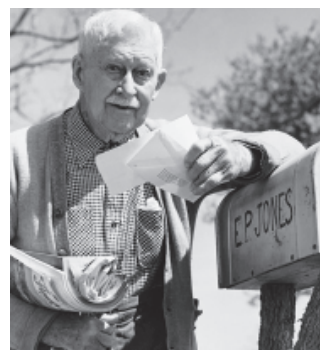




Delaware State Plan on Aging

October 1, 2008
to
September 30, 2012



**DELAWARE HEALTH
AND SOCIAL SERVICES**
DIVISION OF SERVICES FOR AGING AND
ADULTS WITH PHYSICAL DISABILITIES

www.dhss.delaware.gov/dsaapd

Table of Contents

A Message from the Secretary	iii
Executive Summary	1
Introduction.....	3
Context.....	4
Goals, Objectives, and Strategies.....	8
Performance Measures.....	16
Appendix A: Assurances.....	18
Appendix B: State Plan Provisions and Information Requirements.....	30
Appendix C: Resource Allocation Plan	40
Appendix D: Demographic Information.....	43
Appendix E: Mission and Vision Statements	48
Appendix F: DSAAPD Services.....	51
Appendix G: Governor’s Advisory Council Members.....	53
Appendix H: Organizational Charts.....	55
Appendix I: DSAAPD Contact Information.....	58

A Message from the Secretary

Dear Fellow Delawareans:

On behalf of Governor Ruth Ann Minner, I am pleased to present Delaware's State Plan on Aging for October 1, 2008 to September 30, 2012.

The challenges and opportunities that we face in the coming four years are significant. Delaware's older population is increasing rapidly and will continue to soar as the baby boomers reach retirement age. At the same time, Delaware's many attractive features have made it a popular retirement destination for many out-of-state seniors.

Older Delawareans are an asset to our State, as employees, volunteers, caregivers, mentors, and in the many other ways that they contribute to the strength of our communities. As the population ages though, we must be prepared to provide services and supports for those older persons in greatest need.

The State Plan on Aging focuses on Delaware's vision for developing structures to respond to the needs of the aging population. Delaware Health and Social Services, Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) developed the plan with input from many organizations around the State such as senior centers, service providers, hospitals, long term care facilities, and others.

The goals and objectives presented in the plan highlight the importance of collaboration among the many agencies and organizations in Delaware's aging network. Much work needs to be done as we continue to prepare for the aging of the baby boom generation. We look forward to working with partner agencies in the years ahead to ensure that our State is ready to respond to the needs of our oldest citizens.

Respectfully,

A handwritten signature in black ink that reads "Vincent P. Meconi". The signature is written in a cursive, flowing style.

Vincent P. Meconi
Secretary
Delaware Health and Social Services

Executive Summary

Delaware Health and Social Services' Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) develops a State Plan on Aging every four years, as required under the Older American's Act of 1965, as amended. The plan functions as DSAAPD's contract with the Administration on Aging (AoA) and allows the State of Delaware to receive funds under Title III and Title VII of the Act. The plan also presents a vision for DSAAPD and Delaware's aging network over the next four years, providing direction for the continued development of the service system in the State.

The older population in Delaware, as in the rest of the nation, is increasing. In fact, Delaware currently ranks fifth highest among the states in net migration of persons aged 55 to 64 and persons aged 64 to 74. Between the years 2000 and 2025, the State's older population is expected to more than double in size. These changing demographics and characteristics of the older population will significantly impact the network of aging and disability services/providers in the State. These challenges will be met by a system of public sector, advocacy, and community-based organizations that make up the aging network in Delaware.

As a Single Planning and Service Area (PSA), DSSAPD serves as a State Unit on Aging (SUA) but also performs the functions of an Area Agency on Aging (AAA), delivering and contracting for services for older persons at the local level. Additionally, DSAAPD is responsible for coordinating services for adults with physical disabilities in Delaware. In order to carry out these responsibilities, DSAAPD maintains strong partnerships with various organizations. The 2008-2012 State Plan emphasizes opportunities for maintaining and developing relationships with other key public and private sector partners to provide comprehensive services to older people and people with disabilities.

Foremost in our plans are a desire and strategies for increasing DSAAPD's visibility and the ease with which its constituents may take advantage of the services that the agency offers. The aggressive pursuit of funding for Delaware's Aging and Disability Resource Center model, to be developed in collaboration with partners from the provider and advocacy communities, is a foundation of this initiative. A full evaluation of the manner in which potential clients and their caregivers enter the system and are subsequently assessed and cared for, and the development of protocols and training curricula that will become the agency's improved standard of practice, will likewise serve as a foundation.

Also crucial are the goals and objectives outlined herein that will serve to better address risk assessment and planning protocols with regard to the agency's constituents, and the agency's strategies for further safeguarding the rights of older persons while protecting them from abuse, neglect and exploitation. Again, increasing the public's awareness and the ease with which it accesses agency resources will be keys to assuring the services are provided in a timely manner, while efforts to increase the capacity of those resources will serve to assure that the most comprehensive care possible is provided whenever an intervention is required.

A third area worth highlighting centers on the work to be done to address agency infrastructure issues, ranging from the research and development that will produce a new automated case management system, to the priority that will be placed on a viable and comprehensive quality management program. Continuous efforts to best organize the agency's human resources, and coordinated efforts that will lead to improved recruitment and utilization of agency volunteers, will also be key.

The 2008-2012 State Plan includes ten goals for DSAAPD and the aging network. These goals reflect priorities in the Older American's Act of 2006 and AoA's current Strategic Plan. Following are the goals for the next four years:

1. Empower older people and their families to make informed decisions about, and be able to easily access, existing home and community-based service options.
2. Enable seniors to remain in their own homes with high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers.
3. Empower older people to stay active and healthy through Older Americans Act services, including Evidence-Based Disease and Disability Prevention programs.
4. Ensure the rights of older people and prevent their abuse, neglect and exploitation.
5. Maintain effective and responsive management.
6. Participate in decision making and implementation efforts related to the Medicaid Long-Term Care reforms.
7. Assist older Delawareans to access information about the benefits available to them under the Medicare Modernization Act.
8. Improve the State's capacity to respond to the needs of its older citizens in the event of an emergency.
9. Expand transportation options for older Delawareans.
10. Strengthen DSAAPD's capacity for recruiting and retaining qualified volunteers.

Specific objectives and implementation strategies are delineated for each of these goals. The State Plan also provides performance measures so that progress can be evaluated and ongoing improvements can be made in reaching these goals.

By implementing the State Plan goals and objectives, DSAAPD and the aging network will continue to develop their capacity to serve the people of Delaware through coordinated information and assistance, advocacy, education, and aging and disability services, and, ultimately, will work toward improving the well-being of older persons and their caregivers throughout the State.

Introduction

Purpose

The State Plan on Aging serves as a contract between the State of Delaware and the Administration on Aging (AoA). It enables Delaware to receive funds under Title III and Title VII of the Older Americans Act in order to provide needed services to older persons in the State.

In addition to fulfilling federal requirements, the State Plan also serves as a strategic planning guide for the Delaware Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) and Delaware's aging network for the next four years. It describes a vision for the future and lays out priority areas for developing stronger and more responsive service systems.

Process

As an initial part of the process for developing the State Plan, DSSAPD reviewed the Older Americans Act Amendments of 2006 and AoA's Strategic Action Plan for FY 2007-2012. (AoA serves as the focal point and advocacy agency at the national level for older persons and their concerns.) Following this review, DSAAPD organized focus groups on four topics which reflected the goals established in AoA's Strategic Plan: 1) expanding long term care services and choices; 2) prevention of elder abuse in home and community based settings; 3) prevention of elder abuse in long term care settings; and 4) information, assistance and access.

