18/201				ADC, SRA, AAA/ADRC (OAA, CCE,
TOUR	8	32958	1	ADC	HCE,ADI, EHEAP)
• •	5/21/201	22052			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32962	1	HDM	ADI, EHEAP)
<b>U</b> ,	5/22/201	22067			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32967	1	HDM	ADI, EHEAP)
Vero Business	F /22 /201				
-	5/22/201	22000	-	A 11	SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Luncheon	8 5 /22 /201	32966	5	All	
Emergency Meal Assessment	5/23/201	32967	1	HDM	EMOW, ADRC, AAA (OAA, CCE, HCE, ADI, EHEAP)
	0 5/23/201	52907	1		ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	2	ADC	HCE, ADI, EHEAP)
	5/23/201	52500	۷	ADC	ADC, SRA, AAA/ADRC (OAA, CCE,
ADC Vero Tour	8	32960	1	ADC	HCE, ADI, EHEAP)
	5/25/201	52500		7,000	EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32967	1	HDM	ADI, EHEAP)
Indian River		02007			
	5/25/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Health Fair	8	32960	35	All	EHEAP)
		32960			,
Emergency Meal	5/30/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32966	2	HDM	ADI, EHEAP)
		32962			
Emergency Meal	5/31/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32958	2	HDM	ADI, EHEAP)
Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
	6/4/2018	32958	2	HDM	ADI, EHEAP)
		32960,			
		32967,			
Emergency Meal		and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	6/6/2018	32962	3	HDM	ADI, EHEAP)

Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	6/7/2018	32962	1	HDM	ADI, EHEAP)
Emergency Meal	6/11/201	52502	<b>1</b>	TIDIVI	EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	1	HDM	ADI, EHEAP)
Emergency Meal	6/12/201	32900	<b>T</b>		EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32960	1	HDM	ADI, EHEAP)
Assessment	0	32967,	<b>T</b>	ואשח	ADI, EREAP)
Emorgonov Mool	6/12/201	32962,			
Emergency Meal Assessment	6/13/201 8	and 32962	3	HDM	EMOW, ADRC, AAA (OAA, CCE, HCE, ADI, EHEAP)
	_	52902	5	ואושח	
Emergency Meal	6/14/201	22062	1		EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32962	1	HDM	ADI, EHEAP)
Community	C / A / D D A				
Services Alliance	6/14/201	22257	2		SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Luncheon	8	32967	3	All	EHEAP)
		32962			
Emergency Meal	6/15/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32962	2	HDM	ADI, EHEAP)
Emergency Meal	6/19/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32966	1	HDM	ADI, EHEAP)
Health Fair at					
Gifford	6/19/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Community Center	8	32967	20	All	EHEAP)
Emergency Meal	6/23/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32968	1	HDM	ADI, EHEAP)
		32967,			
		32960,			
Emergency Meal	6/25/201	and			EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32967	3	HDM	ADI, EHEAP)
Emergency Meal	6/27/201				EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	8	32966	1	HDM	ADI, EHEAP)
Indian River					
County Chamber					
After Hours	6/28/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Networking	8	32960	15	All	EHEAP)
Indian River					
County Health	6/29/201				SRA, AAA/ADRC (OAA, CCE, HCE,ADI,
Ехро	8	32960	25	All	EHEAP)
Emergency Meal					EMOW, ADRC, AAA (OAA, CCE, HCE,
Assessment	7/5/2018	32958	1	HDM	
HV EHEAP	1/10/201				EHEAP, ADRC, AAA (OAA, CCE, HCE,
APPOINTMENT	8	32960	1	EHEAP	ADI, EHEAP)
HV EHEAP	1/29/201				EHEAP, ADRC, AAA (OAA, CCE, HCE,
APPOINTMENT	_,, 8	32960	1	EHEAP	ADI, EHEAP)
HV EHEAP				,	EHEAP, ADRC, AAA (OAA, CCE, HCE,
APPOINTMENT	2/1/2018	32962	1	EHEAP	ADI, EHEAP)
	2/ 1/ 2010	52502	T		

THANK YOU EVENT	8	32963	5	ALL	ADI, EHEAP)
UNITED WAY	3/28/201	22062	F		SRA, ADRC/AAA, (OAA, CCE, HCE,
TRAINING	8	32960	5	ALL	ADI, EHEAP)
VOLUNTEER	3/26/201	22000			SRA, ADRC/AAA, (OAA, CCE, HCE,
SEBASTIAN PROCLAMATION	3/14/200	32967	20	ALL	ADI, EHEAP)
CITY OF	3/14/200				SRA, ADRC/AAA, (OAA, CCE, HCE,
BEACH PROCLAMATION	3/6/2018	32960	10	ALL	SRA, ADRC/AAA, (OAA, CCE, HCE, ADI, EHEAP)
CITY OF VERO					
IRC BOARD OF COMMISSIONERS PROCLAMATION	3/6/2018	32960	10	ALL	SRA, ADRC/AAA, (OAA, CCE, HCE, ADI, EHEAP)
CITY OF FELLSMERE PROCLAMATION	3/3/1/18	32948	4	ALL	SRA, ADRC/AAA, (OAA, CCE, HCE, ADI, EHEAP)
SUBCONTRACTOR TRAINING	2/20/201 8	34994	20	ALL	SRA, ADRC/AAA, (OAA, CCE, HCE, ADI, EHEAP)
WOMEN IN BUSINESS	2/8/2017	32967	10	ALL	SRA, ADRC/AAA, (OAA, CCE, HCE, ADI, EHEAP)
PASTOR DOUG	2/8/2018	32960	4	ALL	SRA, ADRC/AAA, (OAA, CCE, HCE, ADI, EHEAP)
VOLUNTEER TRAINING	1/31/201 8	32960	5	ALL	SRA, ADRC/AAA, (OAA, CCE, HCE, ADI, EHEAP)
Services	8	32967	1	HURRICANE	ADI, EHEAP)
HV for MOWWR	5/31/201				EHEAP, ADRC, AAA (OAA, CCE, HCE,
Services	8	32967	4	EHEAP	ADI, EHEAP)
HV for EHEAP	5/22/201	52507		2112/11	EHEAP, ADRC, AAA (OAA, CCE, HCE,
Services	8	32967	1	EHEAP	ADI, EHEAP)
Services HV for EHEAP	ہ 5/17/201	52907	1	HURRICANE	ADI, EHEAP) EHEAP, ADRC, AAA (OAA, CCE, HCE,
HV for MOWWR	5/14/201 8	32967	1		EHEAP, ADRC, AAA (OAA, CCE, HCE,
APPOINTMENT	8	32967	2	Р	ADI, EHEAP)
HV EHEAP	4/26/201			EHEAP/WA	EHEAP, ADRC, AAA (OAA, CCE, HCE,
APPOINTMENT	8	32967	1	EHEAP	ADI, EHEAP)
HV EHEAP	4/18/201				EHEAP, ADRC, AAA (OAA, CCE, HCE,
APPOINTMENT	8	32960	1	EHEAP	ADI, EHEAP)
HV EHEAP	4/18/201				EHEAP, ADRC, AAA (OAA, CCE, HCE,
APPOINTMENT	3/5/2018	32966	1	EHEAP	ADI, EHEAP)
HV EHEAP					EHEAP, ADRC, AAA (OAA, CCE, HCE,

OAA Targeted Categories	Number of Persons Within the Targeted Population Reached through Outreach Activities During the last 6 months
Older individuals residing in rural areas	20
Low-income older individuals	100
Low-income minorities	55
Older individuals with the greatest social need	50
Older individuals with severe disabilities	10
Older individuals with limited English proficiency	40
Older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such	
individuals)	65
Older individuals at risk for institutional placement	95
Caregivers of older individuals with Alzheimer's disease and related disorders with neurological and	85
organic brain dysfunction Grandparents or older individuals who are relative caregivers who provide care for children with	63
 severe disabilities	20
Caregivers who are older individuals with greatest social need	75
Caregivers who are older individuals with greatest economic need (with particular attention to low- income older individuals)	35
Caregivers who are older individuals who provide care to individuals with severe disabilities, including children with severe disabilities.	20
TOTAL	670

ATTACHME	NT XVII		SEMI-A	NNUAL REPOR	F OF PROVIDER OUTRE	ACH
PROVIDER	NAME		The Vo	en Center		
SEMI-ANN	JAL PERIOD		January	/ 2018 - June 20	18	
Event Number	Type of Event or Activity	Date	Location (Including Zip Code)	Total # of Participants	Individual Service Needs Identified	Referral Sources on Information Provided
1	Presentation of Services	1/3/2018	St. Gregory Church 33432	15	None	Presentation & Brochures
2	Presentation of Services	1/9/2018	Harbor Seasonal Grill 33484	24	None	Presentation & Brochures
3	Presentation of Services	1/16/2018	Banyan Treatment Center 33062	2	None	Presentation & Brochures
4	Presentation and Q&A	1/22/2018	Delray Police Training Center 33444	25	None	Presentation & Brochures
5	Outreach	1/26/2018	Leisureville, 33426	150	None	Brochures
6	Presentation of Services	2/2/2018	Boca Library 33431	15	None	Presentation & Brochures
7	Presentation of Services	2/7/2018	VA Hospital 33410	2	None	Presentation & Brochures
8	Outreach	2/8/2018	Century Village 33417	250	None	Brochures
9	Outreach	2/9/2018	Huntington Lakes 33446	250	None	Brochures
10	Mental Health Services	2/13/2018	J. Alexander Restaurant 33431	6	None	Discussion
11	Mental Health Services	2/25/2018	Boca Hospital - Dawson Theater 33486	40	None	Bus. Cards and Information Folders
12	Outreach	2/26/2018	Kings Point 33484	250	None	Brochures
13	Outreach	3/5/2018	Delray Civic Center 33446	300	None	Brochures
14	Outreach	3/15/2018	Cascades Lakes Community 33437	50	None	Brochures
15	Include Volen	3/27/2018	St. Gregory's	3	None	Brochures

	Services in		Church			
	Church Directory		33432			
16	Outreach	3/28/2018	Delray Civic Center 33484	400	None	Brochures
17	Outreach	3/29/2018	Mandell JCC of Palm Beach 33414	300	None	Brochures
18	Professional	4/5/2018	Harbor Chase Community 33065	2	None	Brochures
19	Outreach	4/6/2018	Grace Church 33486	2	None	Brochures
20	Outreach	4/9/2018	St. Paul Lutheran 33486	3	None	Brochures
21	Outreach	4/10/2018	PBC Medical Society 33404	2	None	Brochures
22	Health Fair	4/10/2018	MHA of PBC 33406	300	None	Brochures
23	Outreach	4/11/2018	mid county center 33461	2	None	Brochures
24	Outreach	4/11/2018	FAU 33431	15	None	Brochures
25	Outreach	4/11/2018	United Health Care 33312	2	None	Brochures
26	Outreach	4/20/2018	Century Village	200	None	Brochures
27	Presentation on Services	4/26/2018	MVC	15	None	Brochures
28	Presentation on Services	5/3/2018	Hilton of WPB	4	None	Brochures
29	Presentation on Services	5/4/2018	Elder Alternatives	3	None	Brochures
30	Presentation on Services	5/7/2018	West Boca Medical Hospital	2	None	Brochures
31	Presentation on Services	5/8/2018	Sterling Village	450	None	Brochures
32	Presentation on Services	5/9/2018	Kravis Center	2	None	Brochures
33	Presentatio n on Services	5/11/201 8	Habilitatio n Center - PBC	2	None	Brochures

34	Presentatio n on	5/20/201 8	Kindred at Home	50	None	Brochures
25	Services	F /22 /201	Ct.	2	News	Duashuura
35	Presentatio	5/22/201	St.	3	None	Brochures
	n on	8	Gregory's			
26	Services	= /22 /224	Church	450		
36	Presentatio	5/23/201	MVC	450	None	Brochures
	n on	8				
~7	Services	= /22 /224		-		
37	Presentatio	5/23/201	Kravis	2	None	Brochures
	n on	8	Center			
	Services	- /2 2 /2 2 /	33401			
38	Health Fair	5/30/201	United	20	None	Brochures
		8	Believers			
			Church			
39	Ехро	6/5/2018	Pompey Park 33444	200	None	Brochures
40	Presentatio	6/6/2018	Grand	3	None	Brochures
	n on		Villas West			
	Services					
41	Presentatio	6/12/201	Rep.	3	None	Brochures
	n on	8	Slosberg			
	Services		Office			
			33428			
42	Presentatio	6/12/201	PB Fire	6	None	Brochures
	n on	8	Rescue			
	Services					
43	Presentatio	6/14/201	St.	9	None	Brochures
	n on	8	Gregory's			
	Services		Church			
			33432			
44	Presentatio	6/14/201	West Boca	4	None	Brochures
	n on	8	Medical			
	Services		Hospital			
45	Ехро	6/18/201	Kindred at	200	None	Brochures
	-	8	Home			
			33426			
46	Round	6/22/201	Dr.	20	None	Brochures
	Table	8	Berkman &			
			Assoc.			
			33431			
47	Seminar	6/27/201	MVC	25	None	Brochures
-		8	33486			
	l	1 -	Total	4083		I



SEMI-ANNUAL REPORT OF PROVIDER OUTREACH PROVIDER NAME: PBC DIVISION OF SENIOR SERVICES (DOSS)

