UTAH STATE PLAN
AGING & ADULT SERVICES

The Older Americans Act
Fiscal Years 2020 - 2023
October 1, 2019 - September 30, 2023

Division of Aging & Adult Services
Utah Department of Human Services
### TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verification of Intent</td>
<td>4</td>
</tr>
<tr>
<td>Part I Executive Summary</td>
<td>5</td>
</tr>
<tr>
<td>Part II Context: Aging Services in Utah</td>
<td>9</td>
</tr>
<tr>
<td>A. Summary of Utah's Four-Year Plan</td>
<td>10</td>
</tr>
<tr>
<td>B. Updates to Specific Initiatives Included in the Previous Four-Year Plan</td>
<td>10</td>
</tr>
<tr>
<td>C. Demographic Trends</td>
<td>11</td>
</tr>
<tr>
<td>D. Critical Issues</td>
<td>14</td>
</tr>
<tr>
<td>E. Description of Utah Department of Human Services and Division of Aging and Adult Services</td>
<td>16</td>
</tr>
<tr>
<td>F. Overview of the Services and Contracting</td>
<td>20</td>
</tr>
<tr>
<td>G. DAAS Partnerships with Other Agencies</td>
<td>20</td>
</tr>
<tr>
<td>H. The Public Process</td>
<td>23</td>
</tr>
<tr>
<td>Part III Guiding Principles in Developing State Plan Objectives</td>
<td>24</td>
</tr>
<tr>
<td>Part IV Plan Objectives</td>
<td>27</td>
</tr>
<tr>
<td>A. Focus Area I - Title III of the Older Americans Act</td>
<td>28</td>
</tr>
<tr>
<td>1. Access to Services</td>
<td>28</td>
</tr>
<tr>
<td>2. Advocacy</td>
<td>28</td>
</tr>
<tr>
<td>3. Disaster Management</td>
<td>30</td>
</tr>
<tr>
<td>4. Utah Caregiver Support Program (UCSP)</td>
<td>30</td>
</tr>
<tr>
<td>5. Disease Prevention and Health Promotion Services</td>
<td>32</td>
</tr>
<tr>
<td>6. In-home Services</td>
<td>33</td>
</tr>
<tr>
<td>7. Multipurpose Senior Centers</td>
<td>34</td>
</tr>
<tr>
<td>8. Nutrition Services</td>
<td>35</td>
</tr>
<tr>
<td>9. Native American Outreach and Coordination</td>
<td>36</td>
</tr>
<tr>
<td>10. Outreach</td>
<td>37</td>
</tr>
<tr>
<td>11. The State Health Insurance Assistance Program (SHIP)</td>
<td>38</td>
</tr>
<tr>
<td>12. The Senior Medicare Patrol Program</td>
<td>40</td>
</tr>
<tr>
<td>13. The Medicare Improvements for Patients and Providers Act Outreach</td>
<td>41</td>
</tr>
<tr>
<td>B. Focus Area II - ACL Discretionary Grants</td>
<td>41</td>
</tr>
<tr>
<td>1. Chronic Disease Self Management</td>
<td>41</td>
</tr>
<tr>
<td>2. Malnutrition Pilot</td>
<td>42</td>
</tr>
<tr>
<td>C. Focus Area III - Participant Directed/Centered Planning</td>
<td>44</td>
</tr>
</tbody>
</table>
D. Focus Area IV - Elder Justice ................................................................. 45
  1. Adult Protective Services ................................................................. 45
  2. Long-Term Care Ombudsman ......................................................... 46
  3. Legal Services Developer ............................................................... 47

Part V - Financial .................................................................................. 50

Part VI - State Plan Assurances ............................................................ 54

Part VII - Designations ........................................................................ 72
  Area Agencies on Aging .................................................................. 73
  Adult Protective Services .................................................................. 75

Part VIII: Administrative Structure ........................................................ 76
  A. Legal Basis ...................................................................................... 72
  B. Utah Division of Aging and Adult Services Services Organizational Chart ............. 79
  C. Utah Adult Protective Services Organizational Chart ................................ 80
The State Plan on Aging is hereby submitted for the State of UTAH for the period October 1, 2020, through September 30, 2023. It includes all assurances and plans to be carried out by the DIVISION OF AGING AND ADULT SERVICES under provisions of the Older Americans Act, as amended, during the period identified. The State Agency named above has been given the authority to develop and administer the State Plan on Aging in accordance with all requirements of the Act, and is primarily responsible for the coordination of all State activities related to the purposes of the Act, i.e., the development of comprehensive and coordinated systems for the delivery of supportive services, including multipurpose senior centers and nutrition services, and to serve as an effective and visible advocate for older adults in the State.

This Plan is hereby approved by the Governor, and constitutes authorization to proceed with activities under the Plan upon approval by the Assistant Secretary for Aging.

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

Date
Nels Holmgren, Director
State Division of Aging and Adult Services

Date
Kelly VanNoy, Chairperson
State Board of Aging and Adult Services

Date
Ann Silverberg Williamson, Executive Director
Utah State Department of Human Services

I hereby approve this State Plan on Aging and submit it to the Assistant Secretary for Aging for approval.

Date
Gary R. Herbert, Governor
State of Utah
Part I

Executive Summary
PART I: Executive Summary

The Utah Division of Aging and Adult Services is required under the Older Americans Act to develop and submit a State Plan on Aging every four years. The Division is pleased to have this opportunity to submit this plan to be effective from October 1, 2019 to September 30, 2023. The plan is designed to describe the state of aging services in Utah as well as the Division’s objectives for the next four years with regard to aging services and programs for Utah’s older adults and the direction of Utah’s aging network in the coming years. This plan also provides assurances for Utah’s compliance to the Older Americans Act and provides information about the current aging network. The plan contains the following sections:

Part I – Executive Summary

Part II – Context: Aging Services in Utah

This section reviews the plan process and provides some follow up regarding items from the previous four-year plan. Utah continues to see significant growth, both in overall population as well as in the number of older adults who live here. Since 2010, the state’s general population increased by 14.4%, the fastest growth rate in the nation. Older adults aged 65 and older now comprise 10.2% of Utah’s population, and this population is set to double in the next fifty years leading seniors to account for one fifth of Utah’s population by 2070. In addition to the growth of older adults, Utah is becoming increasingly more diverse in terms of its ethnic and racial makeup. By 2050, Utah’s minority population is expected to grow by 20%, diversifying the state generally and the older adult population specifically. Utah is typically seen as a state that is overwhelmingly young and white, but demographic trends refute this characterization.

Along with these demographic changes, Utah’s aging services are administered in a context that is evolving in ways unique to Utah’s political, cultural, and economic environment. Although Utah remains a fiscally conservative state, policymakers are developing an understanding of the cultural and aging shifts in the state and are looking at ways to better meet service needs including health care, in-home service needs, transportation, etc. Aging services in Utah with its large and growing network of partners including state, county and municipal governments, non-profit agencies, businesses, academia, and faith groups continue to seek increased coordination and partnering to better serve older adults in a more efficient manner. With the growth in Utah’s senior population, policymakers will continue to struggle with funding increased program needs to meet client demands.

As always, aging services programs administered in Utah’s aging network focus on helping older adults and their families maintain their health and independence. In-home and congregate nutrition programs allow older adults to maintain good nutrition to maintain and improve physical health, and also provide nutrition education to help older adults better understand their physical needs. In addition to the physical benefits of these balanced meals, the program also seeks to improve the overall well-being of older adults by connecting nutrition and socialization.
Services such as transportation, recreation, and other center-based activities further provide needed interaction and reduce isolation of older adults while also providing education and development opportunities. Health insurance information programs provide opportunities for older adults to make informed decisions regarding their care and benefits.

In-home services such as the Alternatives program and the Medicaid Aging Waiver work to ensure older adults receive care appropriate to their needs, while preventing premature institutionalization. The Caregiver Support Program works to ensure that those providing so much of our seniors’ care, in turn receive adequate support themselves. Additionally, our Caregiver program continues to see growth in the need to support older adults (most often grandparents) in caring for grandchildren due to a number of issues, but particularly as a result of the opioid epidemic and/or incarceration both here in the state and across the nation.

This plan will further discuss the core principle of choice, which the state and its partners seek to have as a foundation of all aging services. By providing tools and education along with services, the Division seeks to provide older adults with the ability to continue to make informed choices as they have throughout their adult lives. Finally, Adult Protective Services, the Long-term Care Ombudsman, and legal service programs work to ensure older adults can maintain their safety and well-being while also maintaining their personal desires and abilities. Adult Protective Services continues to see case growth as Utah’s older adult population increases. As this population grows, the number and complexity of cases, particularly cases involving financial issues, grows along with it and taxes the resources that have historically been allocated for these issues.

**Part III – Guiding Principles in Developing Objectives**

This section describes the principles and foundational ideas used by the Division in developing the objectives and targets included in this plan. These ideas are broken down to provide comprehensive, measurable benchmarks to gauge progress in how often and how effectively older adults receive services and taken together are intended to provide a lens for aging services that are thorough, efficient, sensitive to the needs of our clients, and feasible in our current economic and political climate.

**Part IV – Plan Objectives**

This section discusses in detail the services provided through the Division, either directly or through the aging network, and the objectives for maintaining and improving services. Specific tasks are included for meeting these objectives. This information is broken into four sections as required by the plan’s Program Instructions – Older Americans Act Core Programs, Discretionary Grants, Participant-Directed/Person-Centered Planning, and Elder Justice.

**Part V – Financial**

This brief section discusses the states funding formula and includes Utah’s state rule for ensuring aging funding is properly allocated and appropriately expended, as well as basic funding information for the state.

**Part VI – Assurances**
This section includes the assurances required by the Administration for Community Living for proper operation of Older Americans Act programs and agency administration in Utah.

**Part VII – Designations**

This section includes information on the Division and Area Agencies on Aging in Utah.

**Part VIII – Administrative Structure**

Finally, organizational charts for the Division and Adult Protective Services are included.

Aging services in Utah and around the nation continue to grow and adapt to the changing needs of our older adults. As the number of older adults grows and those older adults live longer lives, we will see changes in the options available to them.

Policy and funding decisions will have an important impact on the future of aging services, and decision makers will need accurate, data-driven information from the aging services network in order to comprehend and effectively act on the choices that will need to be made. The Division and its partners are enthusiastic about being part of this process and anticipate this plan will better position us for meeting these challenges and meeting the needs that will come as aging services progresses in Utah.
Part II

Context: Aging Services in Utah
A. SUMMARY OF UTAH’S FOUR-YEAR PLAN

To receive funding under the Older Americans Act of 2016, each state is required to submit a periodic state plan to the Administration for Community Living ACL. In Utah, the development of this plan is the responsibility of the Utah State Division of Aging and Adult Services (DAAS/Division), which oversees all aging services’ work in the state.

Development of this plan is a cooperative effort involving more than the DAAS staff. It is the result of input from Utah’s twelve Area Agencies on Aging (AAA), the State Board of Aging and Adult Services, the State Advisory Council, the general public, and other concerned agencies and organizations throughout the state.

On an annual basis, official program monitoring visits are conducted in each Area Agency on Aging in Utah for each program under the Older Americans Act, as well as the Utah developed Alternatives program and the Medicaid Aging Waiver. During each monitoring visit, attention is paid to reviewing local efforts to provide services to older individuals with greatest need in three areas: economic need, social need and risk for institutional placement. Financial elements of the program are reviewed along with documentation and other program compliance requirements. As part of the monitoring visit, program managers meet with random clients in the settings where services are provided. These monitoring efforts are an opportunity for the Division and the AAAs to look at efforts, best practices, and process improvement with the intent of providing better, more effective, and more affordable services for older adults across the state. Additionally, as the Division and its partners seek to improve processes, it is also important to continue to examine the need to provide services to low-income minority older adults, older adults with limited English proficiency, and older adults residing in rural areas.

Utah, like all states, is faced with a number of challenges and opportunities. We believe aging services fill an important need and are a great investment. The Division, along with its aging network partners, is committed to ensuring the best possible outcomes for our older adults and that these services are delivered in the most effective way possible to maximize the health, well-being and independence of Utah’s older adults.

B. UPDATES TO SPECIFIC INITIATIVES INCLUDED IN THE PREVIOUS FOUR-YEAR PLAN

Aging Commission

The Utah Commission on Aging was created in 2005 and has historically provided a strong voice for Utah’s older adults in providing advocacy, research, and networking opportunities for older adults and the agencies that serve them. Originally scheduled to expire, the Commission was reauthorized and received ongoing funding to continue its work by being housed within the University of Utah’s Gerontology Department. Although leadership and
support changes have led to the Commission taking a lower profile in recent years, a new Executive Director, appointed in 2016, has reenergized and expanded the Commission with great success. The Commission continues to meet bi-monthly and provides a valuable forum for engaging stakeholders in issues that have direct impact on older adults and their caregivers. The Division continues to participate with the Commission and values this partnership.

**Transportation Coordination**

The Division and the AAAs continue to serve as resources in assisting older adults to get where they need to go. The Division continues to maintain a partnership with contacts in the Utah Department of Transportation and with URSTA (the Urban Rural and Specialized Transportation Association). The Division, the AAAs, and URSTA are committed to the further development of effective, accessible transportation for all citizens in Utah. The Division has further partnered with the local Mobility Managers that oversee local transportation efforts throughout the state. The mobility efforts continue to bear fruit, most recently with the sponsorship of a voucher system across many areas of the state which allows older adults the flexibility and freedom in to pay for and receive needed rides, particularly in areas of the state where transportation providers are not readily available.

**Dementia Work group and Alzheimer’s Association**

In past years, Utah saw a push to develop and implement a plan for dealing with the growing needs associated with Alzheimer’s Disease and related dementias. The State Plan Task Force created the 2012-2017 Utah State Plan for Alzheimer’s Disease and Related Dementias. However, efforts were stalled due to lack of funding. However, in 2016, the Legislature approved funding which resulted in the formation of the Coordinating Council for Alzheimer’s Disease and Related Dementias. This is housed in the Utah Department of Health and is a broad, multidisciplinary group that involves public and private agencies, providers, academia, and advocates who all participate in four task workgroups: Dementia Aware Utah, Dementia Competent Workforce, Support and Empowered Caregivers, and Expanded Research in Utah. The Division is deeply involved in these efforts. Additionally, the Division has partnered closely with the Alzheimer’s Association Utah Chapter.