Focus groups on the first three topics were conducted with representatives from various aging network organizations, including senior centers, service providers, nursing homes, hospitals, outreach programs, and other agencies. Caregivers and seniors were also invited to participate. One focus group was held on each topic in a centralized location that was easily accessible for all participants in the state. The final focus group (related information, assistance and access), was held with DSAAPD staff. Representatives from all units were invited to participate, including case managers and others with direct, daily contact with clients, caregivers, and the general public.

As a result of these meetings, goals and objectives were developed and reviewed by key DSAAPD staff. DSAAPD then posted a copy of the draft plan on its web site and held a public hearing to elicit comments, questions and suggestions. Following the hearing, a number of changes were made to the plan, including the addition of strategies and performance measures.

Mission and Vision

The goals and objectives detailed in this plan support DSAAPD's overall mission and vision. Principally, DSAAPD and the aging network as a whole work toward developing strategies which promote individual choice, foster independence, encourage healthy lifestyles, and protect those who are most vulnerable. Full versions of DSAAPD's mission and vision statements are presented in Appendix E of this plan.

Context

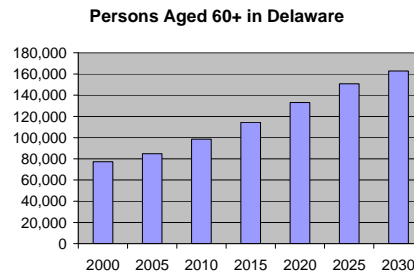
Present and future aging population in Delaware

For the past several decades, Delaware, like the rest of the country, has planned for the impending increase in the number of older people. As the baby boom population has approached its older years, the aging network has had to prepare for a swell of new constituents and additional service needs.

In 2008, the leading edge of the boomer population has already begun to arrive. While the demographic trends are not surprising, they are, nevertheless, dramatic. According to current population estimates, there are now 172,157 persons aged 60 and over in Delaware, over 26% more than there were at the beginning of the decade. In Sussex County, the southernmost of the State's three counties, the older population has increased over 35% since the year 2000.

Delaware's older population is increasing at a faster rate than in most other states, in part due to high rates in-migration. Delaware, in fact, has the fifth highest net migration rate in the country for persons aged 55 to 64 and persons aged 65 to 74. Whereas in the nation as a whole the older population (aged 65+) grew by 10% between 1996 and 2006, Delaware's older population grew by about 24% in that same time period.

Looking several years into the future, the trend toward an aging population in Delaware will continue. Currently about 1 in 5 Delawareans is aged 60 or over. By the year 2020, older persons will make up fully one-fourth of the State's population. By 2025, the older population will have more than doubled in size from the year 2000. The numbers are even more staggering for certain subpopulations and in specific areas of the State. For example, the number of persons in Sussex County aged 85 and over, sometimes referred to as the "oldest old," is expected to quadruple in the thirty-year span between 2000 and 2030.



Who are these older Delawareans? In some ways, Delaware's older population mirrors that of the nation as a whole, and in other ways it is unique. About 16% of Delaware's elders (aged 65+) are racial or ethnic minorities and about 7% live below the poverty level. African American and Asian elders are more likely than other racial and ethnic groups to live in poverty. Slightly more than one fourth (27%) of Delaware's older persons live alone, and over one third (37%) of those who live outside of institutions have one or more disabilities. Most older Delawareans speak English, although about 3% have

some difficulty with the language. Finally, over 16,000 grandparents in Delaware live with their grandchildren and 33% of those grandparents are responsible for the children's care.

More information about Delaware's older population, including projections for population growth, is presented in Appendix D of this plan.

Delaware's aging network organization

The State of Delaware has responded to the unique and growing needs of its older population through the development of a network of services and supports.

The Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) serves as the State Unit on Aging (SUA) for Delaware. Because of its relatively small size, Delaware has been designated a Single Planning and Service Area (PSA) for the purpose of administering funds under the Older Americans Act. As a result, DSAAPD carries out the functions of an SUA and also performs the responsibilities of an area agency on aging (AAA), delivering and contracting for services at local levels.

DSAAPD is one of 12 divisions within the Department of Health and Social Services (DHSS), a cabinet-level umbrella agency. DSAAPD coordinates closely with its sister agencies within DHSS in the development of services for older persons, including the Division of Medicaid and Medical Assistance (DMMA), the Division of Public Health (DPH), the Division of Substance Abuse and Mental Health (DSAMH), the Division of Developmental Disabilities Services (DDDS), the Division for the Visually Impaired (DVI), and others. Copies of the DHSS and DSAAPD organizational charts are located in Appendix H.

In addition to serving as the central advocate for older persons in the State, DSAAPD is responsible for coordinating services for adults with physical disabilities. This dual function has enabled DSAAPD to leverage resources to broaden the options for community-based long term care in Delaware. Importantly, DSAAPD has taken on the responsibility of operating three home and community-based Waivers in support of both populations.

In its combined role of SUA/AAA and advocate for adults with physical disabilities, DSAAPD carries out a broad range of activities, including:

- issuing and administering contracts for home and community based services for older persons and adults with physical disabilities;
- advocating on behalf of older persons and adults with physical disabilities to create a broader awareness of the needs of these populations and to generate additional resources to meet these needs;
- directly operating the Adult Protective Services Program, the Long Term Care Ombudsman Program, the Community Services Program, the Delaware Senior Medicare Fraud Patrol Program, the Delaware Money Management Program, the

Nursing Home Transition Program, and the Senior Community Service Employment Program;

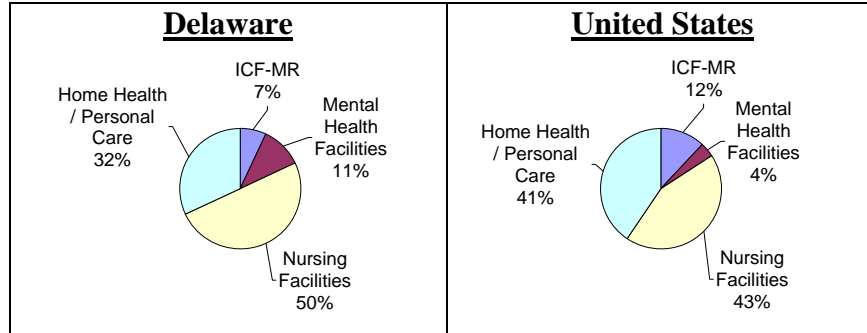
- managing CARE (Caregiver Assistance-Respite-Education) Delaware and Joining Generations to provide assistance for caregivers;
- developing and implementing a variety of wellness and health promotion programs;
- analyzing data, performing needs assessments, and developing and evaluating new services for older persons, adults with physical disabilities, and their families;
- providing training to agency staff and staff in the aging and disabilities network on a range of topics related to the provision of services to older persons and adults with physical disabilities.

In carrying out these functions, DSAAPD maintains strong partnerships with agencies in the aging and disabilities networks throughout the State, including hospitals, senior centers, service organizations, advocacy groups, and others. DSAAPD staff members participate in 46 community boards, committees and task forces, working jointly on a range of issues including transportation, housing, emergency preparedness, health promotion, domestic violence, and Medicare fraud to name a few. In addition, DSAAPD coordinates with the Delaware Aging Network (DAN), a consortium of over 30 agencies, which works actively to improve the quality of services received by older Delawareans.