## SEMI ANNUAL PERIOD: JANUARY 2018 - JUNE 2018

Event Number	Type of Event or Activity	Date	Location (Including Zip Code)	Total # of Participants Reached	Individual Service Needs Identified	Referral Sources or Information Provided
1	Lake Women's Club	1/10/2018	Lake Worth, FL 33460	30	All services	Brochures
2	South Florida Fair	1/13/2018	Royal Palm Beach, FL 33411	525	All services	Brochures
3	South Florida Fair	1/15/2018	Royal Palm Beach, FL 33411	450	All services	Brochures
4	South Florida Fair	1/17/2018	Royal Palm Beach, FL 33411	250	All services	Brochures
5	South Florida Fair	1/18/2018	Royal Palm Beach, FL 33411	180	All services	Brochures
6	South Florida Fair	1/20/2018	Royal Palm Beach, FL 33411	400	All services	Brochures
7	South Florida Fair	1/21/2018	Royal Palm Beach, FL 33411	450	All services	Brochures
8	Word of Hope Ministries	1/21/2018	West Palm Beach, FL 33406	62	All services	Brochures
9	South Florida Fair	1/21/2018	Royal Palm Beach, FL 33411	450	All services	Brochures
10	South Florida Fair	1/22/2018	Royal Palm Beach, FL 33411	175	All services	Brochures
11	South Florida Fair	1/24/2018	Royal Palm Beach, FL 33411	345	All services	Brochures
12	South Florida Fair	1/28/2018	Royal Palm Beach, FL 33411	300	All services	Brochures
13	St Christopher's Episcopal Church	2/3/2018	West Palm Beach, FL 33417	50	All services	Brochures
14	Jupiter Jubilee	2/3/2018	Jupiter, FL 33458	500	All services	Brochures
15	EHEAP MEAL SITE- MCSC	2/7/2018	Lake Worth, Fl 33461	100	All services	Brochures
16	Kenneth W. Morgan	2/9/2018	Lake Worth, FL 33463	1	EHEAP	Brochures

17	Gloria Flynn	2/14/2018	Lake Worth, FL 33467	1	EHEAP	Brochures
10	Golden Lakes Village Health Fair	2/16/2018	West Palm Beach, FL 33411	200	All services	Prochuroc
18 19	Felice Hirshberger	2/28/2018	33411 Lake Worth, FL 33460	1	EHEAP	Brochures Brochures
20	Various Community Agencies	2/9/2018	Palm Beach Gardens, FL. 33418	14	All services	Brochures
20	Fearless Caregiver Conference	3/8/2018	West Palm Beach, FL 33404	200	All services	Brochures
22	Home Visit (EHEAP)	3/13/2018	Palm Beach Gardens 33418	1	EHEAP	Brochures
23	Mid County Senior Center	3/14/2018	Lake Worth, FL 33461	10	EHEAP	Brochures
24	Windsor Park Apt.	3/15/2018	West Palm Beach, FL 33415	30	Utility	Brochures
25	Tanner Park Community Center	3/20/2018	Belle Glade, FL 33493 West Palm	10	All Services	Brochures
26	Jennie Baldwin	3/2/2018	Beach, FL 33401	1	EHEAP	Brochures
27	Home Visit	3/16/2018	West Palm Beach, FL 33415	1	All Services	Brochures
28	Home Visit Paul Hallahan	4/2/2018	West Palm Beach, FL 33401	1	EHEAP	Brochures
29	St. Andrews Residence	4/5/2018	West Palm Beach, FL 33401	11	All Services	Brochures
30	Pahokee Wellness Center	4/6/2018	Pahokee, FL 33476	15	All Services	Brochures
31	Greenacres Community Center	4/10/2018	Greenacres, FL 33463	18	All Services	Brochures
32	Village of Royal Palm Beach	4/11/2018	Royal Palm Beach, FL 33411	22	All Services	Brochures
33	Ismay Swammy	4/24/2018	Lake Worth, FL 33460	1	EHEAP	Brochures
34	Paolo Calise	5/4/2018	Lake Worth, FL 33470	1	EHEAP	Brochures
35	Home Visit EHEAP	5/16/2018	West Palm Beach, FL 33401	1	EHEAP	Brochures
36	Home Visit EHEAP	5/22/2018	Lake Worth, FL 33462	1	EHEAP	Brochures
37	Home Visit EHEAP	5/30/2018	West Palm Beach, FL 33403	1	EHEAP	Brochures
38						
39						

40		
	Older individuals at risk for institutional placement	41
	Caregivers of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction	217
	Grandparents or older individuals who are relative caregivers who provide care for children with severe disabilities	29
	Caregivers who are older individuals with greatest social need	72
	Caregivers who are older individuals with greatest economic need (with particular attention to low-income older individuals)	82
	Caregivers who are older individuals who provide care to individuals with severe disabilities, including children with severe	
	disabilities.	58
	TOTAL:	499

SEMI-ANNUAL OUTREACH REPORT FLORIDA RURAL LEGAL SERVICES JANUARY 1, 2018 – JUNE 30, 2018									
1/3/2018	Outreach	Multiple Topics	Safe Space, Stuart, 34994		Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers		
1/4/2018	Outreach	Multiple Topics	Career Source Center, Port St. Lucie, 34986	25	Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers		
1/5/2018	Outreach	Multiple Topics	Banner Lake Club, Hobe Sound, 33455	30	Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers		
1/18/2018	Outreach	Multiple Topics	Banner Lake Club, Hobe Sound, 33455	30	Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers Counsel and		
1/18/2018	Outreach	Multiple Topics	Kane Center, Stuart, 34997 Okeechobee	1	Senior Group	Miscellaneous	Advice/Legal Education Flyers Counsel and		
1/23/2018	Outreach	Legal Education and Information Legal Education	Health Dept., Okee., 34972 Fort Pierce,	31	Mixed Age Group Mixed Age	Miscellaneous	Advice/Legal Education Flyers Counsel and Advice/Legal		
1/25/2018	Outreach	and Information	34950 Okee. Agri- Civic Ctr,	40	Group	Miscellaneous	Education Flyers Counsel and		
1/27/2018	Outreach	Multiple Topics	Okeechobee, 34974 Fenn Center,	1800	Mixed Age Group	Miscellaneous	Advice/Legal Education Flyers Counsel and		
1/31/2018	Outreach	Multiple Topics	Fort Pierce, 34982	1200	Mixed Age Group	Miscellaneous	Advice/Legal Education Flyers Counsel and		
2/7/2018	Outreach	Multiple Topics	Safe Space, Stuart, 34994		Mixed Age Group	Miscellaneous	Advice/Legal Education Flyers Counsel and		
2/10/2018	Outreach	Multiple Topics	Port St. Lucie, 34984 FRLS, Fort	100	Mixed Age Group Mixed Age	Miscellaneous	Advice/Legal Education Flyers Counsel and		
2/11/2018	Outreach	Consumer/Finance	Pierce, 34950 Buell Brown	12	Group	Bankrupcy/Debt	Advice Counsel and		
2/13/2018	Outreach	Multiple Topics	Center, Fort Pierce, 34950	7	Senior Group	Miscellaneous	Advice/Legal Education Flyers Counsel and		
2/22/2018	Outreach	Legal Education and Information	Fort Pierce, 34950 Boys & Girls	85	Mixed Age Group	Miscellaneous	Advice/Legal Education Flyers Counsel and		
2/22/2018	Outreach	Multiple Topics	Club, Fort Pierce, 34947 UP Center,		Mixed Age Group	Miscellaneous	Advice/Legal Education Flyers Counsel and		
2/23/2018	Outreach	Individual Rights	Vero Beach, 32967		Mixed Age Group	Miscellaneous	Advice/Legal Education Flyers		

						1	Counsel and
			Fort Pierce,		Mixed Age		Advice/Legal
2/24/2018	Outreach	Individual Rights	34946		Group	Miscellaneous	Education Flyers
			U.S. District				Counsel and
		Legal Education	Court, Fort		Mixed Age		Advice/Legal
2/28/2018	Outreach	and Information	Pierce, 34950		Group	Miscellaneous	Education Flyers
			SLC Sheriff's				Counsel and
			Office, Fort		Mixed Age		Advice/Legal
3/2/2018	Outreach	Multiple Topics	Pierce, 34981	5	Group	Miscellaneous	Education Flyers
			FRLS, Fort		Mixed Age		Counsel and
3/7/2018	Outreach	Consumer/Finance	Pierce, 34950	5	Group	Bankrupcy/Debt	Advice
							Counsel and
		Legal Education	Fort Pierce,		Mixed Age		Advice/Legal
3/8/2018	Clinic	and Information	34950	60	Group	Miscellaneous	Education Flyers
			Virginia				Counsel and
0.01.0010			College, Fort		Mixed Age		Advice/Legal
3/21/2018	Outreach	Individual Rights	Pierce, 34982	50	Group	Miscellaneous	Education Flyers
		T 151 (	E D				Counsel and
2/22/2010	0	Legal Education	Fort Pierce,		Mixed Age	Mina 11	Advice/Legal
3/22/2018	Outreach	and Information	34950	50	Group	Miscellaneous	Education Flyers
		Level Education	Okeechobee		Min-1 A		Counsel and
2/27/2019	Outra 1	Legal Education	Sch. District,	31	Mixed Age	Miscellaneous	Advice/Legal
3/27/2018	Outreach	and Information	Okee., 34974	31	Group	Miscellaneous	Education Flyers
			East Diamas		Minud		Counsel and
3/30/2018	Outreach	Multiple Topics	Fort Pierce, 34950	25	Mixed Age	Miscellaneous	Advice/Legal Education Flyers
5/50/2018	Outreach	Multiple Topics	FRLS, Fort	23	Group Mixed Age	Miscenaneous	Counsel and
4/4/2018	Outreach	Consumer/Finance	Pierce, 34950	12	Group	Bankrupcy/Debt	Advice
4/4/2018	Outreacti	Consumer/Timance	Fierce, 54950	12	Gloup	Daliki upcy/Debt	Counsel and
			Fort Pierce,		Mixed Age		Advice/Legal
4/9/2018	Outreach	Multiple Topics	34947	50	Group	Miscellaneous	Education Flyers
4/9/2018	Outreacti	Multiple Toples	River Walk	50	Gloup	Wilseenancous	Counsel and
			Center, Fort		Mixed Age		Advice/Legal
4/15/2018	Outreach	Multiple Topics	Pierce, 34950	100	Group	Miscellaneous	Education Flyers
4/15/2010	Outreach	Multiple Toples	110100, 54950	100	Gloup	Wilseenancous	Counsel and
		Legal Education	Fort Pierce,		Mixed Age		Advice/Legal
4/19/2018	Outreach	and Information	34950	100	Group	Miscellaneous	Education Flyers
1/1//2010	Outreach	and mitormation	Okeechobee	100	Group	Wilseenancous	Counsel and
		Legal Education	Sch. District,		Mixed Age		Advice/Legal
4/24/2018	Outreach	and Information	Okee., 34974	32	Group	Miscellaneous	Education Flyers
			Health Dept.,		eremp		Counsel and
		Legal Education	Fort Pierce,		Mixed Age		Advice/Legal
4/24/2018	Outreach	and Information	34950	14	Group	Miscellaneous	Education Flyers
			Grand Oaks				
			ALF,				Counsel and
			Okeechobee,		Senior		Advice/Legal
5/7/2018	Outreach	Multiple Topics	34974	10	Group	Miscellaneous	Education Flyers
			Lawnwood		•		Counsel and
			Terrace Fort		Senior		Advice/Legal
5/10/2018	Outreach	Multiple Topics	Pierce, 34950	2	Group	Miscellaneous	Education Flyers
					•		Counsel and
			Kane Center,		Senior		Advice/Legal
5/17/2018	Outreach	Multiple Topics	Stuart, 34997	20	Group	Miscellaneous	Education Flyers
							Counsel and
		Legal Education	Fort Pierce,		Mixed Age		Advice/Legal
5/17/2018	Outreach	and Information	34950	20	Group	Miscellaneous	Education Flyers
			Grand Oaks				
			ALF,				Counsel and
			Okeechobee,		Senior		Advice/Legal
5/21/2018	Outreach	Multiple Topics	34974	11	Group	Miscellaneous	Education Flyers

			Okeechobee				Counsel and
		Legal Education	Sch. District,		Mixed Age		Advice/Legal
5/22/2018	Outreach	and Information	Okee., 34974	21	Group	Miscellaneous	Education Flyers
							Counsel and
		Legal Education	Fort Pierce,		Mixed Age		Advice/Legal
5/31/2018	Outreach	and Information	34950	70	Group	Miscellaneous	Education Flyers
			UP Center,				Counsel and
			Vero Beach,		Mixed Age		Advice/Legal
6/6/2018	Outreach	Multiple Topics	32967	4	Group	Miscellaneous	Education Flyers
			FRLS, Fort		Mixed Age		Counsel and
6/6/2018	Outreach	Consumer/Finance	Pierce, 34950	12	Group	Bankrupcy/Debt	Advice
			Camp Haven,				Counsel and
			Vero Beach,		Mixed Age		Advice/Legal
6/12/2018	Outreach	Multiple Topics	32960	15	Group	Miscellaneous	Education Flyers
							Counsel and
		Legal Education	Fort Pierce,		Mixed Age		Advice/Legal
6/14/2018	Outreach	and Information	34950	50	Group	Miscellaneous	Education Flyers
							Counsel and
			Vero Beach,		Mixed Age		Advice/Legal
6/21/2018	Outreach	Housing	32960	58	Group	Landlord/Tenant	Education Flyers
							Counsel and
			Fort Pierce,		Mixed Age		Advice/Legal
6/23/2018	Outreach	Multiple Topics	34947	100	Group	Miscellaneous	Education Flyers
			Suncoast				
			Mental Health				Counsel and
			Center, FTP,		Senior		Advice/Legal
6/28/2018	Outreach	Family	34982	12	Group	Custody	Education Flyers

SEMI- ANNUAL PERIOD January – June 30, 2018 Event Number	Type of Event or Activity	Date	Location (including Zip Code)	Total # of Participants Reached	Individual Service Needs Identified	Referral Sources or Information Provided
1	11th Annual Okeechobee Health & Safety Expo	1/27/18	Okeechobee Agri-Civic Center, 4601 FL710, Okeechobee, FL 34974	134	EHEAP, HMK, PC, RESP, HDM, Cong.	One-on-one discussions, Agency services brochure distributed.
2	Foster Grandparents Meeting	3/5/18	Williamson Center, Indian River State College, 2229 NW 9th Avenue, Okeechobee, FL 34972	9	EHEAP, HMK, PC, RESP, HDM, Cong.	Group presentation with questions answered one- on-one, Agency services brochure distributed.
3	FPL Power to Save Program	5/9/18	Okeechobee Civic Center 1750 Hwy 98 N, Okeechobee, FL 34972	40	EHEAP, HMK, PC, RESP, HDM, Cong.	One-on-one discussions, Agency services brochure distributed.