**C. DEMOGRAPHIC TRENDS**

The Governor’s Office of Planning and Budget (GOMB), relying on census data, develops Utah’s demographic information. GOMB then updates the data each year with recalculations of the data based on trends and new information. After seven or eight years of updating the most recent census’ information, GOMB will stop providing annual updates, as the estimates are too far removed from the original source data. At this time the Division is looking forward to updated demographic data following the upcoming 2020 census.

**Geographic and Demographic Trends and Characteristics:**
Located in the Intermountain West and having a land area of 82,168.2 square miles, Utah is the eleventh largest state in the nation. Although it is considered primarily a rural state, in reality it is both rural and urban. Utah Administrative Rule [R510-108-1, 1994] specifically defines “rural” as any county having a population of less than one hundred (100) persons per square mile. Based on this, four of Utah’s counties are currently considered urban; Davis, Salt Lake, Utah, and Weber. These four counties account for 75% of Utah’s 3.16 million residents. Of the state’s remaining twenty-five counties, sixteen are considered rural, and the remaining nine counties are considered transitional with elements of both rural and urban areas. Rural counties comprise 6.77% of Utah’s population and 17.93% of residents are in transitional counties.

Regarding Utah’s older adults, 69.6% of the State’s sixty-five and older population (65+) reside in urban areas, while the remaining 30.4% reside in rural and transitional counties. The six counties with the largest percentage of 65+ individuals as a proportion of the county’s total population in 2018 were:

- Piute County 42.4%
- Kane County 27.1%
- Garfield County 26.3%
- Wayne County 23.5%
- Grand County 22.1%
- Washington County 21.9%

The five counties with the smallest percentage of 65+ individuals as a proportion of the county’s total population in 2018 were:

- Rich County 6.8%
- Utah County 8.9%
- Wasatch County 11.1%
- Cache County 11.1%
- Tooele County 11.6%

**Demographic Trends -**

**Statewide:** Major statewide population trends will be ones of growth and a continuation of Utah’s unique demographic characteristics. Some of the more salient trends include the following:

- The statewide total population in 2018 was 3,161,000, and it is expected to increase to 4,464,000 by the year 2040, reflecting an increase of 41%.

- Recent population trends indicate Utah is the fastest growing state in the nation.

- Utah ranks first among all states nationally having the most youthful population. Utah’s median age was 30.6 years in 2018, which was more than 7 years younger than
the U.S. median age of 37.8 years. While Utah is still a young state relative to the nation, the average age has continued to rise in keeping with national trends.

- Much of Utah’s future growth will be fueled by its relatively high birthrate and expected overall immigration during the next 15 years.

Older Adult Population: Major trends and figures describing Utah’s older adult population include:

- Utah’s total 65+ population was 407,347 in 2018 and is expected to double in the next fifty years.

- Utah’s 65+ population is currently 10.2% of the State’s total population. This is expected to increase to 20% by the year 2065.

Male/Female Older Adults: Historically, research demonstrates that women typically outlive men. This becomes evident in later years as individuals survive from their early sixties and into their eighties and older.

The increase in the number of older women in Utah compared to the number of older men reflects this naturally occurring pattern. As elsewhere, the percentage of men 65+ in the population is smaller than the number of women the same age. As both men and women approach 85 years of age and older, the percentage of men in the State’s population, compared to women, declines significantly.

This pattern can be seen in the following table that shows Utah’s older adult population as a percent of the total 65+ and 85+ for the year 2010.

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<th>65+ Years</th>
<th>85+ Years</th>
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<tbody>
<tr>
<td></td>
<td>Percentage of Population</td>
<td>Percentage of Population</td>
</tr>
<tr>
<td>Men</td>
<td>43.8%</td>
<td>37.4%</td>
</tr>
<tr>
<td>Women</td>
<td>56.2%</td>
<td>62.6%</td>
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Minority Older Adults: Utah’s older adult minority population is a relatively small portion of the 65+ population. Even so, in the future it is expected to grow and contribute to the State’s diversity.

- Utah’s minority population comprises approximately 7.45% of the State’s total 65+ population.

- Utah’s Hispanic population is among the State’s fastest growing ethnic/minority groups. This mirrors a similar trend nationwide, and will likely continue as a distinct trend among the State’s older adult population in the years to come.
The distribution of Utah’s 65+ minority population is quite distinctive. Even though the overall proportion of the older adult population is relatively small statewide, some areas of the state have high concentrations of certain minority persons, while others are extremely sparse.

D. CRITICAL ISSUES

As is the case in all states, Utah faces a number of opportunities and challenges with regard to aging. Utah’s economy is experiencing strong and rapid growth which has improved the situation of many of Utah’s older adults and has also increased available tax revenues that fund aging programs. However, given the growth of Utah’s older adult population, even these improved funding levels have not come close to keeping pace with the number of potential clients. Following are a number of issues Utah must consider in moving aging services forward in the coming four years:

1. Growth in the Older Adult Population
   Aging Services continues to be an exciting and challenging field and this will continue into the future. As outlined in the demographic section above, while Utah continues to be the youngest state in the nation, it also continues to have one of the fastest growing older adult populations. Aging issues will continue to be a focus for human services agencies in Utah with our above average life expectancy and growing older adult population.

2. Increased Length and Quality of Life
   The good news in Utah is that the vast majority of older adults are healthy, independent, generally secure and surrounded by strong family and community supports. However, while only a small portion of Utah’s overall older adult population may require services and formal supports, the growing population will cause that small percentage to be a much larger group of individuals in the years ahead. The growth of this relatively small group will stretch existing resources and may require provider agencies to reevaluate the individuals they serve and the criteria for qualification for services.

3. The Addition of the Baby Boom Generation
   As with other areas of the nation, Utah continues to see an ever increasing number of the baby boom generation qualify and begin to access aging services. With them comes the challenge of a very different set of needs and worldview than the current cadre of older adults. In addition to the potential stress on the system in terms of sheer numbers, in many cases the Baby Boomers have different needs and interests. Utah is already seeing the impact of these changes, most noticeably in senior center activities and meals, where new choices are requested and previously popular options are in lower demand.

   Additional impacts could be as significant as the potential needs due to lifestyle differences with regard to health, financial needs, and family support between ‘younger’ and ‘older’ seniors. This may impact the type and frequency of services, even with relatively minor things such as meal tastes and senior center activity interests. We face a challenge in meeting the needs of a larger younger cohort, while still attending to the existing needs of the older one.
4. Dementia in Utah
Along with Utah’s higher than average life expectancy, the state also has a higher than average incidence of Alzheimer’s disease and related dementias. This factor is already visible in the services provided across the state, particularly in our caregiver program and with our in-home services. Consistent with national statistics, one-half of our clients are dealing with dementia-related issues. Similar costs and challenges are being experienced by the healthcare industry as well. Three years ago, the Legislature funded a dementia workgroup to develop interdisciplinary approaches to these issues and the Division has been an active participant in these efforts. We anticipate issues related to dementia with our growing clientele in the coming years.

5. General Funding and Economic Issues
Aging services in Utah relies on a blend of funding sources including federal, state, and local government and is supplemented by contributions from the older adults and their families. Adequate funding has always been a challenge for aging programs. Despite economic improvements in the past few years, along with solid funding gains made during recent legislative sessions, we anticipate that the funding for aging services will continue to be hard-pressed to keep pace with the growing number of individuals eligible for our programs and the increasing cost of providing these services.

6. Federal Funding Uncertainties
Historically, federal resources have been the most consistent and reliable source of funding for aging services. However, in recent years we have seen more frequent shutdowns of the federal government over funding issues. We anticipate similar issues in the coming years that could prove it difficult to rely on federal funds as we have historically.

7. State Funding Issues
Utah’s policymakers while supportive of human services generally and aging services specifically, advocate the use of informal supports. Utah’s culture encourages individual responsibility, support from families, neighbors, and community organizations, while providing limited funding for government programs. In recent legislative sessions, the Division has seen new funding; first in the form of one-time funding and now ongoing, for nutrition services, the Medicaid Aging Waiver, the Long-term Care Ombudsman, Caregiver Support, and the Alternatives program. This new funding is passed along to the AAAs and has made a significant impact in allowing additional, high quality services for our constituents. As previously stated, it will be a challenge to keep pace with the growing number of potential clients; however, the new funding is stabilizing the current aging network. We continue to see a growing need for additional Adult Protective Services resources, which did not receive new funding with this new appropriation. The Division will continue to work with legislators and policymakers to increase this funding.

8. Political and Economic Considerations
The Division continues to see the economy improving and we are optimistic that funding will be stable and will possibly grow in coming years. As costs continue to increase, we do not see much likelihood for a significant increase in the scope of services, nor the number of individuals served, and we anticipate limited opportunities for new initiatives.
The trend of increased accountability among state agencies continues to be emphasized in both the legislative and executive branches of Utah’s government, and the Division views this as a benefit in allowing agencies to show progress, value for taxpayer investments, and efficiency in delivering services. Our ongoing challenge has been to develop measures that show value and tell the story of the benefits the aging network’s programs provide, while being actually measurable and readily available. We continue to work internally as well as with stakeholders to find reliable, measurable performance measures that truly demonstrate outcomes and actual benefit to our clients and taxpayers.

9. Older Adult Advocates
In terms of increasing funding for aging services, one of the main challenges continues to surround the issue of self-advocacy on the part of the older adults themselves. While many older adults around the country are hesitant to ask for help and do not feel it proper to advocate for their own needs, the general culture of Utah’s older adults is even more so, and there is a distinct hesitancy to contact legislators and other policymakers with regard to increasing funding of aging services. The Division continues to work with AAAs to identify barriers and cultivate voices that can clearly explain the need for and benefits of our programs.

10. Meeting the Needs of a Diverse Constituency
Another challenge facing Utah is the growth of older adults from the Baby Boom generation as well as the fast growth in the oldest age segments of the state. Further, as explained earlier in this report, Utah’s older adult population, along with the rest of the state population, is becoming an increasingly diverse group in terms of race, culture, language and religion. Many historically successful approaches to aging services will need to be reviewed and updated as we move forward and see a further divergence of the needs of increasingly our varied client demographics.

E. DESCRIPTION OF THE UTAH DEPARTMENT OF HUMAN SERVICES AND DIVISION OF AGING AND ADULT SERVICES

1. The Agency and its Mission
The Division of Aging and Adult Services is part of the Utah Department of Human Services which includes four other Divisions – Child and Family Services, Services to People with Disabilities, Juvenile Justice, and Substance Abuse and Mental Health. Further the Department contains a number of offices that interact with the Division – Public Guardian, Licensing, Fiscal Operation, Services Review, Bureau of Internal Review, and others. Following is additional information about the Utah Department of Human Services:

2. The Utah Department of Human Services Desired Outcomes:
The Utah Department of Human Services works to strengthen lives by providing children, youth, families and adults individualized services to thrive in their homes, schools, workplaces and communities. Housed within our Department are multiple divisions and offices that collaboratively carry out this mission. These include: Aging & Adult Services, Child & Family Services, Fiscal Operations, Juvenile Justice Services, Licensing, Public Guardian, Recovery Services, Services for People with Disabilities, Quality and Design, State Developmental Center, State Hospital and Substance Abuse & Mental Health.
3. Model of Care
The Department provides client services using the Model of Care approach which is a strategic framework that guides our department-wide purpose to strengthen lives by providing children, youth, families and adults individualized services to thrive in their homes, schools and communities in keeping with the following principles:

- **Prevention**
  - Implement prevention and early intervention strategies to reduce risk, trauma and intergenerational cycles of isolation and suffering

- **Self-Reliance**
  - Support families and individuals in their homes, schools, workplaces and communities for sustainable success

- **Partnership**
  - Improve outcomes through individual and family involvement, interagency collaboration, public/private alliances and community supports

- **Operational Excellence**
  - Seek, share and build upon best practices and demonstrate effectiveness through data and measurable results

- **People and Culture**
  - Support employee career development, confidence, professional judgement and cultural competency

4. The Division of Aging and Adult Services
The Division of Aging and Adult Services is the smallest of the five Department Divisions and one of the most diffuse, with the bulk of the services provided being carried out by the Area Agencies on Aging with support of a relatively small number of state staff members.

1. Vision Statement
Offering Choices for Independence

2. Mission Statement
The mission of the Division of Aging and Adult Services in administering Utah’s aging services is to provide leadership and expertise in addressing issues that impact older Utahns, those providing care for older Utahns, as well as adults suffering from various forms of abuse. Its mission is also to ensure the availability of community-based services in both urban and rural areas of the state; to ensure services that support independent living; and to encourage citizen involvement in the planning and delivery of services.

5. Division Authority
The Division of Aging and Adult Services was created as Utah's State Unit on Aging by Utah statute (62A-3-104) giving the Division the legal authority to establish and monitor programs that serve the needs of Utah's older adults.

The Division is the sole state agency, as defined by the Older Americans Act of 1965 as amended to; (1) serve as an effective and visible advocate for the aging and adult population
of Utah; (2) develop and administer a state plan under the policy direction of the Board; and (3) take primary responsibility for state activities relating to the Older Americans Act.

6. Utah’s Division of Aging and Adult Services
As Utah’s State Unit on Aging in accordance with the Older Americans Act, the Division was granted the legal authority to establish and monitor programs that serve the needs of Utah’s older adults. Local Area Agencies on Aging (AAA) have been designated to cover all geographic regions of the state and have responsibility for providing a comprehensive array of services and advocacy for the needs of older adults residing in these Planning and Service Areas.

In 1986, the Division was given the administrative authority for Adult Protective Services, a program to protect vulnerable adults from abuse, neglect, and exploitation. Adult Protective Services’ workers provide services designed to assist victims and prevent further abuse, neglect, and exploitation. Staff is located in a statewide system of offices and work in cooperation with local law enforcement to investigate cases involving older adults and disabled adults.