Issues, trends, and implications

Delaware continues to commit resources to promote home and community-based care options for older persons and adults with physical disabilities. Over time, Delaware has decreased the proportion of Medicaid long term care dollars spent on nursing facility care and increased those spent on home health and personal care. For example in FY04, 55.6% of Delaware's long term care Medicaid dollars were spent on nursing facility care. By FY06, this number was reduced to 50%. Conversely, the proportion spent on home health and personal care services increased from 28.3% to 32% during this same time period. DSAAPD has been actively involved in the development of Medicaid home and community-based waivers and, as noted previously, currently operates three waivers: the Elderly & Disabled Waiver, the Assisted Living Waiver, and the Acquired Brain Injury Waiver to increase the availability of community-based service options.

More work is needed in this area. According to a recent Kaiser Family Foundation Report, Delaware still spends a larger proportion of its Medicaid long term care dollars on nursing facility care than does the nation as a whole. The following charts illustrate the distribution of long term care funds in FY06:



DSAAPD’s goals and objectives over the next several years reflect a commitment to making improvements in this area. Importantly, DSAAPD is actively working on securing funds for the development of an Aging and Disabilities Resource Center (ADRC) to facilitate access to services and supports. At the same time, DSAAPD is developing plans to restructure staff resources to streamline functions related to information, assistance, and intake. Additionally, DSAAPD is working with DMMA, the State Medicaid agency, on the implementation of a Money Follows the Person (MFP) initiative in Delaware. These are priority areas of focus for DSAAPD and the aging network in Delaware, and are consistent with those established in the Administration on Aging’s Strategic Action Plan.

In addition, DSAAPD remains committed to serving as an advocate for older Delawareans who live in long term care facilities, providing supports and protection when needed, and working with professionals in these facilities to provide high quality care in environments which promote compassion and respect.

Challenges and barriers

DSAAPD faces a number of challenges in the next several years. One of the most significant difficulties is the agency’s lack of a coordinated automated data collection and reporting system. The absence of such a system has hampered the agency’s capacity to perform high-level data analyses needed for program planning and development. State funds have been secured for the first phase of a project that is expected ultimately to culminate in the development of robust data system. Until such a system is available, however, DSAAPD is limited in its data management functions.

Another challenge is the need for additional funding to meet the growing demand for services. Not only is Delaware experiencing an explosion in the number of older persons, but the service needs of the oldest and frailest persons are typically complex, and often, more costly.

Similarly, DSAAPD is challenged by the demands placed on its staff resources. Because DSAAPD carries out dual SUA and AAA functions, and also serves as the advocate for adults with physical disabilities in the State, many priority projects and activities compete

for staff time and attention. Current economic conditions are affecting DSAAPD's capacity to address the needs of its constituent populations.

Strategic opportunities and resources to address changing needs

Over the next several years, DSAAPD will make use of strategic opportunities and resources to address the changing needs of the older population in Delaware. Most significantly, DSAAPD will continue to develop working relationships with key public and private sector partners. The importance of these partnerships is evidenced in the State Plan goals and objectives, which endeavor to take the best advantage of the combined strength of various organizations to respond to current and future needs for services, information, and supports. DSAAPD will take the fullest possible advantage of funding opportunities presented by public and private entities, as a primary applicant or as partner to another agency.

Goals, Objectives, and Strategies

Goal #1	Empower older people and their families to make informed decisions about, and be able to easily access, existing home and community-based options.
----------------	---

Objective 1.1 Establish an Aging and Disability Resource Center for Delaware.

Strategy 1.1.1 Identify possible funding sources (10/2008-9/2012)

Strategy 1.1.2 Establish an interagency task force (10/2008)

Strategy 1.1.3 Analyze best practices (10/2008-9/2009)

Strategy 1.1.4 Secure funding (10/2008-9/2012)

Strategy 1.1.5 Plan for implementation (10/2010- 9/2011)

Objective 1.2 Enhance public awareness of and access to DSAAPD services with specific emphasis on targeting populations most in need.

Strategy 1.2.1 Designate an in-house outreach/information coordinator to work in the Planning and Program Development Unit (1/2009)

Strategy 1.2.2 Develop a marketing plan that initially focuses on raising the public's awareness of DSAAPD while specifically addressing caregiver services, volunteer recruitment and the prevention of neglect, abuse and exploitation of older Delawareans (7/2009)

Strategy 1.2.3 Ensure that DSAAPD outreach materials (print, visual, audio and web-based) are usable, accessible and sensitive to a diverse population (1/2010)

Strategy 1.2.4 Establish plans for ongoing updates of outreach materials (3/2010)

Objective 1.3 Establish an intake and customer service unit that efficiently communicates information and assistance, initiates and refers cases, and addresses constituent inquires.

- Strategy 1.3.1 Review DSAAPD organizational structure (10/2008- 9/2009)
- Strategy 1.3.2 Reorganize physical space (10/2009 -12/2009)
- Strategy 1.3.3 Develop protocols (10/2008- 9/2009)
- Strategy 1.3.4 Train staff (10/2009)
- Strategy 1.3.5 Market to public (10/2009)

Objective 1.4 Develop training for DSAAPD staff and the aging network to promote awareness of social, cultural and physical differences.

- Strategy 1.4.1 Complete needs assessment (1/2011)
- Strategy 1.4.2 Research best practices (4/2011)
- Strategy 1.4.3 Conduct and evaluate training events (6/2011-9/2012)

Goal #2 Enable seniors to remain in their own homes with high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers.

Objective 2.1 Increase awareness in Delaware of “universal design,” assistive technologies, and livable communities to promote opportunities for aging in place.

- Strategy 2.1.1 Establish subject matter expertise within DSAAPD (1/2011)
- Strategy 2.1.2 Develop and maintain partnerships with key organizations (4/2011-9/2012)
- Strategy 2.1.3 Actively seek out development and advocacy opportunities (4/2011-9/2012)

Objective 2.2 Develop a streamlined approach to referral and assessment of DSAAPD services to ensure access to a comprehensive package of services.

- Strategy 2.2.1 Review DSAAPD organizational structure (10/2008- 9/2009)
- Strategy 2.2.2 Identify data and technology needs (12/2008-11/2009)
- Strategy 2.2.3 Research best practices (10/2008)
- Strategy 2.2.4 Develop protocols (10/2008-9/2009)
- Strategy 2.2.5 Work with providers to assure the coordination and communication of services (10/2008-9/2009)
- Strategy 2.2.6 Train staff and providers (10/2009)

Objective 2.3 Coordinate with Delaware employers to create working environments that support the needs of working caregivers.

- Strategy 2.3.1 Establish subject matter expertise within CARE Delaware (10/2009)
- Strategy 2.3.2 Develop and maintain partnerships with key organizations (10/2009-9/2012)

Strategy 2.3.3 Develop pilot project to include outreach and support to employers (3/2010)

Objective 2.4 Advocate for community-based support and service coordination for older persons with mental illness and/or substance abuse problems.

Strategy 2.4.1 Formalize partnerships with agencies providing mental health services (10/2011)

Strategy 2.4.2 Explore the establishment of a department-level intervention board for dual diagnosis case reviews (10/2011)

Strategy 2.4.3 Support health promotion activities related to mental illness and/or substance abuse problems (10/2011-9/2012)

Objective 2.5 Increase the number of individuals receiving home modification and assistive technology services.