## SEMI-ANNUAL REPORT OF PROVIDER OUTREACH PROVIDER NAME: Okeechobee Senior Services

	Number of Persons Within the Targeted Population Reached Through Outreach Activities During the Last 6 Months
Older individuals residing in rural areas	183
Low-income older individuals	
Low income minorities	

Older individuals with the greatest social need	
Older individuals with severe disabilities	
Older individuals with limited English proficiency	
Older individuals with Alzheimer's disease and related disorders with	
neurological and organic brain dysfunction (and the caretakers of such	
individuals)	
Older individuals at risk for institutional placement	
Caregivers of older individuals with Alzheimer's disease and related disorders	
with neurological and organic brain dysfunction	
Grandparents or older individuals who are relative caregivers who provide care	
for children with severe disabilities	
Caregivers who are older individuals with greatest social need	
Caregivers who are older individuals with economic needs (with particular	
attention to low-income older individuals)	
Caregivers who are older individuals who provide care to individuals with	
severe disabilities, including children with severe disabilities	
Total	183

## SEMI-ANNUAL REPORT OF PROVIDER OUTREACH PROVIDER NAME: Legal Aid

			Number	
			of	Individual Service Needs
Date	Location	Zip Code	Attendees	Identified
04/14/2018	Belle Glade Marina, Belle Glade, FL	33430	50	Wills and consumer
	Temple Beth Shalom, Century Village,			
02/08/2018	19140 Lyons Rd.	33434	250	Wills, Medicaid, Condo
	Grand Villa West, 5859 Heritage Park			
06/05/2018	Way, DB 33484	33484	50	Wills and consumer
	West County Senior Center, Belle			
01/17/2018	Glade	33430	25	FEMA, insurance
3/7/2018	Families First	33406	14	Guardianship Advocacy
	225 NW 12th Ave, Boynton Beach, FL			
02/08/2018	33435	33435	150	Wills, Medicaid, SS benefits
	Marina Event Center, 190 E 13th St.,			
03/08/2018	Riviera Beach, FL 33404	33404	150	Wills, Medicaid, SS benefits
	Harvest AME Church 825 Larrimore Rd			
01/24/2018	Pahokee	33430	10	FEMA, insurance
	Kings Point 7000 W Atlantic Ave			Condo, Wills, Deeds, Long
02/26/2018	Delray Beach FL 33446	33446	500	term care
02/14/2018	3680 Lake Worth Rd., Lake Worth, FL	33461	3	real property and consumer
04/11/2018	3680 Lake Worth Rd., Lake Worth, FL	33461	5	real property and consumer
	Mid County Sr. Center, 3680 Lake			
01/10/2018	Worth Rd., Lake Worth, FL 33461	33461	2	consumer law
	Mid County Sr. Center, 3680 Lake			
03/14/2018	Worth Rd., Lake Worth, FL 33461	33461	5	Wills, consumer
	Mid County Sr. Center, 3680 Lake			
05/09/2018	Worth Rd., Lake Worth, FL 33461	33461	1	Wills, foreclosure

06/13/2018	Mid County Sr. Center, 3680 Lake Worth Rd., Lake Worth, FL 33461	33461	8	consumer law and guardianship
	Greenacres Community Park,			
06/03/2018	Greenacres, FL	33467	300	VA benefits and appeals
	S County Civic Ctr, 16700 Jog Rd, DB,			
03/05/2018	33446	33446	100	Wills
	VA Medical Center, 7305 N Military			
02/15/2018	Trl, Riviera Beach, FL	33410	6	VA benefits and appeals
	VA Medical Center, 7305 N Military		_	
03/15/2018	Trl, Riviera Beach, FL	33410	4	VA benefits and appeals
	VA Medical Center, 7305 N Military		-	
04/19/2018	Trl, Riviera Beach, FL	33410	8	VA benefits and appeals
	VA Medical Center, 7305 N Military		_	
05/17/2018	Trl, Riviera Beach, FL	33410	9	VA benefits and appeals
	VA Medical Center, 7305 N Military			
06/21/2018	Trl, Riviera Beach, FL	33410	30	VA benefits and appeals

	Number of Persons Within the Targeted Population Reached Through Outreach Activities During the Last 6 Months
Older individuals residing in rural areas	50
Low-income older individuals	381
Low income minorities	220
Older individuals with the greatest social need	65
Older individuals with severe disabilities	20
Older individuals with limited English proficiency	77
Older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals)	31
Older individuals at risk for institutional placement	0

Caregivers of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction	127
Grandparents or older individuals who are relative caregivers who provide care for children with severe disabilities	14
Caregivers who are older individuals with greatest social need	60
Caregivers who are older individuals with economic needs (with particular attention to low-income older individuals)	106
Caregivers who are older individuals who provide care to individuals with severe disabilities, including children with severe disabilities	22
Total	1173

# SEMI-ANNUAL OUTREACH REPORTS – JULY 2018-DECEMBER 2018

SEMI-ANNUAL REPC	ATTACHME	NT	
OUTREACH		XVII	
PROVIDER NAME	<u>CoASL</u>		
SEMI-ANNUAL PERIOD	2018 July-December		

					Individual	
			Location	Total # of	Service	Referral Sources
Event			(Including	Participants	Needs	or Information
Number	Type of Event or Activity	Date	Zip Code)	Reached	Identified	Provided
			Ft. Pierce		All COASL	
96	Info/Resource Expo	6/27/18	34950	50	Services	COASL, ADRC
			Ft. Pierce		All COASL	
105	Networking/Info Event	7/18/18	34981	30	Services	COASL, ADRC
			PSL		All COASL	
110	Business/Resource Event	7/24/18	34986	100	Services	COASL, ADRC
			Ft. Pierce		All COASL	
113	Info/Resource Event	7/30/18	34950	16	Services	COASL, ADRC

			PSL		All COASL	
114	Networking/Info Event	8/1/18	34952	50	Services	COASL, ADRC
	Community Resource		Ft. Pierce		All COASL	
116	Event	8/3/18	34981	150	Services	COASL, ADRC
			PSL		All COASL	
117	Presentation/Info Event	8/7/18	34983	25	Services	COASL, ADRC
			Ft. Pierce		All COASL	
121	Health & Resource Event	8/10/18	34950	75	Services	COASL, ADRC
			Ft. Pierce		All COASL	
122	Health & Wellness Event	8/15/18	34982	150	Services	COASL, ADRC
			PSL		All COASL	
134	Info/Resource Event	9/10/18	34983	60	Services	COASL, ADRC
	Alzheimer's/Info/Event		PSL		All COASL	
140	9/19/18	9/19/18	34952	75	Services	COASL, ADRC
			Ft. Pierce		All COASL	
141	Presentation/Info Event	9/19/18	34982	65	Services	COASL, ADRC
			Ft. Pierce		All COASL	
142	Health & Info Event	9/21/18	34945	50	Services	COASL, ADRC
			Ft. Pierce		All COASL	
143	Presentation/Info Event	9/21/18	34981	20	Services	COASL, ADRC
			Ft. Pierce		All COASL	
155	Health & Wellness Event	10/10/18	34981	50	Services	COASL, ADRC
			Ft. Pierce		All COASL	
158	Health & Info Event	10/15/18	34950	30	Services	COASL, ADRC
			PSL		All COASL	
159	Health & Info Event	10/17/18	34986	100	Services	COASL, ADRC
			Ft. Pierce		All COASL	
181	Presentation/Info Event	11/18/18	34947	30	Services	COASL, ADRC
			Ft. Pierce		All COASL	
182	Health & Resource Event	12/1/18	34947	50	Services	COASL, ADRC

	Caregiver/ Resource		Ft. Pierce		All COASL	
183	Event	12/8/2018	34947	35	Services	COASL, ADRC
						Number of
						Persons Within
						the Targeted
				eted Categories	<b>c</b>	Population
			UAA Taige	categories	5	Reached through
						Outreach
						Activities During
						the last 6 months
		Older individ	duals residin	ig in rural areas	S	50
		Low-income	e older indivi	iduals		190
		Low-income	e minorities			150
		Older individuals with the greatest social need				125
		Older individuals with severe disabilities			25	
		Older individ	20			
		Older individ	duals with A	ase and		
		related disorders with neurological and organic				
		brain dysfunction (and the caretakers of such				
		individuals)				25
		Older individuals at risk for institutional placement				7
		Caregivers of older individuals with Alzheimer's				
		disease and related disorders with neurological and				
		organic brain dysfunction			79	
		Grandparents or older individuals who are relative				
		caregivers who provide care for children with				
		severe disat	5			
		Caregivers v	vho are olde	er individuals w	ith greatest	
		social need				40

Caregivers who are older individuals with greatest economic need (with particular attention to low-	
income older individuals)	50
Caregivers who are older individuals who provide	
care to individuals with severe disabilities, including	
children with severe disabilities.	10
TOTAL	776

## SEMI-ANNUAL REPORT OF PROVIDER OUTREACH

PROVIDE	R NAME:	The Volen Cent	er			
SEMI-ANN	NUAL PERIOD:	Jan-19				
Event Number	Type of Event or Activity	Date	Location (Including Zip Code)	Total # of Participants Reached	Individual Service Needs Identified	Referral Sources or Information Provided
1	Outreach Presentation	9/26/2018	33467- Attria at Windsor Villages	60	N/A	Flyers provided to Providers to potential clients
2	Health Fair	9/20/2018	33432	200	N/A	Flyers and information provided at Health Fair
3	Presentation on Services	9/17/2018	33404, FPL	200	N/A	Flyers and information on services provided to providers and companies who serve our client base
4	Presentation on Services	11/28/2018	33484, Vitas	10	N/A	Presentation on services to individuals and companies who serve our client base

OAA Targeted Categories	Number of Persons Within the Targeted Population Reached through Outreach Activities During the Last 6 Months
Older individuals residing in rural areas	0
Low income older individuals	55
Low-income minorities	55

	· · · · · · · · · · · · · · · · · · ·
Older individuals with the greatest social need	75
Older individuals with severe disabilities	30
Older individuals with limited English proficiency	65
Older individuals with Alzheimer's disease and related	60
disorders with neurological and organic brain dysfunction	
(and the caretakers of such individuals)	
Older individuals at risk for institutional placement	95
Caregivers of older individuals with Alzheimer's disease	5
and related disorders with neurological and organic brain	
dysfunction	
Grandparents or older individuals who are relative	5
caregivers who provide care for children with severe	
disabilities	
Caregivers who are older individuals with greatest social	
need	
Caregivers who are older individuals with greatest	
economic need (with particular attention to low-income	
older individuals)	
Caregivers who are older individuals who provide care to	25
individuals with severe disabilities, including children with	
severe disabilities.	
Total	470

## SEMI-ANNUAL REPORT OF PROVIDER

#### ATTACHMENT XVII

# OUTREACH

## PROVIDER NAME: Senior Resource Association

### SEMI-ANNUAL PERIOD: January 1, 2018 - June 30, 2018

				Individual	
		Location	Total # of	Service	
		(Including	Participants	Needs	<b>Referral Sources or</b>
Type of Event or Activity	Date	Zip Code)	Reached	Identified	Information Provided
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	7/5/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
State of the County Address &					All Services, CCE, HCE, ADI,
Luncheon	7/6/2018	32967	8	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	7/9/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	7/9/2018	32960	1	ADC	HCE, ADI, OAA
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	7/10/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	7/10/2018	32960	1	ADC	HCE, ADI, OAA
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	7/11/2018	32962	1	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Taxpayer Association Luncheon	7/11/2018	32960	9	All	OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	7/12/2018	32960	1	ADC	HCE, ADI, OAA
Community Services Alliance					All Services, CCE, HCE, ADI,
Luncheon	7/12/2018	32967	5	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	7/13/2018	32967	1	HDM	HCE, ADI, OAA, EHEAP

					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	7/13/2018	32960	1	ADC	HCE, ADI, OAA
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	7/16/2018	32960	1	ADC	HCE, ADI, OAA
Indian River County Chamber of					All Services, CCE, HCE, ADI,
Commerce Board Meeting	7/16/2018	32960	10	All	OAA, EHEAP
		32966 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	7/17/2018	32966	2	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	7/19/2018	32966	1	HDM	HCE, ADI, OAA, EHEAP
City of Vero Beach, Senior Activities					All Services, CCE, HCE, ADI,
in Community	7/19/2018	32963	3	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	7/20/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
				Sign up for	
				special needs	Special Needs Shelter
MOWWR HV - R. Smith	7/20/2018	32960	1	shelter	Application
		32958 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	7/23/2018	32960	2	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-SEBADC	7/23/2018	32958	1	Adult Day Care	HCE, ADI, OAA
Senior Activities in Community	_ (		_		All Services, CCE, HCE, ADI,
Meeting	7/23/2018	32962	1	All	OAA, EHEAP
					In-Facility
TOUD VEADO	7/24/2010	22050		100	Respite/Daycare, CCE,
TOUR-VBADC	7/24/2018	32960	1	ADC	HCE, ADI, OAA
	7/24/2010	22055	-		All Services, CCE, HCE, ADI,
Vero Business Networking Lucheon	7/24/2018	32966	7	All	OAA, EHEAP
DDM/A4 Lunch & Looks	7/24/2010	22067	0	A 11	All Services, CCE, HCE, ADI,
PRWM Lunch & Learn	7/24/2018	32967	9	All	OAA, EHEAP
Indian River County Chamber	7/24/2245		-		All Services, CCE, HCE, ADI,
Leadership Dinner	7/24/2018	32963	9	All	OAA, EHEAP
	7/25/2010	22050	4		EMOW, All SERVICES, CCE,
Emergency Meal Assessment	7/25/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP

					All Services, CCE, HCE, ADI,
Health South Meeting	7/25/2018	32960	2	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/1/2018	32967	1	HDM	HCE, ADI, OAA, EHEAP
		32958,			
		32960,			
		32966, and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/2/2018	32966	4	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/3/2018	32962	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	8/3/2018	32960	1	ADC	HCE, ADI, OAA
					All Services, CCE, HCE, ADI,
Rotary Club Speaking Engagement	8/4/2018	32960	25	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/7/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Moonshot Moment Luncheon	8/7/2018	32966	9	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
Rotary Club Dinner	8/7/2018	32960	20	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
United Way Day of Caring	8/7/2018	32960	9	All	OAA, EHEAP
		32858 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/8/2018	32966	2	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Taxpayer Association Luncheon	8/8/2018	32960	7	All	OAA, EHEAP
		32960 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/9/2018	32960	2	HDM	HCE, ADI, OAA, EHEAP
Community Services Alliance					All Services, CCE, HCE, ADI,
Luncheon	8/9/2018	32967	5	All	OAA, EHEAP
Indian River Medical Center Clinical					All Services, CCE, HCE, ADI,
Staff Luncheon	8/10/2018	32960	25	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
FCOA Networking Reception	8/13/2018	33602	15	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/15/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP

					All Services, CCE, HCE, ADI,
TCCH Health Fair	8/15/2018	32960	30	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
Renaissance After Hours Event	8/16/2018	32960	10	All	ΟΑΑ, ΕΗΕΑΡ
					All Services, CCE, HCE, ADI,
Senior Collaborative	8/16/2018	32960	12	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/17/2018	32966	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	8/17/2018	32960	1	ADC	HCE, ADI, OAA
					All Services, CCE, HCE, ADI,
VNA- Fall Prevention	8/17/2018	32960	6	All	OAA, EHEAP
Visiting Nurses Association - Fall					All Services, CCE, HCE, ADI,
Prevention	8/17/2018	32960	20	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
Humane Society Meeting	8/17/2018	32960	3	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/20/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Tunnel of Hope	8/20/2018	32967	10	All	OAA, EHEAP
Indian River County Chamber of					All Services, CCE, HCE, ADI,
Commerce Board Meeting	8/20/2018	32960	10	All	ΟΑΑ, ΕΗΕΑΡ
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/21/2018	32962	1	HDM	HCE, ADI, OAA, EHEAP
					Community Coach
					Application and the IR
					Volunteer Ambulance
MOWWR HV - P. Jones	8/21/2018	32962	1	Transportation	brochure
		32960 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/22/2018	32962	2	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Home Instead Networking Event	8/22/2018	32960	10	All	OAA, EHEAP
Lexington Club Speaking					All Services, CCE, HCE, ADI,
Engagement	8/22/2018	32960	20	All	ΟΑΑ, ΕΗΕΑΡ
EHEAP APPOINTMENT	8/22/2018	32960	2	EHEAP	Home Visit

		32962 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/23/2018	32962	2	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/24/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	8/24/2018	32960	1	ADC	HCE, ADI, OAA
					All Services, CCE, HCE, ADI,
Renaissance Health Fair	8/24/2018	32960	25	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/27/2018	32963	1	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/28/2018	32966	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-SEBADC	8/28/2018	32958	1	Adult Day Care	HCE, ADI, OAA
					All Services, CCE, HCE, ADI,
Vero Business Networking Lucheon	8/28/2018	32966	5	All	OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	8/29/2018	32960	1	ADC	HCE, ADI, OAA
		32966 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/30/2018	32960	2	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	8/30/2018	32960	1	ADC	HCE, ADI, OAA
					All Services, CCE, HCE, ADI,
Executive Roundtable	8/30/2018	32960	9	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	8/31/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/4/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
		32958 AND			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/5/2018	32966	2	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/6/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP

Treasure Coast Community Health					All Services, CCE, HCE, ADI,
Informational Cocktail Party	9/6/2018	32963	20	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
Day of Caring - United Way	9/8/2018	32960	40	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
Senior Collaborative	9/10/2018	32960	4	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/11/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Taxpayer Association Luncheon	9/12/2018	32960	9	All	OAA, EHEAP
		32966 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/14/2018	32966	2	HDM	HCE, ADI, OAA, EHEAP
Indian River County Chamber of					All Services, CCE, HCE, ADI,
Commerce Board Meeting	9/17/2018	32960	11	All	ΟΑΑ, ΕΗΕΑΡ
		32960 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/18/2018	32960	2	HDM	HCE, ADI, OAA, EHEAP
		32967 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/19/2018	32960	2	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
We Are Vero Networking Luncheon	9/19/2018	32960	10	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
Renaissance After Hours Event	9/20/2018	32960	6	All	OAA, EHEAP
Indian River Chamber Industry					All Services, CCE, HCE, ADI,
Appreciation Luncheon	9/20/2018	32966	10	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/21/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	9/21/2018	32960	1	ADC	HCE, ADI, OAA
					All Services, CCE, HCE, ADI,
United Way Bowling Tournament	9/22/2018	32960	8	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
Vero Business Networking Lucheon	9/25/2018	32960	5	All	OAA, EHEAP
					Community Coach
					Application and the IR
MOWWR HV - B. Shelton	9/25/2018	32962	1	Transportation	Volunteer Ambulance

					brochure. Special Needs shelter application
					IR Volunteer Ambulance
MOWWR HV - C. Denapoli	9/25/2018	32962	1	Transportation	brochure
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/26/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/27/2018	32962	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	9/27/2018	32960	1	ADC	HCE, ADI, OAA
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	9/27/2018	32960	1	ADC	HCE, ADI, OAA
		32963,			
		32958 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	9/28/2018	32967	3	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/1/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/2/2018	32966	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	10/2/2018	32960	1	ADC	HCE, ADI, OAA
	10/0/0010				All Services, CCE, HCE, ADI,
ST. Francis Training	10/2/2018	32960	2	All	OAA, EHEAP
	10/2/2010	32968 and	2		EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/3/2018	32958	2	HDM	HCE, ADI, OAA, EHEAP
	10/5/2010	22055	4		EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/5/2018	32966	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility Respite/Daycare, CCE,
TOUR-VBADC	10/5/2018	32960	1	ADC	HCE, ADI, OAA
	10/5/2018	52900	1		EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/8/2018	32968	1	HDM	HCE, ADI, OAA, EHEAP
EHEAP APPOINTMENT	10/8/2018	32967	3	EHEAP	Home Visit

		32967 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/9/2018	32960	2	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	10/9/2018	32960	1	ADC	HCE, ADI, OAA
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/10/2018	32967	1	HDM	HCE, ADI, OAA, EHEAP
EHEAP APPOINTMENT	10/10/2018	32966	1	EHEAP	Home Visit
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/11/2018	32966	1	HDM	HCE, ADI, OAA, EHEAP
Community Services Alliance					All Services, CCE, HCE, ADI,
Luncheon	10/11/2018	32967	5	All	OAA, EHEAP
		32958,			
		32967,			
		32962 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/12/2018	32966	4	HDM	HCE, ADI, OAA, EHEAP
		32966,			
		32958,			
		32966, and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/15/2018	32962	4	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Community Leaders Breakfast	10/16/2018	32967	7	All	OAA, EHEAP
		32966 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/17/2018	32968	2	HDM	HCE, ADI, OAA, EHEAP
		32958 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/18/2018	32960	2	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-SEBADC	10/18/2018	32958	1	Adult Day Care	HCE, ADI, OAA
		32960 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/19/2018	32966	2	HDM	HCE, ADI, OAA, EHEAP
EHEAP APPOINTMENT	10/22/2018	32960	1	EHEAP	Home Visit
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/23/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/24/2018	32962	1	HDM	HCE, ADI, OAA, EHEAP

EHEAP APPOINTMENT	10/24/2018	32960	1	EHEAP	Home Visit
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/25/2018	32968	1	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Senior Collaborative	10/25/2018	32960	8	All	ΟΑΑ, ΕΗΕΑΡ
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/26/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	10/29/2018	32960	1	ADC	HCE, ADI, OAA
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/30/2018	32966	1	HDM	HCE, ADI, OAA, EHEAP
Florida Community Care Town Hall					All Services, CCE, HCE, ADI,
Meeting	10/30/2018	32960	2	All	ΟΑΑ, ΕΗΕΑΡ
		32958 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	10/31/2018	32967	2	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Sunshine Town Hall Meeting	10/31/2018	32960	2	All	ΟΑΑ, ΕΗΕΑΡ
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/1/2018	32967	1	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/2/2018	32966	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-SEBADC	11/2/2018	32958	1	Adult Day Care	HCE, ADI, OAA
					All Services, CCE, HCE, ADI,
2018 Symposium on Poverty	11/2/2018	32967	3	All	ΟΑΑ, ΕΗΕΑΡ
					All Services, CCE, HCE, ADI,
Symposium on Poverty	11/2/2018	32966	4	All	ΟΑΑ, ΕΗΕΑΡ
		32958,			
		32960,			
		32962, and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/5/2018	32962	4	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	11/5/2018	32960	1	ADC	HCE, ADI, OAA

					All Services, CCE, HCE, ADI,
Professional Woman's Network	11/5/2018	32963	10	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/7/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
Young Professionals Networking					All Services, CCE, HCE, ADI,
Luncheon	11/7/2018	32960	7	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
Impact 100 Brunch	11/7/2018	32967	9	All	OAA, EHEAP
		32960 and			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/8/2018	32967	2	HDM	HCE, ADI, OAA, EHEAP
Community Services Alliance					All Services, CCE, HCE, ADI,
Luncheon	11/8/2018	32967	5	All	OAA, EHEAP
					All Services, CCE, HCE, ADI,
Wine Women & Shoes	11/8/2018	32960	15	All	ΟΑΑ, ΕΗΕΑΡ
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/9/2018	32962	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	11/9/2018	32960	1	ADC	HCE, ADI, OAA
Women's Premier Network					All Services, CCE, HCE, ADI,
Luncheon	11/9/2018	32960	15	All	ΟΑΑ, ΕΗΕΑΡ
					All Services, CCE, HCE, ADI,
Coffee With The Mayor Breakfast	11/9/2018	32960	8	All	ΟΑΑ, ΕΗΕΑΡ
Sunshine Physical Therapy Sunshine					All Services, CCE, HCE, ADI,
Kids Gala	11/10/2018	32967	12	All	ΟΑΑ, ΕΗΕΑΡ
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/13/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
Sebastian Chamber Networking					All Services, CCE, HCE, ADI,
Luncheon	11/13/2018	32958	15	All	OAA, EHEAP
Vero Chamber- Business at					All Services, CCE, HCE, ADI,
Breakfast	11/14/2018	32960	10	All	ΟΑΑ, ΕΗΕΑΡ
	, ,				All Services, CCE, HCE, ADI,
Tax Payer Association Luncheon	11/14/2018	32960	8	All	OAA, EHEAP
National Philanthropy Day					All Services, CCE, HCE, ADI,
Celebration	11/14/2018	32963	20	All	OAA, EHEAP
	, ,====0				EMOW, All SERVICES, CCE,

					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	11/15/2018	32960	1	ADC	HCE, ADI, OAA
					All Services, CCE, HCE, ADI,
Senior Collaborative	11/15/2018	32960	9	All	ΟΑΑ, ΕΗΕΑΡ
					All Services, CCE, HCE, ADI,
Falls Prevention Meeting with VNA	11/15/2018	32960	4	All	ΟΑΑ, ΕΗΕΑΡ
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	11/16/2018	32960	1	ADC	HCE, ADI, OAA
					All Services, CCE, HCE, ADI,
Festival of Trees	11/16/2018	32963	20	All	ΟΑΑ, ΕΗΕΑΡ
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/19/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Sebastian Social Respite Group	11/19/2018	32958	3	All	ΟΑΑ, ΕΗΕΑΡ
				Sign up for	
				special needs	Special Needs Shelter
MOWWR HV - C. Mahan	11/19/2018	32966	1	shelter	Application
Indian River County Chamber of					All Services, CCE, HCE, ADI,
Commerce Board Meeting	11/19/2018	32960	12	All	ΟΑΑ, ΕΗΕΑΡ
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	11/20/2018	32960	1	ADC	HCE, ADI, OAA
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/26/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
					All Services, CCE, HCE, ADI,
Vero Business Networking Lucheon	11/27/2018	32960	5	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/28/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	11/28/2018	32960	1	ADC	HCE, ADI, OAA
					All Services, CCE, HCE, ADI,
Vero Library Community Event	11/28/2018	32960	15	All	ΟΑΑ, ΕΗΕΑΡ

					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	11/29/2018	32960	1	ADC	HCE, ADI, OAA
Executive Roundtable-Speaking					All Services, CCE, HCE, ADI,
Engagement	11/29/2018	32948	30	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	11/30/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	12/3/2018	32960	1	ADC	HCE, ADI, OAA
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/5/2018	32966	1	HDM	HCE, ADI, OAA, EHEAP
Vero Chamber- Holiday & Heroes					All Services, CCE, HCE, ADI,
Breakfast	12/5/2018	32963	5	All	OAA, EHEAP
Indian River Chamber of Commerce					All Services, CCE, HCE, ADI,
Holiday Breakfast	12/5/2018	32963	20	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/7/2018	32967	1	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/7/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/7/2018	32962	1	HDM	HCE, ADI, OAA, EHEAP
Sebastian Elks Holiday at Heart					All Services, CCE, HCE, ADI,
health Fair	12/7/2018	32958	15	All	OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	12/10/2018	32960	1	ADC	HCE, ADI, OAA
Established Professionals & Young					All Services, CCE, HCE, ADI,
Professionals Network	12/11/2018	32960	10	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/12/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	12/12/2018	32960	1	ADC	HCE, ADI, OAA
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	12/12/2018	32960	1	ADC	HCE, ADI, OAA