7. Guiding Principles in Servicing Utah’s Older Adult and Vulnerable Adult Population
In addition to the Department principles outlined above, the Division seeks the following:

a. A coordinated and comprehensive system shall operate to efficiently and effectively deliver services to this population.

b. Older adults having the greatest economic and social needs shall have adequate access to basic services.

c. Public and private organizations will work cooperatively to enable older adults, as well as abused adults, to lead meaningful and independent lives.

d. Community-based services will be made available to Utah’s older adult population, and vulnerable adults who wish to maintain their personal independence and self-sufficiency. Such services shall include non-institutional services such as Home Health Aides, Homemaker/Personal Care, The Alternatives Program (TAP), legal assistance, caregiver support, including respite and targeted training opportunities, and other services and supports as appropriate.

e. Abuse, neglect, and exploitation will be reduced regarding older adults.

f. Make effective use of volunteers for delivering services to older adults, abused adults, and disabled adults.

g. Services available to older adults will focus on proven results and measurable outcomes to ensure efficiency and effectiveness in meeting client needs. Services, particularly those involving preventative health services, such as fall prevention and substance abuse prevention training, will focus on Evidence-Based Disease and Disability
Prevention programs by involving programs such as the evidence-based Stanford Model.

8. State and Other Services
A discussion of the various Older Americans Act Programs administered in the state is included in the objectives portion of this plan. In addition, there are a number of programs funded by the state or by other federal agencies. These are:

1) **Adult Protective Services (APS):** The purpose of this program is to assist vulnerable adults in need of protection to prevent or discontinue abuse, neglect, or exploitation until the condition no longer requires further intervention. APS works closely with law enforcement, AAAs, legal and other community resources to prevent elder abuse and to resolve the protective needs of victims.

2) **The Alternatives Program (TAP):** This state-funded program provides services that enable adults 18 years and over, who are at high risk for institutionalization, to remain in their own homes. The Alternatives Program coordinates family or other support services and makes a wide variety of in-home services available to disabled and older adults based on a case manager’s assessment of personal needs. TAP is a model of the Choices for Independence concept of empowered, self-directed care by providing clients with the opportunity to direct much of their own care, including the hiring and directing of support staff. Further, the program’s focus on keeping disabled and older adults safely at home, while engaging the existing family and community support networks, allows adults with disabilities and older adults to maintain independence and efficiently use government resources by providing only those services deemed essential to the client, thus avoiding nursing home placement.

In keeping with the Choices for Independence concept of providing choices for high-risk individuals, the TAP program provides for a broader range of potential clients, by having looser financial eligibility criteria than the more stringent Medicare requirements, and as such, provides services that are normally not available through other programs. Income and eligibility guidelines have been established that clients must meet to receive TAP services, and fees are assessed on a sliding scale based on the individual’s ability to pay. Seventy-five percent of TAP available funding must be for clients aged sixty or older; the remaining 25% of available funding may be spent on clients 18 to 59 years of age. Services are similar to those listed under the Homemaker/Personal Care Program. Other services may also be arranged as needed.

3) **Home and Community-Based Waiver (Medicaid Aging Waiver):** Like the Alternatives Program outlined above, the Medicaid Aging Waiver provides clients the chance to remain independent by avoiding nursing home placement, having a voice in their personal care plan, and ensuring their health needs are met. Waiver services are available to persons 65 years of age and over who meet the nursing home level of care.
criteria for Medicaid eligibility, as well as financial eligibility, which sets potential Waiver clients apart from TAP clients. The services are specifically intended to provide home and community-based options to nursing home care, thus supporting Medicaid long-term care reform by providing services at a much lower cost than traditional Medicaid nursing home placement, while allowing older adults to remain independent in their own homes. Waiver services are available statewide through the AAA system.

F. OVERVIEW OF THE SERVICE SYSTEM AND CONTRACTING

The Older Americans Act services are primarily provided under contract with Utah’s twelve local Area Agencies on Aging (AAA). The Medicaid Home and Community-Based Waiver is administered by the Division and contracted with eleven Area Agencies on Aging, but the service is provided in all areas of the state. The Division monitors each program at all twelve AAAs annually, and reports and applicable corrective actions are presented to the AAAs and to Department Contracting contacts.

The Adult Protective Services Program is administered by the Division through its regional offices. These offices contract individually with local providers. (Refer to map and lists of regional offices and AAAs in Part V: Designations).

G. DAAS PARTNERSHIPS WITH OTHER AGENCIES

The Division understands it has limited ability on its own to positively impact the lives of older adults in the state. Rather, the Division sees the best possible outcomes for its goals by working closely with partner agencies within the aging network to provide services to individuals and to maximize resources in meeting the needs of Utah’s older adults. Additionally, in an environment of limited resources and economic ups and downs, the need to reduce redundancy, stretch resources, and better coordinate with like-minded agencies is all the more critical. The following are notable partnerships, but is by no means an exhaustive list and are not necessarily presented in any particular order:

AAAs

The AAAs are the Division’s main partners in providing services to Utah’s older adults and the Division highly values these relationships. Division and AAA staff meets regularly to coordinate, share best practices and training, and partner on various program initiatives.

Utah Department of Human Services (DHS)

As part of the Department of Human Services, the Division works to support the overall mission of the Department and to meet the Governor’s goals for supporting Utah’s vulnerable populations. The Division has specific regular interactions with the Division of Services to People with Disabilities and the Division of Substance Abuse and Mental Health regarding the health and well-being of older adults who are served by the other divisions.

URSTA
URSTA provides training opportunities to small agencies such as senior centers by pooling resources and accessing opportunities that would typically not be available to very small agencies. The Division is one member of the aging network represented on the URSTA board and feels strongly that URSTA provides great opportunities and support of the small, often rural, providers of transportation to Utah’s older adults.

Native American Tribes

While the primary contact with Utah’s Native American Tribes with regard to aging services is with the local Area Agencies on Aging, the Division actively participates with a Department council that includes representatives of the various divisions along with representatives from each tribe, the Indian Walk-In Center, Utah Division of Indian Affairs, and other private and public agencies. The council meets regularly throughout the state to better meet needs of tribes. In addition, Adult Protective Services works with tribes to develop and coordinate policies and services for tribal elders from a safety and abuse prevention standpoint.

Utah Commission on Aging

As previously mentioned the Utah Commission on Aging serves as a coordination and information clearing house for aging issues and services across the spectrum of public, private, business, and academic entities. The Division actively participates and provides information to benefit older adults in Utah, and to coordinate efforts with partner agencies.

Coordinating Council for the Utah State Plan for Alzheimer’s Disease and Related Dementias

Also previously discussed, the Division is active in a number of committees and efforts dealing with Alzheimer’s disease and related dementias. These efforts are important in coordinating and leveraging efforts of state, county and local agencies, healthcare providers, non-profit organizations, and provider agencies across the state.

U. S Department of Labor Employment and Training Administration (Utah’s Senior Community Service Employment Program (SCSEP)

The Senior Community Service Employment Program (SCSEP) is a community service and work-based job training program for older Americans. Authorized by the Older Americans Act, the program provides training for low-income, unemployed seniors. Participants also have access to employment assistance through American Job Centers. SCSEP participants gain work experience in a variety of community service activities at non-profit and public facilities, including schools, hospitals, day-care centers, and senior centers. Participants work an average of 20 hours a week, and are paid the highest of federal, state or local minimum wage. This training serves as a bridge to unsubsidized employment opportunities for participants.

DAAS and the DOL will continue their partnership in the Utah SCSEP program. With changes in Workforce Innovation and Opportunity Act (WIOA) - WIOA regulations, the Utah
The SCSEP program has become a required partner in WIOA programs. The changes will help the Utah SCSEP program align its program with new national Workforce development systems under WIOA.

Utah Department of Workforce Services

As part of the National SCSEP changes with WIOA, the Utah Department of Workforce Services has asked Utah SCSEP to become a partner in WIOA services in Utah. As a partner, the Utah SCSEP program can now coordinate services better with the local American Job Centers and provide seamless customer-focused service delivery. The Utah SCSEP program can now provide eligible participants and ineligible applicants with referrals to all WIOA career services and access other activities and programs offered by other American Job Centers partners. This will allow the Utah SCSEP to help older Americans and enhance employment opportunities. Finally, the Utah SCSEP program has become a non-voting board member on the State Workforce Development Board and a member of the Operations Subcommittee.

The Elder and Vulnerable Adult Abuse Committee

The Elder and Vulnerable Adult Abuse (EVAA) Committee is a multi-disciplinary screening team consisting of members from Salt Lake County District Attorney’s office, Adult Protective Services and a forensic nurse. Law Enforcement Officers throughout Salt Lake County are encouraged to utilize the EVAA screening team to present their criminal case investigations involving an Elder or Vulnerable Adult. In addition to getting their criminal case screened with the District Attorney, Law Enforcement Officers receive a continuum of support from the participating agencies. Central Region APS finds the EVVA team to be a valuable collaborative tool in assistance with serving the vulnerable population with a multitude of helpful resources. The networking amongst the many agencies involved in the EVVA Committee has resulted in numerous successful problem resolutions for those clients whom we serve.

The United States Administration for Community Living (ACL)

Obviously the Division is closely aligned with the Administration for Community Living and coordinates its activities with them on an ongoing basis. The ACL provides extensive support and technical expertise to the Division and the Division is both appreciative for their efforts and committed to maintaining this critical partnership.

Other Partners

In addition, the Division works with a number of other agencies at various levels. Some of these include:

- The Utah Department of Community and Culture
- Easter Seals
- The Social Security Administration
- The Internal Revenue Service
- Salt Lake Community College
• The Utah Developmental Disabilities Council
• The Utah Northern Coalition
• Centro Hispano
• Switchpoint Community Resource Center
• The Utah Office of Health Disparities Reductions
• The Alzheimer’s Association Utah Chapter
• Jewish Family Service
• The Goodwill Initiative on Aging Coalition
• The Utah Hospice and Palliative Organization
• The U of U Stroke Survivors Program
• Utah’s Parkinson’s Association
• The Utah State Veteran Administration
• Utah State University
• The University of Utah
• The Utah Department of Health

H. THE PUBLIC PROCESS

Area Agency planned levels of service are discussed during public meetings conducted by the local advisory councils prior to their adoption by the Area Agency. In addition, the adopted levels are reviewed during public meetings conducted by the State Board of Aging and Adult Services. During the public meeting, the Board has the opportunity to review both planned levels of service and success each Agency has had in achieving its prior year goals.

All Board of Aging and Adult Services meetings are conducted as public meetings and the public is notified of meetings in advance. The public is invited and encouraged to present their concerns and express their opinions as to the level of services provided to them.

Additionally, public notice was placed on the Utah Public Notices website inviting the public to receive and comment on the new plan. Responses to the plan received through public meetings, or directly from interested parties, are recorded by the Division and presented to the State Board of Aging for consideration in the plan. At this time, there have been no official comments received by the Division.
Part III

Guiding Principles in Developing State Plan Objectives
Part III – Guiding Principles in Developing Goals and Objectives

In looking at the many ways in which the Division interacts with and serves Utah’s older adults, as well as the aging network in Utah, the Division has divided its efforts and goals into four main focus areas, which are listed below. Specific objectives for the four focus areas can be found in the objectives section.

- **Focus on most vulnerable target populations** – With current funding issues, the realities of limited resources may reduce the number of individuals served. Given that, when triaging clients and services, additional emphasis on reaching and serving frail, low income, minority and others should be prioritized.

Older adults in Utah are, for the most part, healthy, independent, and surrounded with strong formal and informal care networks. As such, the percentage of the constituents eligible for service who actually participate is relatively low. However, despite this good news, there is still a core group of older adults in the state who are not so fortunate. Health issues, financial difficulties (often despite the best efforts of the individuals to plan and save), and a lack of family or other helps, have deep impacts on a small, but very needy group of Utah’s older adults.

Data and anecdotal evidence suggest minority older adults, frail older adults, and those for whom English is a second language, are more likely to need this additional help. This coincides with the Older American’s Act’s emphasis on these populations. Given the current economic environment nationally and in the state, and the overall reductions in budgets and resources, the Division feels the need to focus more of the limited resources on those most in need and with fewest outside options.

- **Efficiencies and initiatives for best practices in service delivery** – Given current financial constraints, the need for improved efficiency and effectiveness in delivering services is critical.

As the number of eligible clients continues to grow at a rate that outpaces current resources, it is incumbent on the aging network to find ways to meet client needs by being smarter and continually looking for efficiencies and improved service delivery models. Utah’s extremely positive economy has allowed for growth of appropriations for aging services, but with the growth of the older adult population, we will continue to see a need to make existing resources go further in serving existing and potential clients. Understanding the projected size of Utah’s older populations in coming years may mean updating definitions of standard service delivery based on new economic realities, evolving responsibilities of public entities at all levels, family responsibility and continuing use of technologies to improve service.

- **Empowering older adults in maintaining health, safety and independence** – Using community resources and supports, in-home services and other resources including
evidence-based preventive health models and abuse prevention resources, develop goals to allow older adults to remain in their homes and communities while creating healthy and safe environments.

Although, federal, state and local agencies and leaders are committed to supporting older adults in need to remain healthy and independent, older adults and their families, communities, and caregivers have a responsibility in meeting their own needs and being wise stewards of the support available to them. As a result, the Division feels a strong obligation to provide tools and information that will allow them to better meet their needs in an appropriate and effective way while maximizing formal and informal care networks.

By promoting on the roles of family and community life, building on the abilities and combined strengths of people of all ages to enhance community life in Utah, the Utah’s aging network believes older adults can live better and healthier lives while reducing the need for government intervention. As a result, the Division will work with its partners to develop and communicate information on programs, preventative health options, and other community resources so those older adults and their families can make wise, informed decisions about their needs.

- Develop and strengthen community partnerships – set goals for using and developing community networks and partners to more effectively meet client needs and to build collaborative relationships that allow access to resources and assistance found outside of the traditional aging network.

The Division serves primarily as a pass-through, monitoring, and technical expertise agency for the benefit of its partners and the aging network. As such, the Division is committed to see its partner agencies, with special emphasis on the AAAs, succeed in their efforts to provide services to Utah’s older adults. Building and strengthening partnerships and relationships is key to the success of the Division and its partners, and the Division seeks to build bridges and provide tools to its collaborators.
Part IV

Plan Objectives
PART IV: PLAN OBJECTIVES

Introduction: Objectives for Utah’s aging services are divided into the three Focus Areas outlined by the Administration for Community Living (ACL). These are Older Americans Act (OAA) Core Programs, ACL Discretionary Grants, and Consumer Control and Choice.

A. FOCUS AREA I – Older Americans Act (OAA) Core Programs
A variety of programs and services are made possible through OAA funding and are facilitated by the Division in partnership with the twelve Utah Area Agencies on Aging (AAAs), that enable older and vulnerable adults to remain independent in their communities.