Strategy 2.5.1 See strategy 2.1.1 (10/2010)

Strategy 2.5.2 Identify possible public and private funding sources (10/2010-9/2012)

Strategy 2.5.3 Establish community partnerships as needed to procure funds and provide services (1/2010-9/2012)

Goal #3	Empower older people to stay active and healthy through Older Americans Act services, including Evidence-Based Disease and Disability Prevention programs.
----------------	---

Objective 3.1 Raise the awareness of issues and interventions that relate to the overall health and well-being of older Delawareans.

Strategy 3.1.1 Partner with diverse organizations, stakeholders and consumers (10/2009-9/2012)

Strategy 3.1.2 Advocate for the development of a system to assess, monitor and report on the health status and key risk factors of older Delawareans (10/2011-9/2012)

Strategy 3.1.3 Identify priority areas (annually each October)

Strategy 3.1.4 Support initiatives that address priority areas (10/2009-9/2012)

Objective 3.2 Empower Delawareans to make informed decisions about their health and long-term care options.

Strategy 3.2.1 Develop plan for improved dissemination of existing health-related information (10/2011-9/2012)

Strategy 3.2.2 Educate Delawareans about long-term care options (10/2011-9/2012)

Goal #4	Ensure the rights of older people and prevent their abuse, neglect and exploitation.
----------------	---

Objective 4.1 Expand materials available on the Division of Services for Aging and Adults with Physical Disabilities web site related to elder abuse, neglect and exploitation prevention and intervention.

- Strategy 4.1.1 Establish workgroup to identify appropriate materials (10/2010)
- Strategy 4.1.2 Coordinate with University of Delaware, National Center for Elder Abuse (10/2010-3/2011)
- Strategy 4.1.3 Establish and advertise elder abuse section on web site (3/2011-9/2011)

Objective 4.2 Develop materials on elder abuse, neglect and exploitation detection and intervention strategies for use by physicians and other medical personnel in Delaware.

- Strategy 4.2.1 Research and evaluate best practices (10/2011)
- Strategy 4.2.2 Customize message for Delaware (2/2012)
- Strategy 4.2.3 Provide information and materials to physicians in Delaware (6/2012)
- Strategy 4.2.4 Research additional community avenues for distribution (9/2012)

Objective 4.3 Implement training for long term care facility staff on respectful communication with residents of long term care facilities.

- Strategy 4.3.1 Research available training materials (10/2010)
- Strategy 4.3.2 Implement train-the-trainer sessions (6/2011)
- Strategy 4.3.3 Develop tracking/evaluation tool (3/2012)
- Strategy 4.3.4 Monitor on-site implementation (6/2011-9/2012)

Objective 4.4 Propose and/or support changes to Delaware's laws to strengthen the State's response to cases of abuse, neglect or exploitation of vulnerable adults.

- Strategy 4.4.1 Review legislation in other states (10/2009-9/2010)
- Strategy 4.4.2 Review current Delaware legislation (10/2009-9/2010)
- Strategy 4.4.3 Propose legislative changes/additions (10/2010-9/2012)
- Strategy 4.4.4 Coordinate with DHSS Legislative Advisor to propose change(s) (10/2010-9/2012)

Objective 4.5 Increase capacity to respond to and place vulnerable persons 24 hours a day/ 7 days a week.

- Strategy 4.5.1 Create service specification documents for potential long term care facilities providers and after hour call centers providers (10/2010-3/2011)
- Strategy 4.5.2 Recruit providers (3/2011-9/2011)
- Strategy 4.5.3 Coordinate with Long Term Care Facilities to develop emergency admission protocols. (3/2011-9/2011)
- Strategy 4.5.4 Coordinate with call centers to develop after hour protocols (3/2011-9/2011)

Objective 4.6 Establish partnerships with substance abuse agencies in Delaware to improve the state's capacity for prevention and intervention of elder abuse cases in which substance abuse is a factor.

Strategy 4.6.1 Establish MOU with substance abuse agencies (10/2011)

Strategy 4.6.2 Carry out cross training for DSAAPD and mental health staff (10/2011-3/2012)

Strategy 4.6.3 Develop intervention protocols (10/2011-9/2012)

Objective 4.7 Encourage early estate planning among Delawareans to prevent financial exploitation later in life.

Strategy 4.7.1 Establish workgroup of internal and external partners (10/2011)

Strategy 4.7.2 Develop communication strategy (10/2011-9/2012)

Strategy 4.7.3 Disseminate information in various formats (10/2011-9/2012)

Goal #5	Maintain effective and responsive management.
----------------	--

Objective 5.1 Conduct automated system planning initiatives to improve methods of data collection, storage and reporting; collect and track client data; manage caseload distribution; support program quality management; and track employee performance.

Strategy 5.1.1 Contract with vendor to perform business needs analysis (12/2008)

Strategy 5.1.2 Evaluate options for systems development/improvement (12/2008-11/2009)

Strategy 5.1.3 Request funding for system development (10/2008, 7/2009)

Strategy 5.1.4 Contract with vendor to develop/implement data system (7/2010)

Objective 5.2 Improve the capacity to measure and monitor quality in DSAAPD programs.

Strategy 5.2.1 Establish a quality assurance unit to report to the Planning Supervisor (10/2009)

Strategy 5.2.2 Develop quality assurance manual (10/2009-9/2010)

Strategy 5.2.3 Develop baseline performance measures (10/2009-9/2010)

Strategy 5.2.4 Refine methods of evaluating provider performance and customer satisfaction. (10/2009-9/2010)

Strategy 5.2.5 Increase the amount information collected from DSAAPD contracted service providers (10/2008)

Strategy 5.2.6 Merge data from contracted services providers into DSAAPD database (7/2010)

Objective 5.3 Research and make available information about the projected growth of the older population in Delaware.

Strategy 5.3.1 Consult with national and state subject matter experts (10/2010-9/2011)

Strategy 5.3.2 Develop appropriate tables/graphs and charts (10/2010-9/2011)

Strategy 5.3.3 Make demographic information available on the DSAAPD web site (10/2011)

Strategy 5.3.4 Establish plans for ongoing updates of population projections (10/2011)

Objective 5.4 Develop training for DSAAPD staff and the aging network to raise awareness of and promote sensitivity to social, cultural and physical differences.

Strategy 5.4.1 Complete needs assessment (10/2011)

Strategy 5.4.2 Research best practices (10/2011-3/2012)

Strategy 5.4.3 Conduct and evaluate training events (3/2012-9/2012)

Goal #6	Participate in decision making and implementation efforts related to the Medicaid Long-Term Care reforms.
----------------	--

Objective 6.1 Work with the Division of Medicaid and Medical Assistance (DMMA) to advocate for quality home and community based long term care options for older Delawareans.

Strategy 6.1.1 Participate in joint quarterly coordination meetings (10/2008-9/2012)

Strategy 6.1.2 Work jointly on Medicaid waiver applications, provider recruitment, reports and QA initiatives (10/2008-9/2012)

Strategy 6.1.3 Work jointly on the planning and implementation of Delaware's MFP Systems Change grant and the Medicaid Buy-In initiative (10/2008-9/2012)

Strategy 6.1.4 Provide technical assistance to DMMA as needed to develop additional home and community based services (10/2008-9/2012)

Goal #7	Assist older Delawareans to access information about the benefits available to them under the Medicare Modernization Act.
----------------	--

Objective 7.1 Provide updated Medicare information to beneficiaries and their caregivers.