					All Services, CCE, HCE, ADI,
Tax Payer Association Luncheon	12/12/2018	32960	10	All	OAA, EHEAP
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/13/2018	32962	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	12/13/2018	32960	1	ADC	HCE, ADI, OAA
Community Services Alliance					All Services, CCE, HCE, ADI,
Luncheon	12/13/2018	32967	6	All	ΟΑΑ, ΕΗΕΑΡ
Women's Premier Network					All Services, CCE, HCE, ADI,
Luncheon	12/14/2018	32960	15	All	ΟΑΑ, ΕΗΕΑΡ
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/17/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	12/18/2018	32960	1	ADC	HCE, ADI, OAA
					EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/20/2018	32960	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-VBADC	12/20/2018	32960	1	ADC	HCE, ADI, OAA
	40/00/0040				All Services, CCE, HCE, ADI,
Senior Collaborative	12/20/2018	32960	8	All	OAA, EHEAP
	40/00/0040		10		All Services, CCE, HCE, ADI,
United Way Executive Meeting	12/20/2018	32960	10	All	OAA, EHEAP
	10/06/0010	22252			EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/26/2018	32962	1	HDM	HCE, ADI, OAA, EHEAP
	42/27/2040	22050	4		EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/27/2018	32958	1	HDM	HCE, ADI, OAA, EHEAP
					In-Facility
TOUR VEADO	12/27/2010	22050	4	4.0.0	Respite/Daycare, CCE,
TOUR-VBADC	12/27/2018	32960	1	ADC	HCE, ADI, OAA
					In-Facility
	12/20/2010	22000	4		Respite/Daycare, CCE,
TOUR-VBADC	12/30/2018	32960	1	ADC	HCE, ADI, OAA
	12/21/2010	32958 and	2		EMOW, All SERVICES, CCE,
Emergency Meal Assessment	12/31/2018	32967	2	HDM	HCE, ADI, OAA, EHEAP

					All Services, CCE, HCE, ADI,
Vero Library Community Event	12/31/2018	32960	5	All	OAA, EHEAP
					In-Facility
					Respite/Daycare, CCE,
TOUR-SEBADC	12/3/1018	32958	1	Adult Day Care	HCE, ADI, OAA

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OAA Targeted Categories	Number of Persons Within the Targeted Population Reached through Outreach Activities During the last 6 months
Older individuals residing in rural areas	40
Low-income older individuals	300
Low-income minorities	75
Older individuals with the greatest social need	75
Older individuals with severe disabilities	20
Older individuals with limited English proficiency	50
Older individuals with Alzheimer's disease and related disorders	
with neurological and organic brain dysfunction (and the	
caretakers of such individuals)	65
Older individuals at risk for institutional placement	140
Caregivers of older individuals with Alzheimer's disease and	
related disorders with neurological and organic brain dysfunction	85
Grandparents or older individuals who are relative caregivers who	
provide care for children with severe disabilities	20
Caregivers who are older individuals with greatest social need	75
Caregivers who are older individuals with greatest economic need	
(with particular attention to low-income older individuals)	45

Caregivers who are older individuals who provide care to	
individuals with severe disabilities, including children with severe	
disabilities.	15
TOTAL	1005

## SEMI-ANNUAL REPORT OF PROVIDER OUTREACH

**PROVIDER NAME: Okeechobee Senior Services** SEMI-ANNUAL PERIOD July - December 2018

Event Numbe r	Type of Event or Activity	Date	Location (including Zip Code)	Total # of Participant s Reached	Individual Service Needs Identified	Referral Sources or Information Provided
1	Fearless Caregiver Conferenc e	9/20/18	Indian River State College	32	Resp, Cong, HDM, PC, Hmk, Eheap	Booth manned by staff at event. Brochures distributed and reviewed with individuals. Referrals made to Elder Helpline
2	Senior Forum	10/30/1 8	Okeechobe e Civic Center	5	Resp, Cong, HDM, PC, Hmk, Eheap	Booth manned by staff at event. Brochures distributed and reviewed with individuals. Referrals made to Elder Helpline
OAA Targeted Categories			Targeted Through ( During th	of Persons With Population Rea Outreach Activit e Last 6 Months	ched ties	
Older individuals residing in rural areas				37		

37

Unknown Low-income older individuals Low income minorities Unknown Older individuals with the greatest social need Unknown Older individuals with severe disabilities Unknown Older individuals with limited English proficiency Unknown

Older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals)	0
Older individuals at risk for institutional placement	Unknown
Caregivers of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction	32
Grandparents or older individuals who are relative caregivers who provide care for children with severe disabilities	0
Caregivers who are older individuals with greatest social need	Unknown
Caregivers who are older individuals with economic needs (with particular attention to low-income older individuals)	Unknown
Caregivers who are older individuals who provide care to individuals with severe disabilities, including children with severe disabilities	Unknown
Total	37

	SEMI-AN	NUAL REPOR	RT OF PROVI	DER	
	OUTREA	СН			ATTACHMENT XVI
	PROVIDER	NAME			
			M.D. Home H	<u>lealth, LLC</u>	
	SEMI-ANN	UAL PERIOD			
		Ι		Dec-18	
_				Individual	
Type of		Location	Total # of	Service	
Event or	<b>_</b> .	(Including	Participants	Needs	Referral Sources or Information
Activity	Date	Zip Code)	Reached	Identified	Provided
					Physician office/brochures self care
Presentation	3-Dec	WPB, 33407	4	Caregivers	info.
Presentation	7-Dec	WPB, 33407	6	Caregivers	Rehab Center/Self care info.
Presentation	17-Dec	WPB, 33409	4	Caregivers	BNPPB/ Self Care Info.
		OAA Target	ted Categories		
	Older indiv	viduals residing	in rural areas		
	Low incom	ne older individ	uals		
	Low incom	ne minorities			
	Older indiv	viduals with the	e greatest socia	l need	
	Older indiv	viduals with sev	vere disabilities	; ;	
	Older indiv	viduals with lim	ited English pr	oficiency	
	Older indiv	viduals with Alz	heimer's disea	se and	
	related dis	orders with ne	urological and	organic brain	
	dysfunctio	n (and the care	takers of such	individuals)	
	Older indiv	viduals at risk fo	or institutional	placement	

Caragivare of older individuals with Alabaimar's	]
Caregivers of older individuals with Alzheimer's	
disease and related disorders with neurological and	
organic brain dysfunction	
Grandparents or older individuals who are relative	
caregivers who provide care for children with severe	
disabilities.	
Caregivers who are older individuals with greatest	
social need	
Caregivers who are older individuals with greatest	
economic need (with particular attention to low	
income older individuals).	
Caregivers who are older individuals who provide	
care to individuals with severe disabilities including	
children with severe disabilities.	
TOTAL	

SEMI-ANNUAL REPORT OF PROVIDER OUTREACH

ATTACHMENT XVII

	PROVIDER N	AME	<u>Counseling</u>		Treasure Coast
	SEMI-ANNUA	AL PERIOD	July-Decembe	er 2018	_
		Location	Total # of		<b>Referral Sources</b>
Type of Event or		(Including Zip	Participants	Individual Service	or Information
Activity	Date	Code)	Reached	Needs Identified	Provided
Educational		TC Hospice,		caregiver	caregiver
Event	7/25/2018	Stuart 34997	20	counseling/SG	counseling/ SG
		PSL Community			
Educational		Center, PSL		caregiver	caregiver
Event	8/30/2018	34984	30	counseling/ SG	counseling/ SG
		Indian River			CG
Fearless		College <i>,</i> OK		caregiver	counsel/support
Caregiver Event	9/20/2018	34972	50	counseling	group
		COASL, PSL		caregiver	caregiver
Health Fair	10/23/2018	34984	50	counseling/ SG	counseling/ SG
		Okee Civic			
		Center, Okee		caregiver/GP	caregiver/GP
Sr. Forum	10/30/2018	34974	25	counseling/SG	counseling
Educational		TC Hospice,		caregiver	caregiver
Event	10/31/2018	Stuart 34997	25	counseling/SG	counseling/ SG
Caregiver		Fenn Center, FP		caregiver	caregiver
conference	11/7/2018	34982	20	counseling/SG	counseling/ SG
Caregiver		Kane Center,		caregiver	caregiver
conference	11/13/2018	Stuart 34997	55	counseling/SG	counseling/ SG
		Epic Mission,			
GRG event	11/14/2018	Vero Bch 32966	8	GRG counseling	GRG counseling
			283		

OAA Targeted Categories	Number of Persons Within the Targeted Population Reached through Outreach Activities During the last 6 months
Older individuals residing in rural areas	75
Low-income older individuals	75
Low-income minorities	20
Older individuals with the greatest social need	75
Older individuals with severe disabilities	20
Older individuals with limited English proficiency	20
Older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the	
caretakers of such individuals)	175
Older individuals at risk for institutional placement	5
Caregivers of older individuals with Alzheimer's disease and	
related disorders with neurological and organic brain dysfunction	150
Grandparents or older individuals who are relative caregivers who	
provide care for children with severe disabilities	1
Caregivers who are older individuals with greatest social need	75
Caregivers who are older individuals with greatest economic need	
(with particular attention to low-income older individuals)	45
Caregivers who are older individuals who provide care to	
individuals with severe disabilities, including children with severe	
disabilities.	20
TOTAL	756

	SEMI-ANNUAL OUTREACH REPORT										
			FLORIDA RURA								
	JULY 1, 2018 – DECEMBER 31, 2018										
Date / Time of Event	Activity Type*	Торіс	Location of Event (Include Zip Code)	Total Number of Participants	Audience / Attendee Type**	Service Needs Identified	Referral sources or information provided				
07/05/2018	Outreach	Multiple Topics	Fort Pierce, 34950	55	Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers				
07/11/2018	Outreach	Multiple Topics	Percy Peek Gym, Fort Pierce, 34947	1000	Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers				
07/24/2018	Outreach	Multiple Topics	Okeechobee Sch. District, Okee., 34974	29	Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers				
07/26/2018	Outreach	Multiple Topics	Fort Pierce, 34950	100	Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers				
07/28/2018	Outreach	Multiple Topics	Okeechobee High Sch., Okeechobee, 34972	1000	Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers				
08/07/2018	Outreach	Multiple Topics	Fort Pierce, 34950		Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers				
08/10/2018	Outreach	Multiple Topics	Indian River State College, Okeechobee, 34972	125	Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers				

			PAL Center,				Counsel and Advice/Legal
			Fort Pierce,		Mixed Age		Education
08/10/2018	Outreach	Multiple Topics	34950	500	Group	Miscellaneous	Flyers
							Counsel and
			Park Terrace Housing, Fort		Senior		Advice/Legal Education
08/13/2018	Outreach	Multiple Topics	Pierce, 34950	15	Group	Miscellaneous	Flyers
00/13/2010	Outreach	Multiple Toples	110100, 54950	15	Gloup	winseemaneous	Counsel and
			Okeechobee				Advice/Legal
			Sch. District,		Mixed Age		Education
08/28/2018	Outreach	Multiple Topics	Okee., 34974	36	Group	Miscellaneous	Flyers
							Counsel and
							Advice/Legal
			Fort Pierce,		Mixed Age		Education
08/30/2018	Outreach	Multiple Topics	34950	75	Group	Miscellaneous	Flyers
			Law Library,				
			Fort Pierce,		Mixed Age		Counsel and
09/05/2018	Outreach	Consumer/Finance	34950	5	Group	Bankrupcy/Debt	Advice
			D				Counsel and
			Port St. Lucie		N.C. 1.A	D (	Advice/Legal
00/14/2010	0 ( 1		PD, Port St.	4	Mixed Age	Domestic	Education
09/14/2018	Outreach	Multiple Topics	Lucie, 34984	4	Group	Violence	Flyers Counsel and
							Advice/Legal
			Fort Pierce,		Mixed Age		Education
09/20/2018	Outreach	Multiple Topics	34950	100	Group	Miscellaneous	Flyers
07/20/2010	Outreach	Multiple Toples	51750	100	Group	Wilseemaneous	Counsel and
			Okeechobee				Advice/Legal
			Sch. District,		Mixed Age		Education
09/25/2018	Outreach	Multiple Topics	Okee., 34974	32	Group	Miscellaneous	Flyers
							Counsel and
							Advice/Legal
			Fort Pierce,		Mixed Age		Education
10/11/2018	Outreach	Multiple Topics	34946	86	Group	Miscellaneous	Flyers
			Okeechobee				Counsel and
			Civic Ctr.,				Advice/Legal
			Okeechobee,	_	Senior		Education
10/30/2018	Outreach	Multiple Topics	34972	30	Group	Miscellaneous	Flyers

11/02/2018	Outreach	Individual Rights	Indian River State College, Fort Pierce, 34981	25	Mixed Age Group	Miscellaneous	Counsel and Advice/Legal Education Flyers
					<b>L</b>		Counsel and
							Advice/Legal
			Fort Pierce,		Mixed Age		Education
11/08/2018	Outreach	Multiple Topics	34950	25	Group	Miscellaneous	Flyers
			St. Lucie Cty				Counsel and
			Courthouse,				Advice/Legal
			Fort Pierce,		Mixed Age		Education
11/08/2018	Clinic	Individual Rights	34950		Group	Miscellaneous	Flyers
							Counsel and
							Advice/Legal
			Fort Pierce,		Mixed Age		Education
11/29/2018	Outreach	Multiple Topics	34950	60	Group	Miscellaneous	Flyers