1) Access To Services: Provides transportation, outreach, information and assistance, and case management services.

Objective: The Division of Aging and Adult Services (DAAS) shall coordinate and monitor efforts by the aging network to improve access by older adults in Utah to services needed to maintain and/or improve their well-being and quality of life and to permit them to remain independent. Special emphasis will be placed on improving access for vulnerable and special needs individuals, including minority populations, low income individuals, and frail older adults.

Outcomes:
- Through its work with URSTA and its board, the Division will continue to encourage content in URSTA trainings that has direct application for senior centers and AAA transportation efforts.
- The Division will continue to work with Utah’s AAAs to maintain the current I&R initiatives, and to share best practices developed by participating agencies with those not currently involved.

Task 1: DAAS staff will continue to assist local area agencies in the development and operation of their transportation programs, including providing information about transportation needs and monitoring the funds available for transportation support to AAA, as well as community resources available to assist with transportation services through association with transportation associations including URSTA and the local Mobility Managers coordinated by the Utah Transit Authority.

Responsibility/Time frame: Division Staff/ FY20 - FY23

2) Advocacy: As the State Unit on Aging, the Division has a responsibility for advocating to policymakers and legislators on behalf of older adults. The Division believes it fills an important role in bringing aging issues to the fore in policy and funding discussions and will work with AAAs and other organizations to effectively and accurately represent Utah’s older adults and their needs.
Objective: The Division of Aging and Adult Services (DAAS) shall serve as a leader on the behalf of Utah’s older adults and the aging network. In this capacity, DAAS will aggressively promote public and private activities to secure and maintain the rights and benefits of this growing segment of the state’s population.

Outcomes:
- The Division will partner with U4A to achieve at least one additional joint policy or funding campaign during each legislative session in which Division and AAA staff jointly advocate for the initiative with lawmakers.
- The Division will continue to seek and meet with County and/or Association of Government policymakers for each of the AAAs on an annual basis.
- The Division will respond to all requests from the aging network to attend and/or present at any trainings, conferences, summits, etc.

Task 1: DAAS staff will continue to actively participate in the activities of public and private agencies and organizations which may: a) express an interest in the needs of Utah’s older adults, and/or b) provide direct services to older adults or those who care for them.

Responsibility/Time: Division Director and Program Managers/FY20 - FY23

Task 2: Division will continue to participate in planning processes to include area agencies on aging, the Utah State Board on Aging, and other aging network partners to set priorities for activities and actions to be undertaken during the next year, including collaboration in developing funding requests and legislative efforts.

Responsibility/Time: Division Director /FY20 - FY23

Task 3: DAAS will assist in supporting various advocacy strategies set out by the State’s twelve Area Plans. The final information will be shared with any other community groups or individuals expressing an interest.

Responsibility/Time: Director, Assistant Director and Program managers /FY20 – FY23

Task 4: The Division will continue to make materials and public presentations available to all persons and organizations requesting information about the rights and benefits of Utah’s older adults and caregivers, and on the aging network generally. Further, the Division will accept invitations to present information on senior issues as staff resources and travel requirements permit. APS will provide specific focus on information for law enforcement, first responders, and fraud prevention groups.

Responsibility/Time: All Program Managers and APS Staff/FY20 – FY23

Task 5: The Division shall produce an annual publication that documents the state of Utah’s older adult population. The publication shall document changes in status
of older adults, document performance of area agencies in responding to needs of the older adult community and special studies commissioned by the Division.

*Responsibility/Time:* Director, Assistant Director and Program managers /FY20 – FY23

3) **Disaster Management:** As leaders in aging services and as representatives of the Utah Department of Human Services, the aging network plays a role in preparing for possible disasters and in working with AAAs in their planning for these events. The Division is able to tap into state expertise and resources in disaster planning and will work with AAAs to be able to effectively and realistically plan for future issues that may occur in their particular areas.

**Objective:** Support services shall be effectively coordinated by the Division and Utah Department of Human Services in conjunction with Area Agencies on Aging (AAA) in the event that a disaster is declared by the President or Governor in accordance with the Disaster Relief and Emergency Assistance Plan.

**Outcomes:**
- The Division will update current Division level emergency plans to coordinate with Department of Human Services, Department of Health, Homeland Security, and AAA plans. The Division will work with internal Department emergency plans, as well as with vendors to ensure interruptions of services are kept to the minimum in the event of an emergency.

**Task 1:** Coordinate disaster management training for the AAAs upon request, and encourage the coordination at the community level.

*Responsibility/Time:* Program Specialist/FY20 – FY23

**Task 2:** Ensure AAAs have adequate Disaster Management plans in place to anticipate disasters ranging from weather to natural events to manmade events, and ensure annual updates via the AAA Annual Plan process.

*Responsibility/Time:* Assistant Director/FY20 – FY23

**Task 3:** Coordinate efforts with the Utah Department of Human Services Security Officer and Administrative Services Manager.

*Responsibility/Time:* Director, Assistant Director and Program Specialist /FY20 – FY23

4) **Utah Caregiver Support Program (UCSP):** The UCSP differs from other in-home services programs in that these services are offered to the caregiver and may only be provided on an intermittent and short-term basis. UCSP services are available to adult family members age 18 years and older providing care to individuals 60 years of age and older; adult family members or other informal caregivers age 18 and older providing care to individuals of any age with Alzheimer’s disease and related disorders; older relatives, not parents, age 55 and
older providing care to children under the age of 18; and older relatives, including parents, age 55 and older providing care to adults ages 18-59 with disabilities.

Program goals are to develop multifaceted systems of support services for family caregivers, including information to caregivers about available services, assistance to caregivers in gaining access to the services; individual counseling, support groups and training; respite care; and supplemental services on a limited basis. The program enables caregivers, in consultation with the professional care coordinator, to obtain identified services that will provide relief, education, and support thereby enabling them to continue their caregiving duties.

**Objective:** To improve program efficiency and effectiveness by increasing funding, coordinating with and providing training to AAAs as well as other public and private agencies and partners including nonprofits throughout the state in an effort to develop a caregiving network.

**Outcomes:**
- The Division will ensure individual programs at the local level are following established guidelines and requirements, and are following best practices to the highest degree possible for local circumstances.
- The Division will work with the AAAs in an effort to develop additional funding resources for respite and other caregiving services.

**Task 1:** Assure that UCSP activities will take place in all five service categories to the extent possible: information to caregivers about available services (including outreach efforts); assistance to caregivers in gaining access to the services; individual counseling, organization of support groups, and caregiver training; respite care; supplemental services, on a limited basis, with special emphasis on serving clients with Alzheimer’s or related neurological diseases.

*Responsibility/Time:* Program Manager/FY20 – FY23

**Task 2:** Work with AAAs in the promotion of caregiver education for all caregivers, including respite clients, with a special emphasis on caregivers providing care for an individual with Alzheimer’s disease or a related dementia.

*Responsibility/Time:* Program Manager/ FY20 – FY23

**Task 3:** Provide technical assistance and training to AAAs related to the Utah Caregiver Support program.

*Responsibility/Time:* Program Manager/ FY20 – FY23

**Task 4:** Actively participate, represent, and advocate for the promotion of the Utah Caregiver Support Program and AAAs with community partners, coalitions, agencies, nonprofits, and others to raise awareness of family caregivers and to promote caregiver education and services throughout the State of Utah.
Task 5: Assure that the current services to caregivers are being integrated with other OAA in-home and community based service programs as well as existing caregiver services throughout the state.

Responsibility/Time: Program Manager/FY 20 – FY 23

Task 6: Continue to educate state and local elected officials on the needs of caregivers and the cost savings associated with supporting caregivers. Continue to advocate for additional state and local funding to support caregivers. Work with AAAs to develop volunteer networks at the local level, including older adult volunteers and others with an emphasis on service learning to engage student populations in caregiving activities for older adults and their caregivers.

Responsibility/Time: Division Director, Program Manager, and AAAs/ FY20 – FY23

5) Disease Prevention and Health Promotion Services: DAAS is committed to assisting older adults in remaining active and independent by improving health and preventing disease through proven, evidence-based practices. By ensuring preventative health programs are founded in good science and best practices, DAAS feels older adults’ health can be improved efficiently while overall care costs can be reduced, while older adult individuals’ well-being can be dramatically improved. These services provide periodic screening and assessment of older adults to retain their capacity for self-care and to maintain independent living within the community. Examples of such services include: health risk assessment and diagnosis, routine health screening, nutrition counseling, fitness programs and dance therapy, home injury control, health education and medication management efforts.

Objective: Provide reliable information and current research to increase the knowledge, skills, and available resources needed by older adults and caregivers to practice sensible health measures and physical fitness.

Outcomes:

- On an annual basis, AAA health promotion activities will be evaluated and recommendations will be provided regarding best practices and improvements to existing programs.

Task 1: Participate in the distribution of timely health promotion information to all older adults including minority populations and their caregivers.

Responsibility/Time: Program Manager/ FY20 – FY23

Task 2: Encourage local health promotion programs and services that target all older
adults’ caregivers, and particularly rural and minority populations. These efforts can be coordinated through the Department of Health, community partners and agencies including nonprofits and others.

Responsibility/Time: Program Manager/ FY20 – FY23

Task 3: Undertake efforts to increase the ease of access to information and education that emphasizes prevention of illness, health promotion, and alternative programs that improve the quality of life, reduce premature death and disability, and maximizes cost-effectiveness.

Responsibility/Time: Program Manager/ FY20 – FY23

6) In-home Services: Provide for home and community-based services that serve as options to nursing home care via case management and care plan. Examples of In-home Services include: Homemaker Services, Home Health Aides, Home Visiting, Telephone Assurance, Chore Maintenance, Support Services, Assisted Transportation, Medical Alert Equipment, Home-Delivered Meals and other personalized services as needed.

First Objective: Continue to improve the quantity and quality of in-home services to older adults with greatest economic need, greatest social need and older adults at risk for institutional placement. It is also important to provide services to low-income and minority adults, older individuals with limited English proficiency, and those residing in rural areas.

Outcomes:
- At the annual OAA training sessions for AAA and Division staff, information will be presented regarding funding, requirements and best practices for in-home services.

Task 1: Monitor and evaluate the provision of in-home services through the use of applicable Title III B and IIIE funds within each Area Agency on Aging.

Responsibility/Time: Program Manager/ FY20 – FY23

Second Objective: Enhance current services to our population by incorporating principles of evidence-based case management in coordination with relevant research, in order to provide older Utahns with the latest and best information on Aging issues.

Outcomes:
- At the annual OAA training sessions for AAA and Division staff, information will be presented regarding current evidence-based care principles and in-home services.

Task 1: Stay up to date with new information and technological improvements that
will benefit our population.

Responsibility/Time: Program Manager/ FY20 – FY23

7) **Multipurpose Senior Centers:** Senior centers are supported primarily by local communities with the assistance of the Older Americans Act. These centers function as sites for the organization and provision of various health, social, nutritional, and educational services for older persons. While often viewed as primarily a delivery site for congregate meals, the centers provide an integrated and holistic approach to older adult health by reducing isolation by providing social interaction, stimulation, and education for older adults who may not have other opportunities for activities and community involvement. A primary focus, with regard to senior centers, is developing strategies to make senior centers attractive for the baby boom generation, and to ensure services are available and appropriate for the various generations of older adults who will utilize the same centers. DAAS is working with local and national partners, as well as older adults and soon-to-be-older adults to share best practices and develop strategies.

Within several planning and service areas there are some senior centers that, while preferring not to receive any federal or state financial support are provided with technical programming assistance. Older adults who frequent such centers are provided the opportunity to attend OAA and state fund supported centers.

**Objective:** Senior Centers are community facilities for the organization and provision of a broad spectrum of services, which shall include the provision of health (including mental health), social, nutritional, and educational services and the provision of facilities for recreational activities for older individuals. In various planning and service areas, Focal Points and Multipurpose Senior Centers are combined as single entities.

**Outcomes:**
- Program staff will conduct on-site visits to senior centers, included unscheduled visits, to provide feedback on programs and share best practices.
- Program staff will participate in state and national organizations to learn best practices that can then be presented to AAAs during the annual training sessions with AAA and Division staff.

**Task 1:** On an ongoing basis, the Division, along with its AAA partners, shall assess the role and capacity of the various AAA Senior Centers that receive support from the Older Americans Act, to provide essential services to enhance contracted programming.

Responsibility/Time: Program Manager/ FY20 – FY23

**Task 2:** The Division shall monitor the involvement/participation of economically disadvantaged, socially needy, and minority individuals in center activities.

Responsibility/Time: Program Manager/ FY20 – FY23

**Task 3:** Participate in statewide conferences or regional training for nutrition
coordinators and senior center managers, as well as participating with national nutrition related support organizations.

*Responsibility/Time:* Program Manager/ FY20 – FY23

**Task 4:** Encourage Area Agencies on Aging to use trained volunteers, especially in rural areas and to recruit minority individuals for volunteer opportunities.

*Responsibility/Time:* Nutrition Program Manager/ FY20 – FY23

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**8) Nutrition Services:** Services include, but are not limited to, the following areas of service; nutrition assessment and counseling, therapeutic meals and including nutritional supplements, as medically warranted. The services provide nutrition education to older adults and prepares meals for the senior centers’ congregate meal programs, in addition to delivering nutritionally appropriate meals to the homes of older persons who are unable to prepare meals for themselves. As a part of their regular assessment procedures, health and social service professionals are encouraged to routinely evaluate the nutritional status of older adults for possible occurrences of malnutrition. These services promote and emphasize preventive approaches that utilize nutrition services to maintain the health and independence of older persons. Local level screening is completed using a risk screen evaluation tool and collecting demographic data. Nutrition program directors are provided technical expertise and monitoring by DAAS. Both the state and federal partners provide the bulk of funding for these programs.

**Objective:** Older adults shall have the opportunity to maintain or improve their nutritional intake status. DAAS will ensure that nutrition projects supported with OAA funds use an approved nutritional determinative checklist for all persons receiving OAA supported home delivered meal, congregate meal nutritional counseling and case management.

**Outcomes:**

- Program staff will continue in-person monitoring of AAA nutrition programs to ensure requirements and standards are being achieved.