Strategy 7.1.1 Maintain strong partnerships with Delaware's Health Insurance Counseling Program, the Quality Improvement Organization, the Social Security Administration and the CMS regional office (10/2009-9/2012)

Strategy 7.1.2 Expand outreach activities of the Senior Medicare Patrol Program (10/2009-9/2012)

Strategy 7.1.3 Expand the pool of volunteer participants in the Senior Medicare Patrol Program (10/2009-9/2012)

Goal #8	Improve the State's capacity to respond to the needs of its older citizens in the event of an emergency.
----------------	---

Objective 8.1 Develop an Emergency Preparedness Plan that supports safety and security for the elderly and ensures the continuity of DSAAPD's operations during an emergency (State Director will have oversight responsibility for all strategies related to this objective.)

- Strategy 8.1.1 Assess DSAAPD's ability to accurately identify and support at-risk clients and their caregivers. (10/2008-9/2009)
- Strategy 8.1.2 Develop a tool for evaluating the emergency preparedness plans of DSAAPD's contractors. (10/2008-9/2009)
- Strategy 8.1.3 Continue to coordinate with the Delaware Emergency Management Agency to exchange information related to emergency preparedness (10/2008-9/2012)
- Strategy 8.1.4 Establish procedures to support clients with special needs in the event of an emergency (10/2008-9/2009)
- Strategy 8.1.5 Create an emergency preparedness manual. (10/2008-9/2009)
- Strategy 8.1.6 Establish procedures for alerting staff and clients of impending emergency situations and subsequent appropriate action (10/2008-9/2009)

Goal #9	Expand transportation options for older Delawareans.
----------------	---

Objective 9.1 Serve as advocates for the needs of older persons in statewide transportation planning efforts.

- Strategy 9.1.1 Educate community partners and the public about the correlation between access to transportation and independent community living (10/2011-9/2012)
- Strategy 9.1.2 Monitor projected growth of the older population in rural part of the state and communicate these data to transportation planning partners (10/2011-9/2012)
- Strategy 9.1.3 Evaluate existing transportation resources in Delaware and identify gaps in transportation options for seniors. (10/2011-9/2012)
- Strategy 9.1.4 Work with transportation providers to streamline existing transportation initiatives. (10/2011-9/2012)
- Strategy 9.1.5 Advocate for funding and services that address gaps in transportation. (10/2011-9/2012)

Goal #10	Strengthen DSAAPD's capacity for recruiting and retaining qualified volunteers.
-----------------	--

Objective 10.1 Improve the process of volunteer recruitment, retention, deployment and recognition across the Division.

Strategy 10.1.1 Establish an internal work group to assess DSAAPD's organizational structure related to volunteers and volunteer based programs (10/2010)

Strategy 10.1.2 Partner with the State Office on Volunteerism (10/2010-9/2012)

Strategy 10.1.3 Develop a web-based volunteer application form (1/2011)

Strategy 10.1.4 Expand efforts to recruit bilingual volunteers (10/2010-9/2012)

Objective 10.2 Provide volunteers with training on universal health precautions and other field safety issues.

Strategy 10.2.1 Evaluate training currently used for DSAAPD staff (10/2009-9/2010)

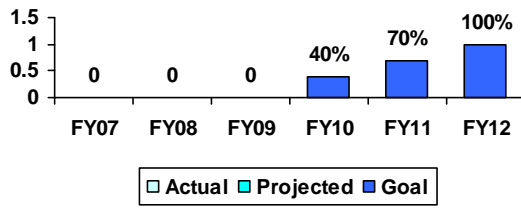
Strategy 10.2.2 Refine training program (10/2009-9/2010)

Strategy 10.2.3 Train active volunteers (annually each October)

Strategy 10.2.4 Incorporate program into training for new volunteers (Annually each October)

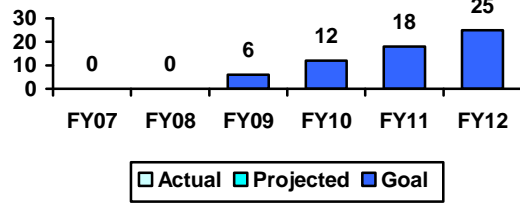
Performance Measures

Percentage of long term care facilities participating in respect training program



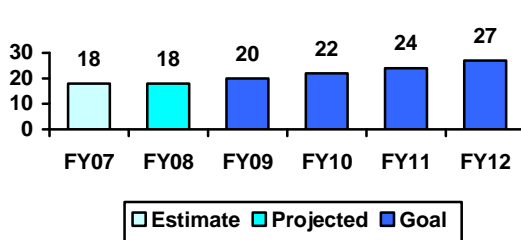
Refer to Goals 1 and 4

Number of businesses participating in caregiver initiatives



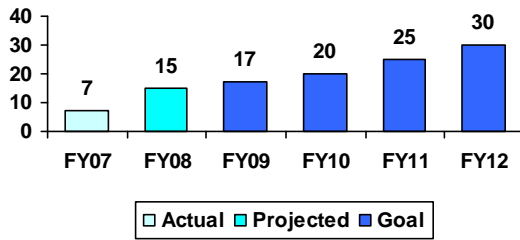
Refer to Goal 2

Number of persons receiving home modification services



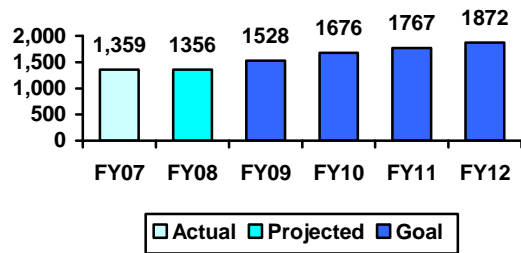
Refer to Goal 2

Number of services covered by quality assurance protocols



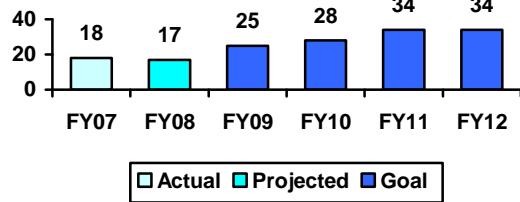
Refer to Goal 5

Number of Medicaid Waiver participants

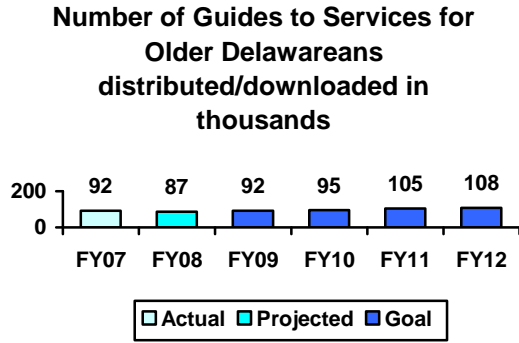


Refer to Goal 6

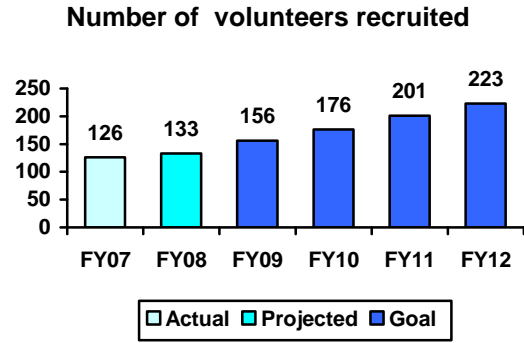
Number of persons transitioned from nursing homes to community living



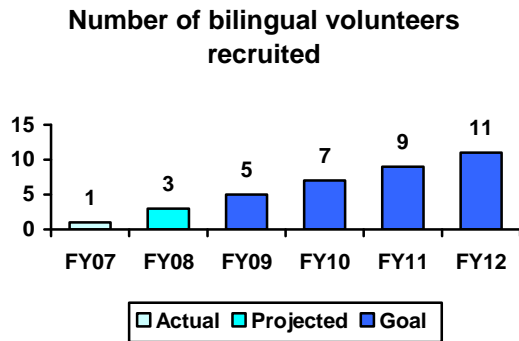
Refer to Goal 6



Refer to Goals 1 and 2



Refer to Goal 10



Refer to Goal 10

Appendix A: Assurances

**Listing of State Plan Assurances and Required Activities
Older Americans Act, As Amended in 2006**

By signing this document, the authorized official commits the State Agency on Aging to performing all listed assurances and required activities.