		PROVIDER NAM	NUAL REPORT OF PROVIDER OUTREACH ME: PBC DIVISION OF SENIOR SERVICES (DOSS) JAL PERIOD: JULY, 2018 - DECEMBER 2018		1	
· AAE	•)					
Event Number	/	Date	Location (Including Zip Code)	Total # of Participants Reached	Individual Service Needs Identified	Referral Sources o Information Provided
1	Home Visit EHEAP	7/3/2018	Riviera Beach, FL 33404	1	EHEAP	Brochures
2	Home Visit EHEAP	7/10/2018	West Palm Beach, FL 33415	1	EHEAP	Brochures
3	Home Visit EHEAP	7/11/2018	Lake Worth, FI 33462	1	EHEAP	Brochures
4	Home Visit EHEAP	7/11/2018	Royal Palm Beach, FI 33411	1	EHEAP	Brochures
5	Home Visit EHEAP	7/12/2018	LakeWorth, FI 33461	1	EHEAP	Brochures
6	Home Visit EHEAP	7/12/2018	West Palm Beach, FI 33414	1	EHEAP	Brochures
7	Home Visit EHEAP	7/12/2018	West Palm Beach, FI 33403	1	EHEAP	Brochures
8	Haitian Heroes Back to School	7/21/2018	West Palm Beach, FI 33415	95	All services	Brochures
9	Health Fair (Tabernacle)	7/28/2018	West Palm Beach, FI 33401	80	All services	Brochures
10	Senior Expo	8/10/2018	Royal Palm Beach, FL 33411	300	All services	Brochures
11	Back To School Bash	8/21/2018	Royal Palm Beach, FL 33411	90	All services	Brochures
12	Home Visit EHEAP	8/30/2018	West Palm Beach 33417	1	EHEAP	Brochures
13	Home Visit EHEAP	8/31/2018	West Palm Beach 33414	1	EHEAP	Brochures
14	Back To School Bash	8/4/2018	Pahokee, FI 33476	200	All services	Brochures
15	Back To School Bash	8/11/2018	Belle Glade, Fl 33430	125	All services	Brochures
16	Glades Pioneer Terrace	9/26/2018	Belle Glade, FI 33430	40	All services	Brochures
17	Community Partner Roundtable	9/27/2018	Wellington, FI 33414	20	All services	Brochures
18	Home Visit EHEAP	9/5/2018	Lake Worth, FI 33462	1	EHEAP	Brochures
19	Home Visit EHEAP	9/12/2018	West Palm Beach, FI 33407	1	EHEAP	Brochures
20	Home Visit EHEAP	9/14/2018	West Palm Beach, FI 33410	1	EHEAP	Brochures
21	Home Visit EHEAP	9/18/2018	West Palm Beach, FI 33403	1	EHEAP	Brochures
22	Home Visit EHEAP	9/18/2018	West Palm Beach, FI 33417	1	EHEAP	Brochures
23	Home Visit EHEAP	9/19/2018	West Palm Beach, FI 33415	1	EHEAP	Brochures
24	Home Visit EHEAP	9/21/2018	West Palm Beach, FI 33404	1	EHEAP	Brochures
25	Home Visit EHEAP	9/21/2018	Lake Worth, FI 33460	1	EHEAP	Brochures
26	Home Visit EHEAP	9/25/2018	West Palm Beach, FI 33404	1	EHEAP	Brochures
27	Home Visit EHEAP	9/26/2018	West Palm Beach, FI 33458	1	EHEAP	Brochures
28	Home Visit EHEAP	9/26/2018	West Palm Beach, FI 33458	1	EHEAP	Brochures
29	Western Region Community Policing (PBSO)	10/18/2018	South Bay, FI 33493	220	EHEAP	Brochures
30	2018 Senior Academy	10/24/2018	Jupiter, FI 33458	40	All services	Brochures
31	Home Visit EHEAP	10/16/2018	Lake Worth, FI 33462	1	EHEAP	Brochures
31	Home Visit EHEAP	10/19/2018	West Palm Beach, FI 33404	1	EHEAP	Brochures
33	Home Visit EHEAP	10/22/2018	Lake Worth, FI 33462	1	EHEAP	Brochures
34	Home Visit EHEAP	10/24/2018	West Palm Beach, FI 33404	1	EHEAP	Brochures
35	Home Visit EHEAP	10/29/2018	West Palm Beach, FI 33417	1	EHEAP	Brochures
35	Home Visit EHEAP	10/30/2018	Lake Worth, FI 33467	1	EHEAP	Brochures
30	Home Visit EHEAP	10/29/2018	West Palm Beach, FI 33417	1	EHEAP	Brochures
37	Professional Resource Networking Meeting		West Palm Beach, FI 33415	30	All services	Brochures
		10/23/2018	-			Brochures
39	2nd Annual Health and Wellness Festival	11/7/2018	Belle Glade, FI 33430	150	All services	Brochures
40	Meet & Greet Congregate Nutrition Program Home Visit EHEAP	11/19/2019 11/13/2018	West Palm Beach, FI 33401 West Palm Beach, FI 33417	16	All services	
41	Home Visit EHEAP		West Palm Beach, FI 33417 West Palm Beach, FI 33415	1	EHEAP	Brochures
42	Home Visit EHEAP	11/13/2018 11/15/2018	West Palm Beach, FI 33415 West Palm Beach, FI 33404	1	EHEAP	Brochures

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### LEGAL AID SOCIETY OF PALM BEACH COUNTY

Outreach Title	Outreach	Date	Location	Zip Code	Number of	Individual Service Needs Identified
	Туре	Date	LUCATION	Coue	Attendees	Neeus luentineu
			Mid County Sr.			
			Center, 3680			
Mid County Sr.			Lake Worth Rd.,			
Center	Outreach	07/11/2018	Lake Worth, FL	33461	2	Consumer
			S County Civic			
Fearless Caregiver			Ctr, 16700 Jog			
Conference	Outreach	07/17/2018	Rd, DB, 33446	33446	250	Wills, public benefits
			7305 N Military			
			Trl, Riviera			
Veterans Legal Clinic	Clinic	7/17/2018	Beach, FL	33410	15	Wills, VA Benefits
Urban League of			1700 N.			
PBC Homebuyer			Australian Ave.,			
Education		07/24/2040	West Palm	22407	40	resources for
Workshop	Outreach	07/21/2018	Beach, FL	33407	43	homebuyers
			Mid County Sr.			
Mid County Cr			Center, 3680			
Mid County Sr.	Outropph	00/00/2010	Lake Worth Rd.,	22464	4	\\/;II.o
Center	Outreach	08/08/2018	Lake Worth, FL 3680 Lake Worth	33461	4	Wills
Mid County Sr						
Mid County Sr Center	Outreach	09/12/2018	Rd., Lake Worth, FL	33461	4	Consumer
Center	Outreath	09/12/2010	16	55401	4	CONSUME

			7305 N Military Trl, Riviera			
Veterans Legal Clinic Bankruptcy & Debt	Clinic	10/18/2018	Beach, FL	33410	15	bankruptcy
Relief Clinc: Belle			2916 State Road			
Glade	Workshop	09/27/2018	#15	33430	14	Wills, Consumer
			3680 Lake Worth			
Mid County Sr			Rd., Lake Worth,			
Center 11th Annual	Outreach	10/10/2018	FL	33461	6	Wills, Consumer
Community			7305 N Military			
Outreach Day for			Trl, Riviera			
Veterans	Outreach	11/1/2018	Beach, FL	33410	150	VA beneifts
			Mid County Sr.			
			Center, 3680			
Mid County Sr.			Lake Worth Rd.,			
Center	Outreach	11/14/2018	Lake Worth, FL	33461	1	Consumer
			Jupiter			
			Community			
Town of Jupiter			Center, 200			
Senior Academy			Military Tr,			
Resource Fair	Outreach	11/14/2018	Jupiter, FL	33458	150	Wills, Consumer
			7305 N Military Trl, Riviera			
Veterans Legal Clinic	Clinic	11/15/2018	Beach, FL	33410	18	VA beneifts
Veteralis Legar Chille	Chine	11/13/2018	3680 Lake Worth	33410	10	VA Dements
Mid County Sr			Rd., Lake Worth,			
Center	Outreach	12/12/2018	FL	33461	2	Foreclosure
		, ,	Tabernacle		_	
Health Fair	Fairs	07/28/2018	Missionary	33401	375	Guardianship

Veterans Legal Clinic Totals:	Clinic	12/21/2018 Beach, FL 33410 OAA Targeted Categories				Wills, public benefits lumber of ersons Within he Targeted opulation eached through outreach
Law Landlord Tenant Law to Delray Courthouse Clerk's Office	Workshop Community Legal Education	11/16/2018 11/28/2018	Medical Center 200 W Atlantic Ave, Delray Beach, FL 7305 N Military Trl, Riviera	33410 33444	54 15	rental assistance landlord Tenant
Homeowners Legal Rights Clinic Information Clinic High Point Condos #6 Landlord / Tenant	Community Legal Education Community Legal Education Workshop	09/11/2018 09/13/2018 09/17/2018	Baptist Church 801 8th St. Spanish River Library Boca Raton 2419 10 Avenue N Lake Worth, FL 33461 5230 Lakefront Blvd West Palm Beach VA	33431 33461 33445	20 6	HOA rental assistance/exploitation HOA

Older individuals residing in rural areas	1
Low-income older individuals	249
Low-income minorities	249
Older individuals with the greatest social need	80
Older individuals with severe disabilities	21
Older individuals with limited English proficiency	3
Older individuals with Alzheimer's disease and related disorders	
with neurological and organic brain dysfunction (and the	
caretakers of such individuals)	113
Older individuals at risk for institutional placement	1
Caregivers of older individuals with Alzheimer's disease and	
related disorders with neurological and organic brain	
dysfunction	77
Grandparents or older individuals who are relative caregivers	
who provide care for children with severe disabilities	0
Caregivers who are older individuals with greatest social need	12
Caregivers who are older individuals with greatest economic	
need (with particular attention to low-income older individuals)	20
Caregivers who are older individuals who provide care to	
individuals with severe disabilities, including children with	
severe disabilities.	
TOTAL	5

Insert completed forms for each direct service waiver request. It is not necessary to submit waiver requests for outreach, information and assistance, and referral, as the state has a statewide waiver for these services.

OAA Title: □ III B □ III C1 □ III C2 □ III D □ III E

Service: < Chronic Disease Self-Management Program>

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the State Agency or an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

- I. Please select the basis for which the waiver is requested (more than one may be selected).
  - (i) provision of such services by the State agency or the Area Agency on Aging is necessary to assure an **adequate supply** of such services;
  - □ (ii) such services are directly related to such State agency's or Area Agency on Aging's **administrative functions**; or
  - □ (iii) such services can be provided **more economically, and with comparable quality**, by such State agency or Area Agency on Aging.
- II. Provide a detailed justification for the waiver request.
- There were no bids submitted for this service as part of our 2016 Older Americans Act Request for Proposal. As a result of our environmental scan we found only two providers offering this service in Planning and Service Area 9. Lake Okeechobee Rural Health Network offers it for the qualifying rural areas around Lake Okeechobee in PSA 9. The Caridad Center in West Boynton Beach of Palm Beach County offers this training at their center but only in Spanish. The Area Agency on Aging of Palm Beach/Treasure Coast has been providing this training for more than 3 years and has trained staff and volunteers ready to continue the program throughout the Planning and Service Area.
- III. Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s).

See Appendix 4

Insert completed forms for each direct service waiver request. It is not necessary to submit waiver requests for outreach, information and assistance, and referral, as the state has a statewide waiver for these services.

OAA Title:  $\Box$  III B  $\Box$  III C1  $\Box$  III C2  $\boxtimes$  III D  $\Box$  III E

Service: <Diabetes Self-Management Program>

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the State Agency or an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

- I. Please select the basis for which the waiver is requested (more than one may be selected).
  - (i) provision of such services by the State agency or the Area Agency on Aging is necessary to assure an **adequate supply** of such services;
  - □ (ii) such services are directly related to such State agency's or Area Agency on Aging's **administrative functions**; or
  - □ (iii) such services can be provided **more economically, and with comparable quality**, by such State agency or Area Agency on Aging.
- II. Provide a detailed justification for the waiver request.
- There were no bids submitted for this service as part of our 2016 Older Americans Act Request for Proposal. As a result of our environmental scan we found only two providers offering this service in Planning and Service Area 9. Lake Okeechobee Rural Health Network offers it for the qualifying rural areas around Lake Okeechobee in PSA 9. The Caridad Center in West Boynton Beach of Palm Beach County offers this training at their center but only in Spanish. The Area Agency on Aging of Palm Beach/Treasure Coast has been providing this training for more than 3 years and has trained staff and volunteers ready to continue the program throughout the Planning and Service Area.
- III. Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s).See Appendix 4

Insert completed forms for each direct service waiver request. It is not necessary to submit waiver requests for outreach, information and assistance, and referral, as the state has a statewide waiver for these services.

OAA Title: 🗌 III B 🗌 III C1 🔹 🖾 III C2 🖾 III D 🗔 III E

Service: A Matter of Balance

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the State Agency or an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

- I. Please select the basis for which the waiver is requested (more than one may be selected).
  - (i) provision of such services by the State agency or the Area Agency on Aging is necessary to assure an **adequate supply** of such services;
  - □ (ii) such services are directly related to such State agency's or Area Agency on Aging's **administrative functions**; or
  - □ (iii) such services can be provided **more economically, and with comparable quality**, by such State agency or Area Agency on Aging.
- II. Provide a detailed justification for the waiver request.

There were no bids submitted for this service as part of our 2016 Older Americans Act Request for Proposal. As a result of our environmental scan we found only one provider offering this service free of charge in our Planning and Service Area 9. This is a health care provider in Palm Beach County that at the current time does not have coaches to deliver the workshop. Even if this provider can re-start workshops, data from the Department of Health State of Florida, Bureau of Community Health Assessment, Division of Public Health Statistics and Performance Management shows that, for our Planning and Service Area in 2018, 326 persons aged 65+ had falls that resulted in a fatality, 25,860 persons 65+ had falls that resulted in an emergency department visit, and 9.255 persons 65+ had falls that resulted in a hospitalization. We believe the additional workshops that we can offer are necessary in order to assure an adequate supply of such services. The Area Agency on Aging of Palm Beach/Treasure Coast has been providing this training for more than 3 years and has trained staff and volunteers ready to continue the program throughout the Planning and Service Area.>

III. Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s).