**Task 1:** Provide training to providers and dietitians on nutrition requirements of OAA nutrition programs, including the American Dietary Guidelines and RDI’s.

*Responsibility/Time:* Nutrition Program Manager/ FY20 – FY23

**Task 2:** On an ongoing basis, current demand patterns of home-delivered meals as compared to previous year’s performance, and identify trends in service delivery, secondary meals and nutritional supplements.

*Responsibility/Time:* Nutrition Program Manager/ FY20 – FY23

**Task 3:** Help coordinate strategies to improve transportation services to congregate meal sites for minorities and rural older adults.

*Responsibility/Time:* Program Manager/ FY20 – FY23
Task 4: Monitor AAA compliance with established nutrition policy.

*Responsibility/Time:* Nutrition Program Manager/ FY20 – FY23

Task 5: We will review fiscal allocations and expenditures to ensure they are being expended in accordance with the plan.

*Responsibility/Time:* Nutrition Program Manager/ FY20 – FY23

Task 6: Review the NSIP cash-in-lieu to determine the Area Agencies on Aging use of these funds.

*Responsibility/Time:* Nutrition Program Manager/ FY20 – FY23

Task 7: Promote nutrition/malnutrition screening, nutrition risk assessments, and nutrition education.

*Responsibility/Time:* Nutrition Program Manager/ FY20 – FY23

Task 8: Assess and advise the AAA nutrition program for home and community-based programs.

*Responsibility/Time:* Nutrition Program Manager/ FY20 – FY23

Task 9: Promote the use of Registered Dietitians for nutritional therapy when needed in all planning and service areas of the State.

*Responsibility/Time:* Nutrition Program Manager/ FY20 – FY23

Task 10: Coordinate with agencies that serve Native American individuals to ensure they are provided the nutrition and health services mandated by federal statute.

*Responsibility/Time:* Nutrition Program Manager/ FY20 – FY23

9) **Native American Outreach and Coordination:** The Division of Aging and Adult Services coordinates Title VI Programs with the Area Agencies in the adjacent planning and service areas. DAAS will continue to improve coordination with tribal leaders, particularly in the San Juan and Uintah Basin service areas, which contain the greatest concentration of Native Americans in the state.

**Objective:** The Division will continue to work with tribal representatives and members of Utah’s Native American tribes to improve outreach and services to tribal members living in the various AAAs.

**Outcomes:**

- The Division will be represented at all six Department Indian Issues meetings each year.

**Task 1:** The Division will continue to participate in the Department of Human Services Indian Issues workgroup.
Task 2: The Division will participate in ongoing activities with the Indian Walk-In Center to assist tribal elders with accessing services and connecting with various agencies to meet needs of the urban Native American older adults.  
*Responsibility/Time: APS/ FY20 – FY23*

Task 3: Adult Protective Services will participate in ongoing activities with the Navajo Nation to assist tribal leaders in developing and carrying out best practices regarding responding to abuse, neglect and exploitation of tribal elders on Nation land.  
*Responsibility/Time: APS/ FY20 – FY23*

10) Outreach: Although most older adults in Utah are able to research and seek services as needed, there are a significant number of individuals in the state who for a variety of reasons are either unaware of services available to them or choose not to participate. As a result, it is incumbent on the aging network to seek ways to reach out to these individuals to ensure they are aware of all options available to them.

First Objective: The Division will monitor and provide assistance regarding outreach/promotion whenever needed or requested by any Area Agency on Aging. Such assistance will enable AAAs to identify potential clients and encourage the use of existing services and benefits.

Outcomes:
- The Division will provide continued training to AAAs regarding the WellSky data tracking system to better capture client information and demographics.

Task 1: The Division and AAAs shall continue to identify those individuals who require special emphasis under the Act. These individuals include: (1) older individuals residing in rural areas, (2) older individuals with greatest economic need (with particular attention to low-income minority individuals), (3) older individuals with greatest social need (with particular attention to low-income minority individuals), (4) older individuals with severe disabilities, (5) older individuals with limited English-speaking ability, and (6) older individuals with Alzheimer’s disease or related disorder with neurological and organic brain dysfunction (and caregivers of such individuals).  
*Responsibility/Time: All Program Managers/ FY20 – FY23*

Task 2: Support AAA’s outreach efforts for all Older Americans Act and Utah state programs by supplying training, expertise, consultation, resource materials and expertise to assist agencies and volunteers as needed to support their efforts to provide services, while empowering individual agencies to design programs that
work best for their particular planning and service areas.

*Responsibility/Time:* All Program Managers/ FY20 – FY23

**Task 3:** As funding allows, participate in statewide promotion campaigns to create a greater awareness of the continuum of aging services available throughout the state.

*Responsibility/Time:* All Program Managers/ FY20 – FY23

**Second Objective:** In conjunction with Utah’s Area Agencies on Aging, the Division will assure that preference in providing services will go to the following older adult populations:

1) individuals with greatest economic need (especially low-income minority persons),
2) individuals with greatest social need (especially low-income minority individuals),
3) those residing in rural areas,
4) older individuals with severe disabilities,
5) individuals with limited English-speaking ability, and
6) those with Alzheimer’s disease or related disorders with neurological and organic brain dysfunction (and caregivers of such individuals).

**Outcomes:**

- During the plan period, the Division and AAAs will update the funding formula as new information is available to ensure at risk and priority populations are still being effectively accounted for.
- Support the new Alzheimer’s disease Coordinating Council housed at the Utah Department of Health.

**Task 1:** Encourage the Area Agencies on Aging to be involved with groups and organizations that address the needs and concerns of Utah’s minority populations, with particular emphasis on Utah’s older adult minority individuals.

*Responsibility/Time:* Program Managers/ FY20 – FY23

**Task 3:** Coordinate with Utah 211 to maintain an updated list of community agencies and organizations throughout Utah that address the specific needs of minority individuals, and/or are comprised of a predominantly minority membership.

*Responsibility/Time:* Program Managers/ FY20 – FY23

**Task 4:** The Division will compile and analyze the responses in the Area Plans regarding targeting and share the summary results with all Area Agencies.

*Responsibility/Time:* Program Managers/ FY20 – FY23

11) **The State Health Insurance Assistance Program (SHIP)** provides Medicare beneficiaries with information, counseling, and enrollment assistance. Its mission is to strengthen the capability of grantees to support a community-based, grassroots network of local SHIP offices that assist beneficiaries with their Medicare-related
questions. SHIPs present and distribute information to groups and individuals to inform them on Medicare benefits, coverage rules, written notices and forms, appeal rights and procedures, and more. They also provide a free, in-depth, one-on-one insurance counseling and assistance to Medicare beneficiaries, their families, friends, and caregivers. SHIPs assist people in obtaining coverage through options that include the Original Medicare program, Medicare Advantage (Part C) Plans, Medicare Prescription Drug (Part D) Plans, and programs designed to help people with limited incomes pay for their health care, such as Medicaid, Medicare Savings Program, and the Low Income Subsidy. They can help people compare Medicare Supplemental (Medigap) insurance policies and explain how these and other supplemental insurance options (e.g., insurance plans for retirees) work with Medicare. SHIPs also provide information on long-term care insurance and, when needed, refer beneficiaries to agencies such as the Social Security Administration and local Medicaid offices for additional assistance. Many SHIP counselors are volunteers who are trained and certified to help navigate systems for older adults and people with disabilities.

**Objective:** The mission of the Utah SHIP program is to become the known and trusted community resource for the 333,308 Medicare beneficiaries in the State of Utah.

**Outcomes:**
- Consistently and confidentially provide accurate, objective, and comprehensive information and assistance.
- Promote awareness, knowledge, and visibility of the SHIP program.
- Recruit, train, and retain a diverse, sufficient, and effective workforce at all levels.
- Develop and strengthen the program structure and organization, including policies, processes, and procedures, to enable effective and efficient operations.
- Promote adaptable and sustainable processes and activities to position the SHIP for changes in the programmatic landscape.

**Task 1:** Increase knowledge of program expectations at all levels. Knowledge includes SHIP counselors and SHIP clients.

Responsibility / Time: Program Director FY’20 - FY’23

**Task 2:** Increase exposure to the public and to those in greatest need of our services.

Responsibility / Time: Program Director FY’20- FY’23

**Task 3:** Enhance Team member management.

Responsibility / Time: Program Director FY’20 - FY’23

**Task 4:** Improve alignment of policies, processes, and procedures to the program goals.
Responsibility / Time: Program Director FY’20 - FY’23

Task 5: Increase innovation within the SHIP program to better serve Medicare eligible individuals.

Responsibility / Time: Program Director FY’20 - FY’23

12) **The Senior Medicare Patrol Program** empowers older adults through increased awareness and understanding of health care programs. Knowledge helps them to protect themselves from the economic and health-related consequences of Medicare and Medicaid fraud, errors, and abuse. SMP projects also work to resolve beneficiary complaints of potential fraud in partnership with state and national fraud control and consumer protection entities, including Medicare contractors, state Medicaid fraud control units, state attorneys general, the HHS Office of the Inspector General (OIG), and CMS.

**Objective:** The Utah SMP program mission is to empower and assist Medicare beneficiaries to prevent, detect, and report healthcare fraud, errors, and abuse through outreach, counseling, and education.

**Outcomes:**
- Provide group education and one-on-one assistance to Medicare beneficiaries on a statewide basis.
- Recruit, train, and retain a sufficient and effective workforce ready to provide high quality education and inquiry resolution.
- Monitor and assess SMP results on operational and quality measures.
- Position SMP to respond to changes in the programmatic landscape.

**Task 1:** Demonstrate knowledge of geographic service area, including barriers to program access and strategies specifically designed to overcome these barriers. Explain plans to provide in-person group education sessions to teach beneficiaries to prevent, detect, and report Medicare fraud, errors, and abuse.

Responsibility / Time: Program Director FY’20 - FY’23

**Task 2:** Train all SMP Team Members with the information necessary to perform the work of the SMP program at the most basic level.

Responsibility / Time: Program Director FY’20 - FY’23

**Task 3:** Evaluation of project performance.

Responsibility / Time: Program Director FY’20 - FY’23
13) **The Medicare Improvements for Patients and Providers Act Outreach** - The purpose of MIPPA funding is to enhance state efforts to provide assistance to Medicare beneficiaries through statewide and local coalition building focused on intensified outreach activities to beneficiaries likely to be eligible for the Low Income Subsidy program (LIS) or the Medicare Savings Program (MSP) to assist those beneficiaries in applying for benefits. ACL will provide funding to State Health Insurance Assistance Programs (SHIPs), Area Agencies on Aging (AAAs), and Aging and Disability Resource Center programs (ADRCs) to inform Medicare beneficiaries about available Medicare program benefits. ACL seeks plans from states that will describe how the MIPPA funds will be used for beneficiary outreach, education.

*Task 1*: support outreach and one-on-one application assistance efforts directed toward Medicare beneficiaries with limited incomes who may be eligible for LIS or MSP programs.

Responsibility / Time: Program Director FY’20 - FY’23

*Task 2*: Make sure funds are used for outreach activities aimed at preventing disease and promoting wellness.

Responsibility / Time: Program Director FY’20 - FY’23

*Task 3*: Make sure that the activities described are above and beyond those regular activities that the SHIP has planned in response to funding provided under the SHIP Base Grant award.

Responsibility / Time: Program Director FY’20 - FY’23

*Task 4*: State will coordinate with the Native American programs on LIS, MSP, or disease prevention and wellness outreach.

Responsibility / Time: Program Director FY’20 - FY’23

B. **Focus Area II – ACL Discretionary Grants**
Utah seeks to improve services available to older adults and has a strategy of applying for grants that complement existing services and which can be sustained on a long-term basis.

1) **Chronic Disease Self-Management and Fall Prevention**: The Chronic Disease Self-Management Program (CDSMP) in Utah is an ongoing effort of the Division and the Utah Department of Health. The Division continues to promote the program and encourage future partners to buy into the program. Additionally, since the beginning of implementing the CDSMP and Fall Prevention, Division staff advises the Utah Arthritis Program and Fall Prevention Program when working with rural Area
Agencies on Aging. The Utah Department of Health continues to provide training for both programs and is available in most areas of the state.

**Objective:** Older adults will receive the information needed to better manage chronic conditions and falls in order to increase their quality of life and to reduce the costs to taxpayers associated with these conditions.

**Outcomes:**
- The Chronic Disease Self-Management and Fall Prevention Program will continue to provide information and training across the state.
- The Division will continue to support the grant and will accurately monitor grant activities to ensure the grant is administered to the requirements of the approved proposal.

**Task 1:** Strengthen and maintain existing capacity for the statewide delivery of CDSMP programs and Falls Prevention designed to help older adults maintain their health and independence within their local communities.

*Responsibility/Time:* Program Manager / FY20 – FY23

**Task 2:** We will increase utilization of evidence-based programs to reach additional older adults with chronic conditions and falls by the end of the Cooperative Agreement.

*Responsibility/Time:* Program Manager / FY20 – FY23

**Task 3:** Specifically collaborate with agencies serving low-income, minority and limited English speaking older adults.

*Responsibility/Time:* Program Manager / FY20 – FY23

**Task 4:** Utilize adequate evaluation measures to assess program successes, identify challenges and guide future efforts.

*Responsibility/Time:* Program Manager / FY20 – FY23

**Task 5:** Work with other Chronic Disease Programs and Falls Prevention to leverage resources to reach people with chronic diseases and falls.

*Responsibility/Time:* Program Manager / FY20 – FY23

2) **Malnutrition Pilot:** The University of Utah, Division of Family Medicine, in partnership with Division and three Utah Area Agencies on Aging (AAA) as well as other key stakeholders, will develop a high-quality, malnutrition home visitation pilot program for home delivered meal (HDM) recipients. The goal of this project is to improve the health and well-being of post-hospitalized older adults through the development of AAA evidence-based malnutrition home visitation model program. The purpose of the proposed pilot project is to demonstrate an evidence-based
relationship of targeted nutrition home visitations assessments and care planning on the health outcomes of recently discharged HDM recipients at malnutrition risk.

**Objectives:** 1) provide community-focused malnutrition training in a person and family-centered approach; 2) perform registered dietitian nutritionist (RDN) led comprehensive malnutrition assessments; 3) create personalized nutrition care plans 4) understand the impact of HDM and nutritional indicators on health and the intersecting biological, social, environmental and economic factors; 5) characterize HDM recipients’ nutritional health concerns among urban, rural, and frontier populations; 6) identify nutritional indices related to functionality, quality of life, ability to age-in-place and hospital readmission.