ASSURANCES

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

(a)(2)(A) The State agency shall, except as provided in subsection (b)(5), designate for each such area (planning and service area) after consideration of the views offered by the unit or units of general purpose local government in such area, a public or private nonprofit agency or organization as the area agency on aging for such area.

(a)(2)(B) The State agency shall provide assurances, satisfactory to the Assistant Secretary, that the State agency will take into account, in connection with matters of general policy arising in the development and administration of the State plan for any fiscal year, the views of recipients of supportive services or nutrition services, or individuals using multipurpose senior centers provided under such plan.

(a)(2)(E) The State agency shall provide assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the State plan;

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

(a)(2)(G)(ii) The State agency shall provide an assurance that the State agency will undertake specific program development, advocacy, and outreach efforts focused on the needs of low-income minority older individuals and older individuals residing in rural areas.

(c)(5) In the case of a State specified in subsection (b)(5), the State agency and area agencies shall provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

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

Sec. 306(a), AREA PLANS

(2) Each area agency on aging shall provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services-

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

(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance;

and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

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

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

(bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and

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

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

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

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

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

(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each area agency on aging shall--

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

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

(4)(B)(i) Each area agency on aging shall provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on--

(I) older individuals residing in rural areas;

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

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

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

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

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

(4)(C) Each area agency on agency shall provide assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

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

(6)(F) Each area agency will:

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

(9) Each area agency on aging shall provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

(11) Each area agency on aging shall provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including-

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

(B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

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

(13)(B) Each area agency on aging shall provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State agency--

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

(ii) the nature of such contract or such relationship.

(13)(C) Each area agency on aging shall provide assurances that the area agency will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.

(13)(D) Each area agency on aging shall provide assurances that the area agency will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.

(13)(E) Each area agency on aging shall provide assurances that the area agency will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

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

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

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

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

Sec. 307, STATE PLANS

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

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

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

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

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

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

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

(11)(B) The plan contains assurances that no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals

with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the area agency on aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

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

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

(12) The plan shall provide, whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals, the plan contains assurances that any area agency on aging carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for--

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

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

(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.

(15) The plan shall provide assurances that, if a substantial number of the older individuals residing in any planning and service area in the State are of limited

English-speaking ability, then the State will require the area agency on aging for each such planning and service area—

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

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

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

(ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effectively linguistic and cultural differences.

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

(A) identify individuals eligible for assistance under this Act, with special emphasis on—

(i) older individuals residing in rural areas;

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

(iii) older individuals with greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;

(iv) older individuals with severe disabilities;

(v) older individuals with limited English-speaking ability; and

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

(B) inform the older individuals referred to in clauses (i) through (vi) of subparagraph (A), and the caretakers of such individuals, of the availability of such assistance.

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

(18) The plan shall provide assurances that area agencies on aging will conduct efforts to facilitate the coordination of community-based, long-term care services, pursuant to section 306(a)(7), for older individuals who--

(A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;

(B) are patients in hospitals and are at risk of prolonged institutionalization; or

(C) are patients in long-term care facilities, but who can return to their homes if community-based services are provided to them.

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

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

(21) The plan shall

(A) provide an assurance that the State agency will coordinate programs under this title and programs under title VI, if applicable; and

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

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

(23) The plan shall provide assurances that demonstrable efforts will be made--

(A) to coordinate services provided under this Act with other State services that benefit older individuals; and

(B) to provide multigenerational activities, such as opportunities for older individuals to serve as mentors or advisers in child care, youth day care, educational assistance, at-risk youth intervention, juvenile delinquency treatment, and family support programs.

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

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

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

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

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

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

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

(1) The State plan shall provide an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter.

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

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

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

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

(6) The State plan shall provide an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3—

(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for--

- (i) public education to identify and prevent elder abuse;
- (ii) receipt of reports of elder abuse;

(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and

(iv) referral of complaints to law enforcement or public protective service agencies if appropriate;

(B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and

(C) all information gathered in the course of receiving reports and making referrals shall remain confidential except--

(i) if all parties to such complaint consent in writing to the release of such information;

(ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or

(iii) upon court order.

REQUIRED ACTIVITIES

Sec. 307(a) STATE PLANS

(1)(A)The State Agency requires each area agency on aging designated under section 305(a)(2)(A) to develop and submit to the State agency for approval, in accordance with a uniform format developed by the State agency, an area plan meeting the requirements of section 306; and

(B) The State plan is based on such area plans.

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

(2) The State agency:

(A) evaluates, using uniform procedures described in section 202(a)(26), the need for supportive services (including legal assistance pursuant to 307(a)(11), information and assistance, and transportation services), nutrition services, and multipurpose senior centers within the State;

(B) has developed a standardized process to determine the extent to which public or private programs and resources (including Department of Labor Senior Community Service Employment Program participants, and programs and services of voluntary organizations) have the capacity and actually meet such need;

(4) The plan shall provide that the State agency will conduct periodic evaluations of, and public hearings on, activities and projects carried out in the State under this title and title VII, including evaluations of the effectiveness of services provided to individuals with

greatest economic need, greatest social need, or disabilities (with particular attention to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas). *Note: "Periodic" (defined in 45CFR Part 1321.3) means, at a minimum, once each fiscal year.*

(5) The State agency:

(A) affords an opportunity for a public hearing upon request, in accordance with published procedures, to any area agency on aging submitting a plan under this title, to any provider of (or applicant to provide) services;

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

(C) affords an opportunity for a public hearing, upon request, by an area agency on aging, by a provider of (or applicant to provide) services, or by any recipient of services under this title regarding any waiver request, including those under Section 316.

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

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

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

(ii) such services are directly related to such State agency's or area agency on aging's administrative functions; or

(iii) such services can be provided more economically, and with comparable quality, by such State agency or area agency on aging.

Appendix B: State Plan Provisions and Information Requirements

STATE PLAN PROVISIONS AND INFORMATION REQUIREMENTS

102(30)(G) – formerly 102(19)g

The term “in-home services” includes other in-home services as defined by the State agency in the State plan submitted in accordance with Sec. 307.

Delaware funds the following in-home services with Title III funds:
Housekeeping; Personal Care; Respite Care; and Personal Emergency Response System. Each of these services is described briefly below:

Housekeeping: Housekeeping is an in-home service for frail older persons. The service allows them to live in their own homes as long as possible. Specific housekeeping services include assistance with shopping, meal preparation, light housekeeping, and laundry. All services are provided by trained housekeepers.

Personal Care: Personal care services are provided for persons who need help at home because of illness or disability. The services are designed to help a person maintain his or her household and continue living independently. Specific activities may include assistance with personal hygiene (for example, bathing or shaving), meal preparation, shopping, light housekeeping, and other services.