See Appendix 4

Insert completed forms for each direct service waiver request. It is not necessary to submit waiver requests for outreach, information and assistance, and referral, as the state has a statewide waiver for these services.

OAA Title: □ III B □ III C1 □ III C2 □ III D □ III E

Service: < Un Asunto de Equilibrio >

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the State Agency or an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

- I. Please select the basis for which the waiver is requested (more than one may be selected).
  - □ (i) provision of such services by the State agency or the Area Agency on Aging is necessary to assure an **adequate supply** of such services;
  - □ (ii) such services are directly related to such State agency's or Area Agency on Aging's **administrative functions**; or
  - □ (iii) such services can be provided **more economically, and with comparable quality**, by such State agency or Area Agency on Aging.
- II. Provide a detailed justification for the waiver request.
- There were no bids submitted for this service as part of our 2016 Older Americans Act Request for Proposal. As a result of our environmental scan we found no providers offering this service in our Planning and Service Area 9. Data from the Department of Health State of Florida, Bureau of Community Health Assessment, Division of Public Health Statistics and Performance Management shows that, for our Planning and Service Area in 2018, 326 persons aged 65+ had falls that resulted in a fatality, 25,860 persons 65+ had falls that resulted in an emergency department visit, and 9.255 persons 65+ had falls that resulted in a hospitalization. With this number of falls among seniors and the Older Americans Act requirement to target services to limited English speaking persons, we believe this service is necessary in order to assure an adequate supply of such services. The Area Agency on Aging of Palm Beach/Treasure Coast has been providing this training for more than 3 years and has trained staff and volunteers ready to continue the program throughout the Planning and Service Area.
- III. Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s).See Appendix 4

Insert completed forms for each direct service waiver request. It is not necessary to submit waiver requests for outreach, information and assistance, and referral, as the state has a statewide waiver for these services.

OAA Title: □ III B □ III C1 □ III C2 □ III D □ III E

Service: Tai Chi/Tai Ji Quan Moving for Better Balance

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the State Agency or an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

- I. Please select the basis for which the waiver is requested (more than one may be selected).
  - □ (i) provision of such services by the State agency or the Area Agency on Aging is necessary to assure an **adequate supply** of such services;
  - □ (ii) such services are directly related to such State agency's or Area Agency on Aging's **administrative functions**; or
  - □ (iii) such services can be provided **more economically, and with comparable quality**, by such State agency or Area Agency on Aging.
- II. Provide a detailed justification for the waiver request.
- There were no bids submitted for this service as part of our 2016 Older Americans Act Request for Proposal. As a result of our environmental scan we found one provider offering this service in the Stuart area of Martin County. Data from the Department of Health State of Florida, Bureau of Community Health Assessment, Division of Public Health Statistics and Performance Management shows that, for our Planning and Service Area in 2018, 326 persons aged 65+ had falls that resulted in a fatality, 25,860 persons 65+ had falls that resulted in an emergency department visit, and 9.255 persons 65+ had falls that resulted in a hospitalization. We believe this service is necessary in order to assure an adequate supply of such services. The workshop offered in the service area does not meet the sessions/week required in the Department of Elder Affairs Programs and Services Handbook. The Area Agency on Aging of Palm Beach/Treasure Coast has been providing this training for more than 3 years and has trained staff and volunteers ready to continue the program throughout the Planning and Service Area.

III. Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s).See Appendix 4

Insert completed forms for each direct service waiver request. It is not necessary to submit waiver requests for outreach, information and assistance, and referral, as the state has a statewide waiver for these services.

OAA Title:  $\Box$  III B  $\Box$  III C1  $\Box$  III C2  $\Box$  III D  $\boxtimes$  III E

Service: Powerful Tools for Caregivers

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by the State Agency or an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions listed below.

- I. Please select the basis for which the waiver is requested (more than one may be selected).
  - □ (i) provision of such services by the State agency or the Area Agency on Aging is necessary to assure an **adequate supply** of such services;
  - □ (ii) such services are directly related to such State agency's or Area Agency on Aging's **administrative functions**; or
  - □ (iii) such services can be provided **more economically, and with comparable quality**, by such State agency or Area Agency on Aging.
- II. Provide a detailed justification for the waiver request.
- There were no bids submitted for this service as part of our 2016 Older Americans Act Request for Proposal. As a result of our environmental scan we found no other entities providing this workshop other than our current partners. The Kane Center will be providing this service in Martin County starting 2020. We propose to offer the workshops in Palm Beach, Okeechobee, St. Lucie and Indian River Counties. We have more than 2,416 persons waiting for respite services in our Planning and Service Area as of June 2019. This indicates that there is a substantial pool of caregivers who could benefit from this workshop. This will also contribute positively to the legislated outcome measure of the caregiver's likelihood to continue to provide care. The Area Agency on Aging of Palm Beach/Treasure Coast has been providing this training for more than 3 years and has trained staff and volunteers ready to continue the program throughout the Planning and Service Area.
- III. Provide documentation of the public hearing held to gather public input on the proposal to directly provide service(s).See Appendix 4

## Appendix 2: Assurances

### Section 306 Older Americans Act

<INSERT ORGANIZATION NAME> assures the following:

1. The AAA assures that an adequate proportion, as required under section 307(a)(2) of the OAA and ODA Policy 205.00, Priority Services, of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services: services associated with access to services (transportation, outreach, information and assistance and case management services), in-home services, and legal assistance. (§306(a)(2))

2. The AAA assures it will set specific objectives for providing services to older individuals with greatest economic need and older individuals with greatest social need, include specific objectives for providing services to low-income minority older individuals and older individuals residing in rural areas, and include proposed methods of carrying out the preference in the area plan (§306(a)(4)(A)(i))

3. Each AAA shall provide assurances that the AAA will include in each agreement made with a provider of any service under this title, a requirement that such provider will:

- a. Specify how the provider intends to satisfy the service needs of low-income minority older individuals and older individuals residing in rural areas in the area served by the provider.
- To the maximum extent possible services to low-income minority older individuals and older individuals residing in rural areas in accordance with their need for such services; and
- c. Meet specific objectives established by the AAA, providing services to low-income minority older individuals and older individuals residing in rural areas within the planning and service area. (§306(a)(4)(ii))

4. The AAA assures it will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on:

- a. Older individuals residing in rural areas;
- b. Older individuals with greatest economic need (with particular attention to low-income minority older individuals and older individuals residing in rural areas);
- c. Older individuals with greatest social need (with particular attention to low-income minority older individuals and older individuals residing in rural areas);
- d. Older individuals with severe disabilities;
- e. Older individuals with limited English-speaking ability; and
- f. Older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals). (§306(a)(4)(B))

5. The AAA assures it will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas. (§306(a)(4)(C))

6. The AAA assures it will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, with agencies that develop or provide services for individuals with disabilities. (§306 (a)(5))

7. The AAA assures it will provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as older Native Americans) including:

- a. Information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the AAA will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;
- b. An assurance that the AAA will, to the maximum extent practicable, coordinate the services provided under Title VI; and
- c. An assurance that the AAA will make services under the area plan available to the same extent; as such services are available to older individuals within the planning and service area, whom are older Native Americans. (§306(a)(11))

8. The AAA assures it will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships. (§306(a))13)(A))

9. The AAA assures it will disclose to the Assistant Secretary and the State Agency:

- a. The identity of each non-governmental entity with which such agency has a contract or commercial relationships relating to providing any service to older individuals; and
- b. The nature of such contract or such relationship. (§306(a)(13)(B))

10. The AAA assures it will demonstrate that a loss or diminution on the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships. (§306(a)(13)(C))

11. The AAA assures it will demonstrate that the quantity and quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships. (§306(a)(13)(D))

12. The AAA assures it will, on the request of the Assistant Secretary of State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals (§306(a)(13)(E))

13. The AAA assures that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the AAA to carry out a contract or commercial relationship that is not carried out to implement this title. (§306(a)(14))

14. The AAA assures that preference in receiving services under this title will not be given by the AAA to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title. (§306(a)(15))

Area Agency on Aging Director chette Name: Dwight DChenete Signature: Date: 10/2/2019

# DEPARTMENT OF HEALTH AND HUMAN SERVICES REGULATIONS TITLE VI OF THE CIVIL RIGHTS ACT OF 1964

Area Agency on Aging of Palm Beach/Treasure Coast, Inc hereinafter called the "recipient," HEREBY AGREES THAT it will comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 80) issued pursuant to the title, to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the recipient receives federal financial assistance from the Department; and HEREBY GIVES ASSURANCE THAT it will immediately take any measures necessary to effectuate this agreement.

If any real property or structure thereon is provided or improved with the aid of federal financial assistance extended to the recipient by the Department, this assurance shall obligate the recipient, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the federal financial assistance is extended or for another purpose involving the provision of similar service or benefits. If any personal property is so provided, this assurance shall obligate the recipient for the period during which it retains ownership or possession of the property. In all other cases, this assurance shall obligate the recipient for the period during which the federal financial assistance is extended to it by the Department.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all federal grants, loans, contracts, property, discounts, or other federal financial assistance extended after the date hereof to the recipient by the Department, including installment payments after such date on account of the applications for federal financial assistance which were approved before such date. The recipient recognizes and agrees that such federal financial assistance will be extended in reliance on the representations and agreements made in this assurance, and that the United States shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the recipient, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this assurance on behalf of the recipient.

Area Agency on Aging Director Name: Dwight Dchenett Signature:

Date: 10/2/2014

### DEPARTMENT OF HEALTH AND HUMAN SERVICES SECTION 504 OF THE REHABILITATION ACT OF 1973

Area Agency on Aging of Palm Beach/Treasure Coast, Inc hereinafter called the "recipient," HEREBY AGREES THAT it will comply with Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), all requirements imposed by the applicable HHS regulation (45 C.F.R. Part 84), and all guidelines and interpretations issued pursuant thereto.

Pursuant to 84.5(a) of the regulation [45 C.F.R. 84(a], the recipient gives this Assurance in consideration of and for the purpose of obtaining any and all federal grants, loans, contracts, (except procurement contracts and contracts of insurance or guaranty), property, discounts, or other federal financial assistance extended by the Department of Health and Human Services after the date of the Assurance, including payments or other assistance made after such date on applications for federal financial assistance that were approved before such date. The recipient recognizes and agrees that such federal financial assistance will be extended in reliance on the representations and agreements made in this Assurance and that the United States will have the right to enforce this Assurance through lawful means.

This Assurance is binding on the recipient, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this Assurance on behalf of the recipient.

This Assurance obligates the recipient for the period during which federal financial assistance is extended to it by the Department of Health and Human Services or provided for in 84.5(b) of the regulation [45 C.F.R. 84.5(b)]. The recipient: a. ( $\Box$ ) employs fewer than fifteen persons; b. ( $\Box$ ) employs fifteen or more persons, and pursuant to 84.7(a) of the regulation [45 C.F.R. 847(a)], has designated the following person(s) to coordinate its efforts to comply with the regulation.

Name of Designee(s): Area Agency on Aging of Palm Beach/Treasure Coast, Inc.

Recipients Address:

4400 N. Congress Avenue

West Palm Beach, Florida 33407

IRS Employer I.D. Number: 65-0087858

AAA Board President (or other authorized official)

I certify that the above information is complete and correct to the best of my knowledge. Name: <u>Co1. Jose R. Thomas-Richards</u> Signature: <u>Contemptible</u> Signature: <u>Signature</u> Signature: <u>Signature</u> Signature: <u>Signature</u> Signature Signat

Date: \_10/8/2019

### AVAILABILITY OF DOCUMENTS

Area Agency on Aging of Palm Beach/Treasure Coast, Inc., HEREBY GIVES FULL ASSURANCE that the following documents are current and maintained in the administrative office of the AAA and will be filed in such a manner as to ensure ready access for inspection by DOEA or its designee(s) at any time.

The AAA further understands that these documents are subject to review during monitoring by DOEA.

- (1) Current board roster
- (2) Articles of Incorporation
- (3) AAA Corporate By-Laws
- (4) AAA Advisory Council By-Laws and membership composition
- (5) Corporate fee documentation
- (6) Insurance coverage verification
- (7) Bonding verification
- (8) AAA staffing plan
  - (a) Position descriptions
  - (b) Pay plan
  - (c) Organizational chart
  - (d) Executive director's resume and performance evaluation
- (9) AAA personnel policies manual
- (10) Financial procedures manual
- (11) Functional procedures manual
- (12) Interagency agreements
- (13) Affirmative Action Plan
- (14) Civil Rights Checklist
- (15) Conflict of interest policy
- (16) Documentation of public forums conducted in the development of the area plan, including attendance records and feedback from providers, consumers, and caregivers
- (17) Consumer outreach plan
- (18) ADA policies
- (19) Documentation of match commitments for cash, voluntary contributions, and building space, as applicable
- (20) Detailed documentation of AAA administrative budget allocations and expenditures
- (21) Detailed documentation of AAA expenditures to support cost reimbursement contracts
- (22) Subcontractor Background Screening Affidavit of Compliance

#### Certification by Authorized Agency Official:

I hereby certify that the documents identified above currently exist and are properly maintained in the administrative office of the Area Agency on Aging. Assurance is given that DOEA or its designee(s) will be given immediate access to these documents, upon request.

AAA Board President (or other authorize	ed official)
Name: Col. Jose R. Thomas-Richards	Signature: A. Rhand
Date: _10/8/2019	

## Appendix 3: Program Module Review Checklist

Please complete the form provided by indicating whether each item is included in the Area Plan (Yes/No/Not Applicable).