**Outcomes:**
- Implement malnutrition protocol, training, and resources for nutrition home visitation programs
- Demonstrate a transferable home visitation model program
- Provide RDN directed nutritional assessment and interventions supporting program justification and funding;
- Improve coordination of home and community-based services (HCBS) to address malnutrition risk factors
- Tailor nutrition home visitation programs for urban, rural, or frontier residing older adults.

Task 1: Develop and provide home nutrition visitation program model guide for use within local communities.

*Responsibility/Time*: Program Manager/FY20 – FY23

Task 2: Health services and healthcare malnutrition training materials.

*Responsibility/Time*: Program Manager/FY20 – FY23

Task 3: Client and caregiver malnutrition education materials

*Responsibility/Time*: Program Manager/FY20 – FY23

Task 4: Provide Aging Services outreach materials and dissemination throughout network.

*Responsibility/Time*: Program/ FY20 – FY23
C. **Focus Area III – Participant-Directed/Person Centered Planning**

The concept of consumer choice and control is one that clearly complements Utah’s culture and its approach to aging services. Allowing individuals to make their own choices and to control, as much as program constraints allow, the manner in which services are delivered to them is both empowering to the individual and often eases the load of the provider. Upon assessment, each new participant working with an AAA is screened and informed of services they may be eligible for and options available to them. The client is then able to make decisions based on their individual needs and, as much as possible, services are then tailored to their requests. Additionally, many clients are more likely to participate and to receive the support they need if given the chance to be an active participant in their care, rather than simply being looked after.

While not an Older Americans Act program, the Division’s Medicaid Aging Waiver actively promotes consumer choice in allowing clients to choose and change providers, and also follows a self-directed model where Waiver participants are able to hire and pay their own staff by means of a Fiscal Management Agency that assists them with payment needs. Similarly, our in-home services Alternatives program allows clients to be involved in choosing the staff that support them and has provisions for non-traditional provider support, which allows greater control and flexibility for the client.

Although consumer choice most often applies to in-home services, Utah’s senior centers demonstrate the concept through their advisory boards which make decisions and plan activities based on the wishes of its particular constituency. Centers also provide an array of activities to allow older adults to spend time in the way most comfortable for them.

Further, with regard to meals served in senior centers, many AAAs have worked to provide greater options than has been typical in the past, in some cases allowing different meal choices including soup and salad bars as opposed to the regular hot lunch. All of these changes add up to a culture where older adults feel their opinions matter and feel that they have a voice in which services they receive and how they are delivered. The result is greater client satisfaction, less waste as unwanted services are eliminated, and a more responsive and effective aging network.

**Objective:** Empower older adults and their caregivers to make more decisions regarding care and services available through the aging network.

**Outcomes:**
- The Division and AAAs will work to provide tools and options to clients and caregivers for better determining and meeting their needs.
- AAAs will be provided networking opportunities through quarterly training to share best practices and ideas regarding Consumer Choice and Control.

**Task 1:** The Division and AAAs will continue to partner on surveys gathering information caregiver needs and service requirements to help better tailor services to clients and to more advocate for program funding.
Responsibility/Time: Assistant Director/ FY20 – FY23

Task 2: In the annual monitoring of programs and training, continue discussions with each AAA by specific program to discuss and document additional options for increasing consumer choice and control.

Responsibility/Time: Program Manager/ FY20 – FY23

Task 3: On an ongoing basis, with emphasis on site visits, work with AAAs to ensure clients are receiving opportunities to make decisions with regards to providers and services.

Responsibility/Time: Program Manager/ FY20 – FY23

D. Focus Area IV – Elder Justice
Utah seeks to allow older adults to remain safe, healthy and independent. In providing protection and assistance to Utah’s older adults and vulnerable adults, Utah’s Adult Protective Services works to respect and maintain the dignity and wishes of its clients, while coordinating with AAAs, law enforcement, prosecutors and other partners to resolve protective needs and provide clients with tools to avoid being victims in the future.

1) Adult Protective Services: APS investigates cases of abuse, neglect and exploitation of Utah’s older adults and vulnerable adults. Coordinating with law enforcement and other responders, APS works to resolve protective needs and to connect clients with additional services that can help to resolve their current issues and prevent future ones.

Objective: Support older adults and vulnerable adults in remaining healthy and safe by resolving protective needs and supporting them in reducing the chance of abuse, neglect and exploitation.

Outcomes:
- Adult Protective Services will serve elder and disabled adults needing protection from abuse, neglect or exploitation.
- Improve coordination at both State and local levels to better serve vulnerable and older adults who are eligible for Adult Protective Services.
- Provide opportunities that educate the public and professionals about vulnerable and elder abuse.

Task 1: Investigate abuse, neglect, and exploitation and provide resolution for protective needs of vulnerable adults within APS Statute, Rules, and policy.

Responsibility/Time: APS Director and Staff/FY20 – FY23

Task 2: Assist victims and work to prevent further abuse, neglect, and exploitation by identifying and resolving any protective needs.

Responsibility/Time: APS Director and Staff/ FY20 – FY23
Task 3: Coordinate with law enforcement to investigate cases involving older adults and vulnerable adults.

Responsibility/Time: APS Director and Staff/ FY20 – FY23

Task 4: Work with State Attorney General Medicaid Fraud Unit, County and City prosecutors to identify and prosecute incidents of abuse and exploitation of the vulnerable and older adults in the State of Utah.

Responsibility/Time: APS Director and Staff/ FY20 – FY23

Task 5: Strengthen state and local partnerships to increase identification and reporting of suspected abuse.

Responsibility/Time: APS Director and Staff/ FY20 – FY23

Task 6: Work to improve the coordination between Adult Protective Services and Community agencies and organizations involved with the disabled and elder adult population.

Responsibility/Time: APS Director and Staff/ FY20 – FY23

Task 7: Ensure community involvement of staff by involving staff in local multi-disciplinary resource teams, and other local councils or groups.

Responsibility/Time: APS Director and Staff/ FY20 – FY23

Task 8: Initiate a statewide effort to educate the public about APS and mandatory reporting of suspected abuse, neglect and exploitation.

Responsibility/Time: APS Director and Staff/ FY20 – FY23

Task 9: Develop innovative opportunities for APS staff to become more involved in community networking.

Responsibility/Time: APS Director and Staff/ FY20 – FY23

Task 10: Facilitate resource coordination and community education to promote community awareness of the APS program throughout the state.

Responsibility/Time: APS Director and Staff/ FY20 – FY23

2) Long-term Care Ombudsman: The state Long-term Care Ombudsman oversees paid and volunteer ombudsman working around the state to resolve resident rights issues in facility-based care.

Objective: Work with residents, families and care providers to resolve patient rights issues, and to advocate for residents of facility-based care in order to allow them to
remains healthy, empowered and as independent as possible.

**Outcomes:**
- Ensure that Utah’s LTCOP is following all state and Federal laws and rules and remains in compliance with these regulations.
- Fund and staff program to run with the current case volumes, as well as new case levels.
- Strengthen Utah’s existing long-term care system by fostering quality, personal choice and autonomy, and individualized services to foster a seamless continuum of quality services that effectively serve diverse populations.

**Task 1:** Work within the Department of Human Services to get support to be identified on the governor’s budget as a need for increased funding  
*Responsibility/Time:* State Long-term Care Ombudsman/ FY20 – FY23

**Task 2:** Network with other agencies (i.e., Utah Health Care Association, Utah Assisted Living Association, U4A, Commission on Aging, State of Utah Legislators, etc.) to obtain support  
*Responsibility/Time:* State Long-term Care Ombudsman/ FY20 – FY23

**Task 3:** Work with DAAS Finance Officer to identify a proposed financial budget  
*Responsibility/Time:* State Long-term Care Ombudsman/ FY20 – FY23

**Task 4:** Encourage and provide Utah’s Legislators with education related to Utah’s LTCOP as well as provide them the ability to participate in ride along with program staff.  
*Responsibility/Time:* State Long-term Care Ombudsman/ FY20 – FY23

**Task 5:** The State Ombudsman will conduct monthly phone conferences with AAA LTCO programs to provide training, address concerns, and all of exchange between the various agencies.  
*Responsibility/Time:* State Long-term Care Ombudsman/ FY20 – FY23

**Task 6:** The State Ombudsman will visit each AAA program annually or as needed and provide feedback and monitoring.  
*Responsibility/Time:* State Long-term Care Ombudsman/ FY20 – FY23

**3) Legal Services:** The Legal Services Developer is responsible for conceptualizing and then implementing a statewide vision of the delivery of legal advocacy services to the states most vulnerable older adults. They coordinate the provision of legal assistance to older adults with low income/low resources. Direct legal services are provided by Utah Legal Services, Inc., the legal service corporation in Utah and some private attorneys through contract arrangements. Other services including information and referral are provided by volunteer lawyers and the Division’s Legal Services Developer.
Objectives: Provide older adults with education and information on the legal process and areas of the law that directly impact their lives. Educate and inform policymakers on legal issues faced by older adults, and provide direction and relevant information for updating and developing legal policy and legislation with impact on older adults.

Outcomes:

- Utah’s new Legal Services Developer will be able to get up to speed and complete her training on the legal needs and legal resources available to older adults in the state.
  i. This includes updating the Legal Needs Assessment for both Rural and Urban segments of the State of Utah, determining the target issues.
  ii. Performing a Legal Capacity Assessment of the existing and identifiable elements of the legal services delivery system and in respect to how it is meeting the goals and purposes of the Older Americans Act. This will focus on Title III-B providers and the services they provide currently as well as evaluating unaddressed needs of the elderly.
- Provide the services of the state Legal Services Developer to ensure state leadership in securing and maintaining the legal rights of older persons, the coordination of the provision of legal assistance, and the continuing improvement of the quality and quantity of legal services provided to older persons in Utah.
- The Division will continue its outreach training to reduce financial exploitation of older adults

Task 1: Complete training and become familiar with the Older Americans Act, state statutes, and other resources related to older adult legal needs in the state.
Responsibility/Time: Legal Services Developer/FY20 – FY23

Task 2: Complete an update to the legal needs assessment that has been conducted in previous years, with focus on the differing needs and priorities for Rural and Urban areas
Responsibility/Time: Legal Services Developer/FY20 – FY23

Task 3: Complete a Legal Capacity Assessment of available legal services for our target population in both rural and urban areas of the state.
Responsibility/Time: Legal Services Developer/FY20 – FY23

Task 4: Continue to develop a comprehensive system of legal services that targets those older persons in greatest social and economic need while continuing to provide an array of legal services to all older Utah residents.
Responsibility/Time: Legal Services Developer/FY20 – FY23

Task 5: Build upon efforts to increase awareness among older and disabled adults of legal issues that affect them and the legal services available to them, making sure that information is available in a form understandable to the average layman.
Responsibility/Time: Legal Services Developer/FY20 – FY23
**Task 6:** Provide technical assistance and training regarding the legal issues affecting older and disabled adults to various Area Agencies on Aging, Adult Protective Services, long-term care organizations, other government and non-profit agencies, and other professionals including attorneys.

*Responsibility/Time:* Legal Services Developer/FY20 – FY23

**Task 7:** Coordinate efforts with the various Area Agencies on Aging, local bar associations, the Utah State Bar, and the two law schools in Utah, to promote pro bono legal services handled on a case by case basis depending on the needs of the inquirer and the willingness of the volunteer provider. Clients will normally work through existing resources with Utah Legal Services. If they are not able to have their needs met, the State Legal Services Developer will work with the pro bono network and other available resources to find additional options (such as grants) as appropriate and if available.

*Responsibility/Time:* Legal Services Developer/FY20 – FY23
Part V

FINANCIAL
A. INTRASTATE FUNDING FORMULA:

NOTE: The State Division of Aging and Adult Services, and the State Board of Aging and Adult Services, has approved the existing intrastate funding formula for allocation of Older Americans Act funds to the twelve Area Agencies on Aging. The intrastate funding formula was last reviewed in FY16. At this same time the funding formula used to allocate money for the state-funded Alternatives program was updated. The intrastate funding formula will be reviewed by the State Board on Aging in conjunction with the submittal of this new four year plan. The population numbers in the formula are updated annually from population estimates provided by the Governor’s Office of Management and Budget. The following elements are included within the formula:

- Regardless of size or population, all Area Agencies receive an equal base funding which disproportionately benefits smaller and rural agencies.
- Of the remaining funds to be allocated, 7.5% are allocated based on the square mileage covered by the Area Agencies. This works as a rural differential given the larger areas and distances covered by rural agencies.
- With regard to the population element is made up of the following:
  - The number of persons aged 60 and over with annual becomes below 125% of poverty
  - The number of minority persons, Hispanic, Native American, Asian/Pacific Islander, and Blacks, age 60 and over.
  - The number of personas aged 75 and over multiplied by two

The formula is found in Division rule R510-100 included below:

R510-100. Funding Formulas.

R510-100-1. Compliance with State and Federal Law for Older Americans Act.

1.1 The Division of Aging and Adult Services shall develop an intrastate funding formula for distribution of Older Americans Act, Title III funds and State general funds for social and nutrition services which complies with 45 CFR, Subchapter C, Part 1321.37 and with 62A-3-108.

1.2 The formula shall be reviewed whenever a new State Plan on Aging is required to be submitted.

R510-100-1. Affected Funding Sources for Older Americans Act.

2.1 The funding formula shall include:
   A. All federal funds received under Title III of the Older Americans Act, with the exception of:
      (1) Allowable state administrative funds, and
(2) Funds allocated to the State-delivered Long-Term Care Ombudsman Program.
B. All state funds appropriated for Title III social and nutrition services.

2.2 The funding formula shall not include state or federal funds appropriated for:
A. The Alternatives Program,
B. Adult Services under the Division, or
C. Funds identified under 62A-3-108(2).

R510-100-3. Funding Formula Factors for Older Americans Act.
3.1 The funding formula shall incorporate the following factors:
A. Base factor divided equally among the twelve Area Agencies on Aging in existence on July 1, 1986.
B. Population factor comprised of each Area Agency’s proportion of the State’s weighted older adult population; and
C. Land area factor consisting of each Area Agency’s proportion of the State’s total adjusted square miles.