Respite Care: Respite care is a program that provides relief to primary caregivers, such as family members, who give care to someone in need. Respite care can be regularly scheduled (for example, once a week) or can be given from time-to-time, as needed by the family. Respite care can be provided at home or in a state-approved long-term care facility.

Personal Emergency Response System: A personal emergency response system is a device that allows a person at high risk (for example an older person who lives alone and has a health problem) to get immediate help in the event of an emergency. The person who is using the system wears a button that he or she can push if needed. The button connects electronically to the person's phone, which is programmed to send a signal to a response center. Trained professionals in the response center then carry out a series of actions to help the person in need.

Section 305(a)(2)(E)

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

The Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) assures that such preference will be given, as required. Efforts to carry out this provision are as follows:

- Efforts will be made to maintain Spanish-speaking staff for statewide bilingual service coverage.
- Spanish language publications will be developed and made available in print and on the internet
- Relationships with national and state minority organizations will be maintained.
- Outreach activities will target communities and populations in greatest need.
- Services, such as congregate meals, will continue to be made available in areas which are accessible to persons in greatest need.
- DSAAPD will continue to provide a full range of services through the agency office in Southern Delaware, as well as through contractors located in rural areas of the State.

Section 306(a)(17)

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

Delaware is a single planning and service area. State agency plans for emergency preparedness are described in section 307(a)29 below.

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(b) 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).

Delaware is a Single Planning and Service Area (PSA), and therefore, does not allocate funds to area agencies on aging.

Section 307(a)(3)

The plan shall: (A) include (and may not be approved unless the Assistant Secretary approves) the statement and demonstration required by paragraphs (2) and (4) of section 305(d) (concerning distribution of funds); (Note: the “statement and demonstration” are the numerical statement of the intrastate funding formula, and a demonstration of the allocation of funds to each planning and service area)

Delaware is a Single PSA and does not allocate funds to area agencies on aging.

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

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

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

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

Funds expended to serve older persons in rural areas in each fiscal year in this plan will not be less than those expended for fiscal year 2000.

Because of the very small geographic size of the State, contract rates generally do not differ by region, and differences in urban/rural travel costs are minimal in relation to overall contract amounts.

For the fiscal year preceding the ones in which this plan applies, many outreach activities were used to reach older persons in rural areas. Such outreach activities included the presentation of information in local broadcast media, community newspapers, etc., as well as the distribution of information through local gatherings (e.g., health fairs and other senior events).

DSAAPD maintained a statewide toll-free phone number for information and access to services, as well as a web site and e-mail address. In addition, DSAAPD maintained an office in southern Delaware, a predominantly rural area of the State.

Section 307(a)(8)

(B) Regarding case management services, if the State agency or area agency on aging is already providing case management services (as of the date of submission of the plan) under a State program, the plan may specify that such agency is allowed to continue to provide case management services.

DSAAPD, as a State agency, provides case management services on an ongoing basis as part of its Community Services Program as well as Adult Protective Services Program. This service provision will continue during the State Plan period.

(C) The plan may specify that an area agency on aging is allowed to directly provide information and assistance services and outreach.

Delaware is a Single PSA. Information & assistance activities as well as outreach activities are carried out by the State agency.

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.

Delaware assures that the special needs of older individuals residing in rural areas are taken into consideration in the planning and provision of services. DSAAPD allocates resources such that services are provided throughout the state, in rural as well as urban areas. Agency staff who provide services are located in both rural and urban areas. Contractor selection also ensures that provision of service covers all geographic areas of the State. As noted above, because of the size of the state, resources can be distributed to all geographic areas without additional cost.

Section 307(a)(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

Please refer to population figures presented in the demographic section of this plan for data on race, Hispanic origin, poverty status, and language proficiency. Additionally note that in 2006, an estimated 10.7% of all Delawareans lived below the poverty level. Poverty rates were significantly higher for those persons who spoke a language other than English at home (16.3%) and especially for those persons who spoke Spanish (23.7%).

(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.

- DSAAPD has maintained a Spanish language section in its agency web site (www.dhss.delaware.gov/dsaapd) and has made many of its publications, including the *Guide to Services for Older Delawareans*, available in Spanish.
- DSAAPD has contracted with the Latin American Community Center to provide Hispanic Outreach services and to provide congregate meals which feature Spanish cooking.
- Many outreach activities were used to reach low-income minority older individuals. Such outreach activities included the presentation of information on billboards, local broadcast media, and community newspapers, etc., as well as the distribution of information through local gatherings (e.g., health fairs and other senior events).

Section 307(a)(21)

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

The 2000 Census indicates that .3 % of all Delawareans reported themselves to be Native American. Approximately half of Delaware's Native Americans live in Sussex County. The Division of Services for Aging and Adults with Physical Disabilities assures that it will continue to outreach to Native Americans through local programs (e.g., senior centers and nutrition sites) and will include Native Americans in minority targeting initiatives.

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.

(ii) 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 services.

DSAAPD conducts ongoing assessments of projected increases in the number of older individuals in Delaware based on demographic data provided by the Delaware Population Consortium and other sources. These data indicate that the in-migration of retirees from other states, especially in Delaware's southernmost county, magnifies the anticipated expansion in the older population associated with the aging of the baby boom generation. Of special concern is the expected increase in the number of persons age 85 and older. The exponential growth in this population sub-group, sometimes referred to as the "oldest old" is expected to significantly impact the amount, type and range of services needed over the next decade. A summary of the current population projections for the older population in Delaware is presented in the demographic section of this plan.

Over the next several years, DSAAPD expects to carry out comprehensive strategic planning initiatives to address how the State can best use its resources to meet the needs of the growing population of older persons.

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.

DSAAPD works closely with other State agencies on emergency planning activities, including the Delaware Emergency Management Agency, which is charged with developing comprehensive emergency preparedness plans.

As described in the objectives section of this plan, DSAAPD will carry out a number of specific activities, including: assessing our own ability to identify and support at-risk clients and caregivers, developing a tool to evaluate the emergency preparedness plans of DSAAPD's contractors, coordinating with the Delaware Emergency Management Agency to exchange information related to emergency preparedness; providing information to clients and staff about emergency preparedness; establishing procedures that support clients with special needs (for example, health and/or transportation needs) in the event of an emergency; developing protocols for alerting staff and clients of impending emergency situations; and creating an emergency preparedness manual.

In addition, DSAAPD will continue to register all new clients in the State's 911 emergency system to assure that their special needs will be known to emergency personnel when responding to an emergency.

Section (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

DSAAPD's Director is closely involved with the State's emergency preparedness planning and has attended Continuity of Operations (COOP) training with several designated agency staff. The Director will continue to play an active role in the planning process, receiving regular updates on planning activities. The Director will also review and comment on all emergency preparedness and/or response plans and implementation strategies as they relate to the older population in Delaware.

Section 705(a)(7)

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

(7) a description of the manner in which the State agency will carry out this title in accordance with the assurances described in paragraphs (1) through (6). (Note: Paragraphs (1) of through (6) of this section are listed below)

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

(1) an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter;

The State of Delaware has established programs and services in accordance with this chapter. Some of the services are provided under contract by vendor agencies and others are operated directly by DSAAPD. A full list of services provided within Delaware, including program description, eligibility criteria, and contact information can be found on the agency's web site, www.dhss.delaware.gov/dsaapd.

(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;

In developing this plan, and for other planning purposes, DSAAPD gathers information from outside entities to gauge opinions, measure need, and explore service options. As described in the introduction of this plan, a series of focus groups on a variety of topics was held to gather input in preparation for the development of State Plan goals and objectives.