PROGRAM MODULE REVIEW CHECKLIST	YES	NO	N/A
Table of Contents	-		-
The location of each section of the program module is accurately reflected.	$\boxtimes$		
Program and Contract Module Certification			
The form is properly completed.			$\boxtimes$
The form is signed and dated by Board President (or Designee).			$\boxtimes$
The form is signed and dated by Advisory Council Chair.			$\boxtimes$
The form is signed and dated by Executive Director.			$\boxtimes$
AAA Board of Directors	-		-
Composition details process for member selection and reflects the counties represented in the Area Plan.	$\boxtimes$		
Frequency details the anticipated meeting schedule for the board	$\boxtimes$		
Selection process and dates are provided	$\boxtimes$		
Service term reflects the term for the board as well as the term of each individual board member	$\boxtimes$		
AAA Board of Directors Tables			
Officer table details name and terms for board officers	$\boxtimes$		
Member table details name, title, address, phone, term, age, race, and ethnicity for Board members	$\boxtimes$		

AAA Advisory Council		
Composition details process for member selection and reflects the counties represented in the Area Plan.	$\boxtimes$	
Frequency details the anticipated meeting schedule for the Advisory Council	$\boxtimes$	
Selection process and dates are provided	$\boxtimes$	

PROGRAM MODULE REVIEW CHECKLIST	YES	NO	N/A
AAA Advisory Council Table			
Member table details name, title, address, phone, term, age, race, and ethnicity for board members	$\boxtimes$		
Funds Administered		1	1
The form is properly completed including bid cycle information.	$\boxtimes$		
Resources Used	(	r	
The form reflects the use of a variety of planning resources.	$\boxtimes$		
Executive Summary			
This section describes major highlights.	$\boxtimes$		
Mission and Vision Statement			
This section includes the mission and vision of the agency.	$\boxtimes$		
Profile			
Identification of Counties			
This section identifies the counties within the PSA. Include at least one map to display the PSA.	$\boxtimes$		
This section identifies the major communities within the PSA. Include at least one map to display the PSA.	$\boxtimes$		
Socio-Demographic and Economic Factors			
This section includes a description of the social and economic climate in the PSA, including how this affects elders.	$\boxtimes$		
Highlight the following characteristics:			
1. Elders with low incomes	$\boxtimes$		
2. Socially isolated elders	$\boxtimes$		
3. Minority and culturally diverse elders	$\boxtimes$		
4. Elders in urban and rural areas	$\boxtimes$		
Analysis includes the use of maps and charts to illustrate data provided	$\boxtimes$		
Economic and Social Resources			
This section describes the economic and social resources available to elders in the PSA.	$\boxtimes$		
Description of Service System			

PROGRAM MODULE REVIEW CHECKLIST	YES	NO	N/A
This section describes the current services that are in place to meet the needs of elders. Includes private and public funding sources.	$\boxtimes$		
Role in Interagency Collaborative Efforts			
This section describes collaborative efforts, partnerships, and special initiatives by the PSA and/or DOEA.	$\boxtimes$		
SWOT Analysis			
SWOT Analysis			
Process Description	$\boxtimes$		
Strengths	$\boxtimes$		
Weaknesses	$\boxtimes$		
Opportunities	$\boxtimes$		
Threats	$\boxtimes$		

Performance and Targeted Outreach		
<b>Performance Analysis</b> - Based on the identified service needs of targeted areas and population groups as determined through needs assessment and other data, project the number and percentage of individuals to be served in each county during each year of the three-year plan.	$\boxtimes$	
<b>Targeted Outreach Plan -</b> The purpose of the targeting report is to show how effective the targeting efforts were of services provided to the specific population groups.	$\boxtimes$	
Older individuals residing in rural areas	$\boxtimes$	
Older individuals with greatest economic need	$\boxtimes$	
Older individuals with greatest social need	$\boxtimes$	
Older individuals with severe disabilities	$\boxtimes$	
Older individuals with limited English-speaking ability	$\boxtimes$	
Older individuals with Alzheimer's disease and related disorders and the caretakers of these individuals	$\boxtimes$	

PROGRAM MODULE REVIEW CHECKLIST	YES	NO	N/A
Older individuals at risk for institutional placement	$\boxtimes$		
Caregivers:			
Caregivers of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction	$\boxtimes$		
Grandparents or older individuals who are relative caregivers who provide care for children with severe disabilities	$\boxtimes$		
Caregivers who are older individuals with greatest social need	$\boxtimes$		
Caregivers who are older individuals with greatest economic need	$\boxtimes$		
Caregivers who are older individuals who provide care to individuals with severe disabilities, including children with severe disabilities	$\boxtimes$		

Unmet Needs and Service Opportunities			
Access to Services	-	-	-
Abuse, Neglect, and Exploitation	$\boxtimes$		
Information about services	$\boxtimes$		
Counties or communities with limited access to transportation	$\boxtimes$		
Counties or communities with limited access to significant supportive services	$\boxtimes$		
Counties or communities with limited availability of and/or access to legal assistance	$\boxtimes$		
Counties or communities with limited access to social services agencies	$\boxtimes$		
Analysis of service implications of identified unmet access needs	$\boxtimes$		
Caregiver			
Caregiver unmet needs	$\boxtimes$		
Number of elder caregivers, including number of grandparents raising grandchildren	$\boxtimes$		
Condition of elder caregivers	$\boxtimes$		
Analysis of service implications of identified caregiver unmet needs	$\boxtimes$		
Communities	-	-	-
Transportation	$\boxtimes$		

PROGRAM MODULE REVIEW CHECKLIST	YES	NO	N/A
Limited access to senior centers	$\boxtimes$		
Housing and safety needs	$\boxtimes$		
Employment and employment training or related assistance	$\boxtimes$		
Housing conditions and availability of affordable housing	$\boxtimes$		
Analysis of service implications of identified unmet community needs	$\boxtimes$		
Disaster Preparedness	$\boxtimes$		
Volunteerism	$\boxtimes$		
Health Care			
Preventative health	$\boxtimes$		
Medical care needs	$\boxtimes$		
Ancillary health care needs (hearing aids and eyeglasses)	$\boxtimes$		
Availability of medical/health care, including mental health counseling	$\boxtimes$		
Analysis of service implications of identified unmet health care needs	$\boxtimes$		
Nutrition	$\boxtimes$		
Self-Care limitations	$\boxtimes$		
Health promotion	$\boxtimes$		
Home and Community-Based Services (HCBS)		-	-
Number of People 60+ with ADL limitations not receiving services	$\boxtimes$		
Number of people 60+ with IADL limitations not receiving services	$\boxtimes$		
Number of people 60+ with mobility limitations not receiving services	$\boxtimes$		
Number of people 60+ who qualify for food stamps but are not receiving them			
People on waitlist not yet receiving any services	$\boxtimes$		
Existing clients needing additional services	$\boxtimes$		
Analysis of service implications of identified HCBS unmet needs.	$\boxtimes$		
County level analysis for unmet needs/gaps in service. Use charts and graphics with narrative if desired.	$\boxtimes$		
Goals and Objectives			

PROGRAM MODULE REVIEW CHECKLIST	YES	NO	N/A
<b>Goal 1:</b> Empower seniors, individuals with disabilities, their families, and other consumers to choose and easily access options for existing mental and physical health and long-term care			
<b>Objective 1.1.</b> ▲ Provide streamlined access to health and long- term care options through Aging and Disability Resource Centers	$\boxtimes$		
<b>Objective 1.2.</b> ▲ Encourage individuals, including people under 60, to plan for future long-term care needs by providing access to information	$\boxtimes$		
<b>Objective 1.3.</b> Ensure that complete and accurate information about resources is available and accessible	$\boxtimes$		
<b>Objective 1.4.</b> Ensure that elders have access to free, unbiased, and comprehensive health insurance counseling	$\boxtimes$		
<b>Objective 1.5.</b> Increase public awareness of existing mental and physical health and long-term care options	$\boxtimes$		
<b>Objective 1.6.</b> Identify and serve target populations in need of information and referral services	$\boxtimes$		
<b>Objective 1.7</b> . Provide streamlined access to Medicaid Managed Care and address grievance issues	$\boxtimes$		
<b>Goal 2:</b> Enable individuals to maintain a high quality of life for as long as possible provision of home and community-based services, including supports for family		-	е
<b>Objective 2.1</b> Identify and serve target populations in need of home and community-based services	$\boxtimes$		
<b>Objective 2.2.</b> Ensure that efforts are in place to fulfill unmet needs and serve as many clients as possible	$\boxtimes$		
<b>Objective 2.3.</b> Provide high quality services	$\boxtimes$		
<b>Objective 2.4.</b> Provide services, education, and referrals to meet specific needs of individuals with dementia	$\boxtimes$		
Objective 2.5. Improve caregiver supports	$\boxtimes$		
<b>Goal 3:</b> Empower seniors and their caregivers to live active, healthy lives to improve their mental and physical health status			ental
<b>Objective 3.1.</b> ▲ Continue to increase the use of Evidence-Based (EB) programs at the community level	$\boxtimes$		

PROGRAM MODULE REVIEW CHECKLIST	YES	NO	N/A
<b>Objective 3.2.</b> Promote good nutrition and physical activity to maintain healthy lifestyles	$\boxtimes$		
<b>Objective 3.3.</b> Promote the adoption of healthy behaviors	$\boxtimes$		
<b>Objective 3.4.</b> Advocate for prevention and early intervention of mental health and substance abuse services for elders	$\boxtimes$		
<b>Goal 4:</b> Ensure the legal rights of seniors are protected and prevent their abuse exploitation	, negle	ect, and	d
<b>Objective 4.1.</b> Collaborate and coordinate within the community and aging network to increase accessible legal services	$\boxtimes$		
<b>Objective 4.2.</b> ▲ Facilitate the integration of Older Americans Act elder rights programs into Aging Services	$\boxtimes$		
<b>Objective 4.3.</b> ▲ Improve the identification and utilization of measurable consumer outcomes for elder rights programs	$\boxtimes$		
<b>Objective 4.4.</b> Promote primary prevention of elder abuse, neglect, and exploitation	$\boxtimes$		
<b>Objective 4.5.</b> Reduce the rate of abuse, neglect, and exploitation recidivism through education, outreach, and the provision of services	$\boxtimes$		
<b>Objective 4.6.</b> Increase the awareness of health care fraud and other elder rights issues	$\boxtimes$		

<b>Goal 5:</b> Participate in community efforts to ensure your PSA is addressing the st create livable communities by promoting this work through the eight domains framework. Support the work DOEA is doing in collaboration with AARP and the Organization's (WHO) Age-Friendly Cities and Communities Program.	of livat	oility	
<b>Objective 5.1.</b> ▲Coordinate with community partners for increased access to affordable, person-centered health care, and social services to promote active and independent living.	$\boxtimes$		
<b>Objective 5.2.</b> ▲ Promote safe, accessible, and affordable housing that supports aging in place.	$\boxtimes$		
<b>Objective 5.3.</b> ▲ Increase awareness of and promote safe and reliable transportation options to increase mobility and community participation.			
<b>Objective 5.4.</b> ▲ Increase access to information through various methods including print, tv, and digital media.	$\boxtimes$		
<b>Objective 5.5.</b> ▲ Promote, engage, and celebrate the valuable contributions of all adults in the community.	$\boxtimes$		
<b>Objective 5.6.</b> ▲ Increase awareness of opportunities to contribute in the workplace and volunteer to make a difference in the community.	$\boxtimes$		
<b>Objective 5.7.</b> ▲ Increase awareness of and promote easy access to social and cultural activities for increased quality of life.	$\boxtimes$		
<b>Objective 5.8.</b> ▲ Work with community partners to ensure accessible, inviting, and safe outdoor spaces and buildings that encourage active participation and recreation.	$\boxtimes$		
Goal 6: Maintain effective and responsive management			
<b>Objective 6.1.</b> Promote and incorporate management practices that encourage greater efficiency	$\boxtimes$		
<b>Objective 6.2.</b> Ensure that federal and state funds are used to effectively and efficiently serve elders' needs	$\boxtimes$		
<b>Objective 6.3.</b> Ensure that providers continue to strengthen the disaster preparedness plans to address specific needs of elders			
<b>Objective 6.4.</b> Accurately maintain the Client Information and Registration Tracking System (CIRTS) data			
<b>Objective 6.5.</b> Promote volunteerism by and for seniors whenever possible	$\boxtimes$		

<b>Goal 7:</b> Co-establish and participate in at least one Dementia Care and Cure Init Force in your Planning and Service Area (PSA).	iative	(DCCI)	Task
<b>Objective 7.1.</b> ▲ Coordinate with the Memory Disorder Clinic (MDC) and local community leaders in Alzheimer's disease and related dementias (ADRD) in your area to create a DCCI Task Force.	$\boxtimes$		
<b>Objective 7.2.</b> ▲Collaborate with Task Force members to designate community entities as Dementia-Caring.			
<b>Objective 7.3.</b> ▲Promote DCCI education and outreach activities throughout the PSA.	$\boxtimes$		
<b>Objective 7.4.</b> ▲Identify areas of need within the ADRD community throughout the PSA.	$\boxtimes$		

### **APPENDIX 4**

# Program Module Comments and Recommendations:

(to be completed by DOEA staff)

Section	Reviewed
Table of Contents	
Comments:	
Program and Contract Module Certification	
Comments:	
AAA Board of Directors	
Comments:	
AAA Advisory Council	
Comments:	
Funds Administered and Bid Cycles	
Comments:	
Resources Used	
Comments:	
Executive Summary	
Comments:	
Mission and Vision Statements	
Comments:	
Profile	
Comments:	
SWOT Analysis	
Comments:	
Performance and Targeted Outreach	
Comments:	
Unmet Needs and Service Opportunities	
Comments:	
Goals and Objectives	$\boxtimes$

# Program Module Comments and Recommendations:

## (to be completed by DOEA staff)

Section	Reviewed			
Comments:	_			
Direct Service Waiver Requests				
Comments:				
Assurances				
Comments:				
Program Module Checklist				
Comments:	•			