3.2 Weighted older adult population shall consist of:
A. The number of persons age 60 and over who have annual incomes below 125% of poverty, plus
B. The number of persons age 75 and over weighted two times, plus
C. The number of minority persons, Hispanic, Native American, Asian/Pacific Islander, and Blacks, age 60 and over.

3.3 All population figures utilized shall reflect the most recent U.S. Census figures adjusted on an annual basis based on available population estimates from the Governor’s Office of Management and Budget.

R510-100-4. Base Restrictions for Older Americans Act.
1.1 If any Area Agency on Aging in existence on July 1, 1986 should in the future subdivide into two or more Area Agencies on Aging, the base amount allocated to the original Area Agency shall be divided proportionately among the new Area Agencies.

R510-100-5. Funding Distribution for Older Americans Act.
1.1 Distribution of funds under the formula shall be as follows after deduction of funds allocated by base factor:
A. 7.5% of remaining formula funds allocated to the land area factor; and
B. 92.5% of remaining formula funds allocated to the population factor.
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Part VI

State Plan Assurances
PART V: State Plan Assurances

STATE PLAN ASSURANCES, REQUIRED ACTIVITIES AND INFORMATION REQUIREMENTS
Older Americans Act, As Amended in 2016

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

ASSURANCES

Sec. 305, ORGANIZATION

(a) In order for a State to be eligible to participate in programs of grants to States from allotments under this title--
(2) The State agency shall—(A) except as provided in subsection (b)(5), designate for each such area after consideration of the views offered by the unit or units of general purpose local government in such area, a public or private nonprofit agency or organization as the area agency on aging for such area;

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

(E) provide assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas), and include proposed methods of carrying out the preference in the State plan;

(F) provide assurances that the State agency will require use of outreach efforts described in section 307(a)(16); and

(G)(ii) provide an assurance that the State agency will undertake specific program development, advocacy, and outreach efforts focused on the needs of low-income minority older individuals;

(c) An area agency on aging designated under subsection (a) shall be--

DAAS State Plan: FY 2020-2023 - 55 -
(5) in the case of a State specified in subsection (b) (5), the State agency; and shall provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area. In designating an area agency on aging within the planning and service area or within any unit of general purpose local government designated as a planning and service area the State shall give preference to an established office on aging, unless the State agency finds that no such office within the planning and service area will have the capacity to carry out the area plan.

Note: STATES MUST ENSURE THAT THE FOLLOWING ASSURANCES (SECTION 306) WILL BE MET BY ITS DESIGNATED AREA AGENCIES ON AGENCIES, OR BY THE STATE IN THE CASE OF SINGLE PLANNING AND SERVICE AREA STATES.

Sec. 306(a), AREA PLANS

(a) Each area agency on aging…Each such plan shall--
(2) provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services-
(A) services associated with access to services (transportation, health services (including mental and behavioral health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible) and case management services);
(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
(C) legal assistance; and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded;

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

(aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;
(bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and

(II) include proposed methods to achieve the objectives described in items (aa) and (bb) of sub-clause (I);

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

DAAS State Plan: FY 2020-2023 - 56 -
(I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;  
(II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and   
(III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and  
(iii) with respect to the fiscal year preceding the fiscal year for which such plan is prepared --  
(I) identify the number of low-income minority older individuals in the planning and service area;  
(II) describe the methods used to satisfy the service needs of such minority older individuals; and  
(III) provide information on the extent to which the area agency on aging met the objectives described in clause (i).  

(B) provide assurances that the area agency on aging will use outreach efforts that will—  
(i) identify individuals eligible for assistance under this Act, with special emphasis on--  
(I) older individuals residing in rural areas;  
(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);  
(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);  
(IV) older individuals with severe disabilities;  
(V) older individuals with limited English proficiency;  
(VI) older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and  
(VII) older individuals at risk for institutional placement; and  
(ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance; and  
(C) contain an assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.  

(5) provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities;  

(9) provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title;
(11) provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including—
(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;
(B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and
(C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans;

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

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

(C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contract or such relationship;

(D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contract or such relationship;

(E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals;

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

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

(A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and
(B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;

Sec. 307, STATE PLANS
(a) . . . Each such plan shall comply with all of the following requirements:

(3) The plan shall--
   (B) with respect to services for older individuals residing in rural areas—
      (i) provide assurances that the State agency will spend for each fiscal year,
          not less than the amount expended for such services for fiscal year 2000…

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

(B) The plan shall provide assurances that--
   (i) no individual (appointed or otherwise) involved in the designation of the State agency or an
       area agency on aging, or in the designation of the head of any subdivision of the State agency or
       of an area agency on aging, is subject to a conflict of interest prohibited under this Act;
   (ii) no officer, employee, or other representative of the State agency or an area agency on
       aging is subject to a conflict of interest prohibited under this Act; and
   (iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this
       Act.

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

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

(11) The plan shall provide that with respect to legal assistance --
   (A) the plan contains assurances that area agencies on aging will
      (i) enter into contracts with providers of legal assistance which can demonstrate the experience
          or capacity to deliver legal assistance;
      (ii) include in any such contract provisions to assure that any recipient of funds under division
          (i) will be subject to specific restrictions and regulations promulgated under the Legal Services
          Corporation Act (other than restrictions and regulations governing eligibility for legal
          assistance under such Act and governing membership of local governing boards) as determined
          appropriate by the Assistant Secretary; and
      (iii) attempt to involve the private bar in legal assistance activities authorized under this title,
          including groups within the private bar furnishing services to older individuals on a pro bono
          and reduced fee basis.

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

(D) the plan contains assurances, to the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals; and

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

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

(A) the plan contains assurances that any area agency on aging carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for--

(i) public education to identify and prevent abuse of older individuals;
(ii) receipt of reports of abuse of older individuals;
(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and
(iv) referral of complaints to law enforcement or public protective service agencies where appropriate;…

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

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

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

(B) to designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include--

(i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and

(ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effectively linguistic and cultural differences.
(16) The plan shall provide assurances that the State agency will require outreach efforts that will—
(A) identify individuals eligible for assistance under this Act, with special emphasis on—
(i) older individuals residing in rural areas;
(ii) older individuals with greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas);
(iii) older individuals with greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas);
(iv) older individuals with severe disabilities;
(v) older individuals with limited English-speaking ability; and
(vi) older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
(B) inform the older individuals referred to in clauses (i) through (vi) of subparagraph (A), and the caretakers of such individuals, of the availability of such assistance.

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

(18) The plan shall provide assurances that area agencies on aging will conduct efforts to facilitate the coordination of community-based, long-term care services, pursuant to section 306(a)(7), for older individuals who--
(A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;
(B) are patients in hospitals and are at risk of prolonged institutionalization; or
(C) are patients in long-term care facilities, but who can return to their homes if community-based services are provided to them.

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

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

(21) The plan shall--
(A) provide an assurance that the State agency will coordinate programs under this title and programs under title VI, if applicable; and
(B) provide an assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title, if applicable, and specify the ways in which the State agency intends to implement the activities.

(23) The plan shall provide assurances that demonstrable efforts will be made--
(A) to coordinate services provided under this Act with other State services that benefit older individuals; and
(B) to provide multigenerational activities, such as opportunities for older individuals to serve as mentors or advisers in child care, youth day care, educational assistance, at-risk youth intervention, juvenile delinquency treatment, and family support programs.

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

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

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

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

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

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

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

(a) ELIGIBILITY.—In order to be eligible to receive an allotment under this subtitle, a State shall include in the state plan submitted under section 307--
(1) an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter;

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

(3) an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and
assistance in securing and maintaining, benefits and rights;

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

(5) an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5).

(6) an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3—
   (A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for--
      (i) public education to identify and prevent elder abuse;
      (ii) receipt of reports of elder abuse;
      (iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and
      (iv) referral of complaints to law enforcement or public protective service agencies if appropriate;
   (B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and
   (C) all information gathered in the course of receiving reports and making referrals shall remain confidential except--
      (i) if all parties to such complaint consent in writing to the release of such information;
      (ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or
      (iii) upon court order…
REQUIRED ACTIVITIES

Sec. 305 ORGANIZATION
(a) In order for a State to be eligible to participate in programs of grants to States from allotments under this title— . . .
(2) the State agency shall—
(G)(i) set specific objectives, in consultation with area agencies on aging, for each planning and service area for providing services funded under this title to low-income minority older individuals and older individuals residing in rural areas;
(ii) provide an assurance that the State agency will undertake specific program development, advocacy, and outreach efforts focused on the needs of low-income minority older individuals; and
(iii) provide a description of the efforts described in clause (ii) that will be undertaken by the State agency; . . .

Sec. 306 – AREA PLANS
(a) . . . Each such plan shall— (6) provide that the area agency on aging will—
(F) in coordination with the State agency and with the State agency responsible for mental and behavioral health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the area agency on aging with mental health services provided by community health centers and by other public agencies and nonprofit private organizations;
(6)(H) in coordination with the State agency and with the State agency responsible for elder abuse prevention services, increase public awareness of elder abuse, neglect, and exploitation, and remove barriers to education, prevention, investigation, and treatment of elder abuse, neglect, and exploitation, as appropriate;

Sec. 307(a) STATE PLANS
(1) The plan shall—
(A) require each area agency on aging designated under section 305(a)(2)(A) to develop and submit to the State agency for approval, in accordance with a uniform format developed by the State agency, an area plan meeting the requirements of section 306; and
(B) be based on such area plans.

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

(2) The plan shall provide that the State agency will --
(A) evaluate, using uniform procedures described in section 202(a)(26), the need for supportive services (including legal assistance pursuant to 307(a)(11), information and assistance, and transportation services), nutrition services, and multipurpose senior centers within the State;
(B) develop a standardized process to determine the extent to which public or private programs and resources (including volunteers and programs and services of voluntary organizations) that have the capacity and actually meet such need; …

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

Note: “PERIODIC” (DEFINED IN 45CFR PART 1321.3) MEANS, AT A MINIMUM, ONCE EACH FISCAL YEAR.

(5) The plan shall provide that the State agency will:
   (A) afford an opportunity for a hearing upon request, in accordance with published procedures, to any area agency on aging submitting a plan under this title, to any provider of (or applicant to provide) services;
   (B) issue guidelines applicable to grievance procedures required by section 306(a)(10); and
   (C) afford an opportunity for a public hearing, upon request, by an area agency on aging, by a provider of (or applicant to provide) services, or by any recipient of services under this title regarding any waiver request, including those under Section 316.

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

(8)(A) The plan shall provide that no supportive services, nutrition services, or in-home services will be directly provided by the State agency or an area agency on aging in the State, unless, in the judgment of the State agency--
   (i) provision of such services by the State agency or the area agency on aging is necessary to assure 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.

(12) The plan shall provide, whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals—
   (B) the State will not permit involuntary or coerced participation in the program of services described in this paragraph by alleged victims, abusers, or their households; and
   (C) all information gathered in the course of receiving reports and making referrals shall remain confidential unless all parties to the complaint consent in writing to the release of such information, except that such information may be released to a law enforcement or public protective service agency.
(22) If case management services are offered to provide access to supportive services, the plan shall provide that the State agency shall ensure compliance with the requirements specified in section 306(a)(8).

INFORMATION REQUIREMENTS

IMPORTANT: States must provide all applicable information following each OAA citation listed below. Please note that italics indicate emphasis added to highlight specific information to include. The completed attachment must be included with your State Plan submission.

Section 305(a)(2)(E)
Describe the mechanism(s) for assuring that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the State plan;

- The Division works to ensure preference is given to older individuals with greatest economic and social needs while focusing on individuals emphasized in the Older Americans Act, including low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas, as it coordinates with Area Agencies on Aging. The Division has developed screening and risk score tools in conjunction with the Area Agencies that give preference to individuals most at risk and weights scores for the above listed populations higher for those individuals. Additionally, the Division provides ongoing training and support to Area Agencies, both in an annual training setting as well as during annual program monitoring visits, which emphasizes these target populations. Finally, Area Agencies are required to report on outreach efforts to these target populations in an annual plan process that is reviewed by both the Division and the State Board on Aging.

Section 306(a)(17)
Describe the mechanism(s) for assuring that each Area Plan will include information detailing how the Area Agency will coordinate activities and develop long-range emergency preparedness plans with local and State emergency response agencies, relief organizations, local and State governments and other institutions that have responsibility for disaster relief service delivery.

- In addition to the Division and Area Agencies participating in annual emergency preparedness exercises such as the “Great Shake Out,” the annual Area Agency plan process includes a section for the agencies to update and clarify the emergency planning process in their particular counties. These plans are presented before the Division and State Board on Aging for questions, review and approval each year.

Section 307(a)(2)
The plan shall provide that the State agency will --…

(C) specify a minimum proportion of the funds received by each area agency on aging in the
State to carry out part B that will be expended (in the absence of a waiver under sections 306(c) or 316) by such area agency on aging to provide each of the categories of services specified in section 306(a)(2). *(Note: those categories are access, in-home, and legal assistance. Provide specific minimum proportion determined for each category of service.)*

- The required minimum proportions required of the Area Agencies to be expended by service category are:
  - Access to Services – 8%
  - In-home Services – 8%
  - Legal Assistance – 2%

**Section 307(a)(3)**

The plan shall--

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

(i) provide assurances the State agency will spend for each fiscal year not less than the amount expended for such services for fiscal year 2000;

(ii) identify, for each fiscal year to which the plan applies, the projected costs of providing such services (including the cost of providing access to such services); and

(iii) describe the methods used to meet the needs for such services in the fiscal year preceding the first year to which such plan applies.

- In the section of this plan titles **“Part V Financial,”** the Division has included the financial allocations to the various Area Agencies by program. This amount exceeds the fiscal year 2000 levels across the board. Given the stability of program funding year over year, the FY20 levels listed are our best predictor of the funding levels for FY21-23. These funding levels are also consistent with the previous year’s funding. Utah’s Intrastate Funding Formula includes a rural component to provide additional resources to rural Area Agencies.

**Section 307(a)(10)**

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

- As in years past, the needs of older adults in rural areas continues to be a priority for the state. The funding formula contains both a set base amount per Area Agency as well as a portion of funding based on the geographic size of the Area Agency. Both these factors disproportionately benefit rural areas. In addition, the Division works closely with rural Area Agencies to develop best practices, receive technical support, and otherwise focus on the needs of older individuals in rural parts of the state.
Section 307(a)(14)

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

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

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

- The state of Utah has an estimated 3,400 minority seniors in poverty. The Division utilizes census data along with data from the Governor’s Office of Management and Budget along with demographic data from the Kem C. Gardner Policy Institute at the University of Utah to update its funding formula annually. Area Agencies report on outreach to target populations in the annual plan process. Priority is given to these target population in the client assessment and risk tool used by the Area Agencies.

Section 307(a)(21)

The plan shall --

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

- The Division participates with the Utah Department of Human Services Tribal and Indian Issues workgroup to directly interact with tribes on the needs of native elders. In additionally, all Area Agencies report on work and coordination with tribes in their particular service area. As with other targeted populations, native elders are scored more favorably on assessment and risk tools used to screen clients.

Section 307(a)(28)

(A) The plan shall include, at the election of the State, an assessment of how prepared the State is, under the State’s statewide service delivery model, for any anticipated change in the number of older individuals during the 10-year period following the fiscal year for which the plan is submitted.

(B) Such assessment may include—

(i) the projected change in the number of older individuals in the State;

(ii) an analysis of how such change may affect such individuals, including individuals with low incomes, individuals with greatest economic need, minority older individuals, older individuals residing in rural areas, and older individuals with limited English proficiency;

(iii) an analysis of how the programs, policies, and services provided by the State can be improved, including coordinating with area agencies on aging, and how resource levels can be adjusted to meet the needs of the changing population of older individuals in the State; and

(iv) an analysis of how the change in the number of individuals age 85 and older in the State is expected to affect the need for supportive
• Please see the assessment of Utah’s demographic changes in “Part II Context: Aging Services in Utah” of this plan for a discussion of the growth of the older adult population in the state.

Section 307(a)(29)
The plan shall include information detailing how the State will coordinate activities, and develop long-range emergency preparedness plans, with area agencies on aging, local emergency response agencies, relief organizations, local governments, State agencies responsible for emergency preparedness, and any other institutions that have responsibility for disaster relief service delivery.

• In addition to the points outlined in the response to 306(a)(17) of these assurances, the Division is part of internal Department emergency planning workgroups, as well as a larger workgroup including Department and state preparedness coordinators, county coordinators and other non-profit and religious organizations with a role in emergency responses. Further, the Division participates in annual tabletop response exercises overseen by state emergency managers. Local Area Agencies participate in their county emergency preparedness planning and training efforts.

Section 307(a)(30)
The plan shall include information describing the involvement of the head of the State agency in the development, revision, and implementation of emergency preparedness plans, including the State Public Health Emergency Preparedness and Response Plan.

• As mentioned above, the Division Director works with Department and state emergency managers to update plans to better consider the needs of older and vulnerable adults in the emergency planning process.

Section 705(a) ELIGIBILITY --

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

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

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

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

(1) an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter;
(2) an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle;
(3) an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights;
(4) an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter;
(5) an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5);
(6) an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3--
(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for-
(i) public education to identify and prevent elder abuse;
(ii) receipt of reports of elder abuse;
(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and
(iv) referral of complaints to law enforcement or public protective service agencies if appropriate;
(B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and
(C) all information gathered in the course of receiving reports and making referrals shall remain confidential except--
(i) if all parties to such complaint consent in writing to the release of such information;
(ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or
(iii) upon court order.

- The Utah Division of Aging and Adult Services affirms that it is compliant with the above assurances.

Nels Holmgren – Director, DAAS

Ann Williamson – Executive Director, DHS
Part VII

DESIGNATIONS
<table>
<thead>
<tr>
<th>AREA AGENCIES ON AGING</th>
<th>May 6, 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bear River Area Agency on Aging</strong></td>
<td><strong>Salt Lake County Area Agency on Aging</strong></td>
</tr>
<tr>
<td>Box Elder, Cache, Rich (PSA 01)</td>
<td>Salt Lake (PSA 2B)</td>
</tr>
<tr>
<td>Carolyn Reed, Director, Aging Services</td>
<td>Paul Leggett, Director</td>
</tr>
<tr>
<td>170 North Main</td>
<td>2001 South State, #S-1500</td>
</tr>
<tr>
<td>Logan, UT 84321</td>
<td>Salt Lake City, UT 84190-2300</td>
</tr>
<tr>
<td>Phone: 435-752-7242</td>
<td>Phone: 385-468-3200</td>
</tr>
<tr>
<td>Toll-free: 1-877-772-7242</td>
<td>Fax: 385-468-3186</td>
</tr>
<tr>
<td>Fax: 435-752-6962</td>
<td>Email: <a href="mailto:pleggett@slco.org">pleggett@slco.org</a></td>
</tr>
<tr>
<td>Email: <a href="mailto:carolynr@brag.utah.gov">carolynr@brag.utah.gov</a></td>
<td>Website: <a href="http://www.aging.slco.org">www.aging.slco.org</a></td>
</tr>
</tbody>
</table>

| Davis County Health Dept., Family Health and Senior Services Division | **San Juan County Area Agency on Aging** |
| Davis (PSA 2C) | San Juan (PSA 7B) |
| Kristy Cottrell, Director of Family Health and Senior Services | Tammy Gallegos, Director |
| 22 South State Street, 3rd floor | 117 South Main (PO Box 9) |
| Clearfield UT 84015 | Monticello, UT 84535-0009 |
| PO Box 618 - Farmington UT 84025-0618 | Phone: 435-587-3225 |
| Phone: 801-525-5050 | Fax: 435-587-2447 |
| Fax: 801-525-5061 | Email: tgallegos@sanjuancounty.org |
| Email: kcottrell@co.davis.ut.us | Website: www.sanjuancounty.org |
| Website: www.daviscountyutah.gov | |

| Five-County Area Agency on Aging | **Six-County Area Agency on Aging** |
| Beaver, Garfield, Iron, Kane, Washington | Juab, Millard, Piute, Sanpete, Sevier, Wayne (PSA 04) |
| Carrie Schonlaw, Director (PSA 05) | Scott Christensen, Director |
| 1070 West 1600 South, Bldg. B | 250 North Main / PO Box 820 |
| PO Box 1550, 84771-1550 | Richfield, UT 84701 |
| St. George, UT 84770 | Phone: 435-893-0700 |
| Phone: 435-673-3548 | Toll free: 1-888-899-4447 |
| Toll-free: 1-800-705-1699 | Fax: 435-893-0701 |
| Fax: 435-673-3540 | **Wayne County Phone: 435-781-3511** |
| Email: c schonlaw@fivecounty.utah.gov | Email: schristensen5@sixcounty.com |
| Website: www.fivecounty.utah.gov | Website: www.sixcounty.com |

| Mountainland Dept. of Aging and Family Services | **Southeastern Utah AAA** |
| Summit, Utah, Wasatch (PSA 03) | Carbon, Emery, Grand (PSA 7A) |
| Heidi DeMarco, Director | Shawna Horrocks, Director |
| 586 East 800 North | Phone: 435-613-0036 |
| Orem, UT 84097-4146 | Technical Assistance Center |
| Phone: 801-229-3800 | 375 South Carbon Avenue |
| Fax: 801-229-3671 | (PO Box 1106) |
| Email: hdemarco@mountainland.org | Price, UT 84501 |
| Website: www.mountainland.org | Phone: 435-613-0036 |

**Tooele County Area Agency on Aging**

Tooele (PSA 2T)

Jamie Zwerin, Director

Phone: 435-277-2465

Fax: 435-277-2444

Email: jzwerin@tooelehealth.org

Website: www.tooelehealth.org

**Uintah Basin Area Agency on Aging**

Daggett, Duchesne (PSA 6A)

Sandy Whalin, Director

330 East 100 South

Roosevelt, UT 84066

Phone: 435-722-4518

Fax: 435-722-4890

Email: sandyw@ubaog.org

**Council on Aging - Golden Age Center – (Uintah County PSA)**

Uintah County (PSA 6C)

LouAnn Young, Director

Mitch Migliori, Assistant Director

330 South Aggie Blvd

Vernal, UT 84078

Phone: 435-789-2169

Fax: 435-789-2171

Email: lyoung@uintahgoldenage.org

mmigliori@uintahgoldenage.org

Website: www.uintahgoldenage.org

**Weaver Area Agency on Aging**

Morgan, Weber (PSA 2A)

Nobu Iizuka, Director

237 26th Street, Suite 320

Ogden, UT 84401

Phone: 801-625-3770

Fax: 801-778-6830

Email: nobui@weberhs.org

Website: www.weberhs.net
ADULT PROTECTIVE SERVICES
ADMINISTRATIVE OFFICES

195 NO. 1950 WEST
SALT LAKE CITY, UTAH 84116
Phone: 801-538-3910
Fax: 801-538-4395

DIRECTOR: Nan Mendenhall 801-538-4591
INFORMATION SPECIALIST IV: Debbie Booth 801-538-4339
SENIOR BUSINESS ANALYST: Susan Street 801-538-4690

TO MAKE A REFERRAL:
SALT LAKE COUNTY: 801-538-3567
ALL OTHER AREAS OF UTAH: 1-800-371-7897

ADULT PROTECTIVE SERVICES
REGION OFFICES

<table>
<thead>
<tr>
<th>NORTHERN REGION</th>
<th>SOUTHEAST REGION</th>
<th>CENTRAL REGION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Program Administrator:</strong> Mark Perry</td>
<td><strong>Program Administrator:</strong> Traci</td>
<td><strong>Program Administrator:</strong> Traci Lee</td>
</tr>
<tr>
<td><strong>Counties Served:</strong> Box Elder, Cache, Davis, Morgan, Rich, Utah, Wasatch, Weber</td>
<td><strong>Counties Served:</strong> Beaver, Carbon, Daggett, Duchesne, Emery, Garfield, Grand, Iron, Juab, Kane, Millard, Piute, San Juan, Sanpete, Sevier, Uintah, Washington, Wayne</td>
<td><strong>Counties Served:</strong> Salt Lake, Tooele, Summit</td>
</tr>
<tr>
<td>Weber, Morgan</td>
<td><strong>Kane, Washington</strong></td>
<td><strong>Salt Lake, Tooele, Summit, Wasatch</strong></td>
</tr>
<tr>
<td>Davis</td>
<td><strong>Juab, Millard, Sanpete, Piute, Sevier, Wayne</strong></td>
<td>Utah</td>
</tr>
<tr>
<td>1350 East 1450 South Clearfield, Utah 84015 Phone: 801-776-7314 Fax: 801-626-3153</td>
<td>201 East 500 North Richfield, Utah 84701 Phone: 435-896-1211 Fax: 435-893-2054</td>
<td>150 East Center Street # 1500 Provo, Utah 84606 Phone: 801-374-7236 Fax: 801-374-7278</td>
</tr>
<tr>
<td>115 W. Golf Course Rd Ste B Logan, Utah 84321 Phone: 435-787-3425 Fax: 435-787-3444</td>
<td>475 West Price River Dr. #262 Price, Utah 84501 Phone: 435-636-2394 Fax: 435-637-8384</td>
<td></td>
</tr>
</tbody>
</table>

TO MAKE A REFERRAL:
SALT LAKE COUNTY: 801-538-3567
ALL OTHER AREAS OF UTAH: 1-800-371-7897
Part VIII

ADMINISTRATIVE STRUCTURE
PART VI: ADMINISTRATIVE STRUCTURE

A. LEGAL BASIS
   Legal Basis for Single Organization
   Utah Code Annotated 2005
   Volume 3, Chapter 3, Part 1-p. 373

62A-3-102. Division created.

There is created a Division of Aging and Adult Services within the Department, under the administration and general supervision of the Executive Director of the Department.

62A-3-104. Authority of Division.

(1) The Division is the sole state agency, as defined by the Older Americans Act of 1965, 42 U.S.C. 3001 et seq., to serve as an effective and visible advocate for the aging and adult population of this State, to develop and administer a state plan under the policy direction of the Board, and to take primary responsibility for state activities relating to provisions of the Older Americans Act of 1965.

(2) (a) The Division has authority to designate planning and service areas for the State, and to designate an Area Agency on Aging within each planning and service area to design and implement a comprehensive and coordinated system of services and programs for the aging and adult populations of the State including, but not limited to, substitute care, nutrition services, access services, in-home services, legal services, day care, day treatment services, and protective services.

   (b) That designation may be withdrawn upon request of the Area Agency on Aging or upon noncompliance with the provisions of the Older Americans Act of 1965, 42 U.S.C. 3001 et seq., the federal regulations enacted under that act, the provisions of this chapter, or the rules, policies, or procedures established by the Division.

(3) The Division has authority to receive and distribute State and Federal funds for the Division’s programs and services to the aging and adult population of the State.

(4) The Division has authority to establish either directly or by contract, programs of advocacy, monitoring, evaluation, technical assistance, and public education to enhance the quality of life for aging and adult citizens of the State.

(5) In accordance with the rules of the Division and Title 63, Chapter 56, Utah Procurement Code, the Division may:

   (a) contract with the governing bodies of Area Agencies on Aging to provide a comprehensive program of services for aging and adult citizens of the State; and

   (b) contract with public and private entities for special services.

(6) The Division has authority to provide for collection, compilation, and dissemination of information, statistics, and reports relating to issues facing aging and adult citizens.
(7) The Division has authority to prepare and submit reports regarding the operation and administration of the Division to the Department, the Legislature, and the Governor as requested.

(8) The Division shall:

(a) implement and enforce policies established by the Board governing all aspects of the Division’s programs for aging and adult persons in the State;

(b) monitor and evaluate programs provided by or under contract with the Division, Area Agencies on Aging, and any entity that receives funds from an Area Agency on Aging to ensure compliance with all applicable State and Federal statutes, policies, and procedures;

(c) examine expenditures of public funds;

(d) withhold funds from programs based on contract noncompliance;

(e) review and approve plans of Area Agencies on Aging in order to ensure compliance with Division policies and to ensure a statewide comprehensive program;

(f) promote and establish cooperative relationships with State and Federal agencies, social and health agencies, education and research organizations, and other related groups in order to further programs for aging and adult persons, and prevent duplication of services;

(g) advocate for the aging and adult population; and

(h) promote and conduct research on the problems and needs of aging and adult persons, and submit recommendations for changes in policies, programs, and funding to the Governor and the Legislature.