(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;

The State assures that it will identify and prioritize statewide activities related to securing and maintaining benefits and rights, as described above. Specific activities include:

- The provision of information and assistance services statewide
- The provision of case management services, both through the Adult Protective Services Program and the Community Services Program
- The operation of the Long Term Care Ombudsman Program
- Coordination with outside agencies, such as the Attorney General's office and the Insurance Department to ensure the protection of rights

- Coordination with organizations such as the Division of Social Services and the Social Security Administration to maintain current information on available benefits

(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;

Delaware assures that it will continue to use funds, as described above, to carry out elder rights protection activities. Each of these elder rights protection activities is described briefly below:

- The Long-Term Care Ombudsman Program is operated directly by the DSAAPD. The Ombudsman Program responds to complaints; advocates for residents; and provides training in long-term care facilities.
- Adult Protective Services (APS) assists impaired adults who are subject to abuse, neglect and/or exploitation. APS workers receive and investigate reports of abuse and neglect and provide social service intervention as necessary.
- The Community Services Program (CSP) provides a range of services including information and assistance; advocacy; service authorization; and case coordination
- DSAAPD contracts with Community Legal Aid Society, Inc. to operate the Elder Law Program.
- DSAAPD coordinates with other organizations (such as the Division of Long Term Care Residents Protection, police organizations, the Department of Justice, and others) to promote elder rights protection.

(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);

Delaware assures that it will operate within the guidelines outlined above with regard to the designation of local Ombudsman entities. Delaware has a single, statewide Ombudsman entity.

(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.

Delaware assures that it will continue to operate the Adult Protective Services (APS) Program in accordance with all of the provisions detailed above. The APS program in Delaware is operated directly by DSAAPD staff. The program complies with all provisions of the Older Americans Act with regard to elder abuse prevention as well as relevant State laws and regulations. Appropriate outreach, information, and referral activities occur as part of the ongoing operation of the program. APS staff work in close coordination with outside agencies (e.g., law enforcement agencies) in carrying out elder abuse protection activities. Client information collected in the process of complaint investigation remains confidential, and is shared with outside entities, such as law enforcement entities, only as required and only in keeping with professional guidelines, as described above.

Appendix C: Resource Allocation Plan

STATE PROGRAM ALLOCATIONS BY PLANNING AND SERVICE AREA FOR FY'09

PLANNING AND SERVICE AREA	TITLE III SERVICE FUNDS	OTHER OAA FUNDS	NON-TITLE III FUNDS	TOTAL FUNDS AWARDED
TITLE III-B	1,505,257		1,850,362	3,355,619
TITLE III-C-1	1,533,045		378,098	1,911,143
TITLE III-C-2	959,598		1,614,411	2,574,009
TITLE III-D	104,079			104,079
TITLE III-E	759,521		393,941	1,153,462
TITLE V		2,051,727		2,051,727
USDA		468,888		468,888
OMDUDSMAN ACTIVITY		77,106		77,106
ELDER ABUSE		25,028		25,028
STATE FUNDS RESPITE			130,305	130,305
PSA SUBTOTALS	4,861,500	2,622,749	4,367,117	11,851,366
OTHER				
TOTAL ALLOCATIONS	4,861,500	2,622,749	4,367,117	11,851,366

STATE AGENCY OPERATING BUDGET FOR FY'09

TOTAL RESOURCES TO BE USED FOR STATE AGENCY ADMINISTRATION

	TITLE III	MATCH TO TITLE III	OTHER AGENCY RESOURCES	TOTAL AGENCY BUDGET
TITLE III: STATE ADM.	500,000			500,000
TITLE III: (PART B)				
LONG-TERM CARE OMBUDSMAN	233,915			233,915
OTHER FEDERAL FUNDS			262,705	262,705
STATE		1,800,000		1,800,000
LOCAL PUBLIC				
OTHER				
TOTAL	733,915	1,800,000	262,705	2,796,620

Appendix D: Demographic Information

A PROFILE OF OLDER DELAWAREANS
Selected Population Characteristics
Year 2006 Estimates

	Number	Percent
Persons by Age		
60-64	44,136	27.8%
65-74	60,623	38.2%
75-84	39,772	25.1%
85 and over	14,159	8.9%
Total 60+	158,690	100.0%
Persons by Race (Age 65+)		
White	97,600	85.2%
Black or African American	13,635	11.9%
American Indian/Alaskan Native	368	.3%
Asian	1,825	1.6%
Hawaiian/Pacific Islander	17	.0%
Other	461	.4%
Two or More Races	798	.7%
Persons of Hispanic or Latino Origin (Age 65+)		
Hispanic/Latino Origin	1,684	1.5%
Poverty Status (Age 65+)		
At or Above Poverty Level	102,417	93.1%
Below Poverty Level	7,607	6.9%
Poverty Status for Selected Groups (Age 65+)		
White		
At or Above Poverty Level	88,176	94.4%
Below Poverty Level	5,252	5.6%
Black or African American		
At or Above Poverty Level	11,334	85.0%
Below Poverty Level	2,004	15.0%
Asian		
At or Above Poverty Level	1,526	83.6%
Below Poverty Level	299	16.4%
Hispanic or Latino		
At or Above Poverty Level	1,501	91.6%
Below Poverty Level	137	8.3%

	Number	Percent
Marital Status (Age 65+)		
Males		
Now married	35,592	73.2%
Never married, separated, widowed, divorced	13,064	26.9%
Females		
Now married	28,795	43.7%
Never married, separated, widowed, divorced	37107	56.3%
Persons Living Alone (Age 65+)		
Males	7,974	26.0%
Females	22,663	74.0%
Persons by Disability Status (Non-institutionalized Persons Aged 65+)		
One or more types of disabilities	42,723	38.8%
No disabilities	67,301	61.2%
Persons by Language Spoken at Home (Age 65+)		
English only	107,353	93.7%
Spanish	1,885	1.6%
Other Indo-European Language	3,899	3.4%
Asian/Pacific Island Language	1,203	1.1%
Other Languages	214	.2%
Grandparents Living with Grandchildren Under Age 18		
Grandparents responsible for care of children	5,607	33.1%
Grandparents not responsible for care of children	10,933	66.1%

Sources: U.S. Census Bureau, 2006 American Community Survey; Administration on Aging (compilation of Census 2006 Estimates)

Population Projections for Selected Age Groups for State of Delaware and Counties

	2000	2005	2008	2010	2015	2020	2025	2030
Delaware								
Persons aged 60+	136,329	155,389	172,157	183,287	212,798	247,523	280,044	299,614
% change*	NA	14.0%	26.3%	34.4%	56.1%	81.6%	105.4%	119.8%
Persons aged 75+	46,275	54,734	59,889	62,462	68,320	77,860	93,331	110,036
% change*	NA	18.3%	29.4%	35.0%	47.6%	68.3%	101.7%	137.8%
Persons aged 85+	10,775	14,084	16,767	18,597	21,964	24,339	26,323	30,896
% change*	NA	30.7%	55.6%	72.6%	103.8%	125.9%	144.3%	186.7%
New Castle Co.								
Persons aged 60+	77,233	84,812	92,877	98,498	114,340	133,137	150,778	162,805
% change*	NA	9.8%	20.3%	27.5%	48.0%	72.4%	95.2%	110.8%
Persons aged 75+	27,605	30,719	32,270	33,037	34,964	39,942	48,749	58,727
% change*	NA	11.3%	16.9%	19.7%	26.7%	44.7%	76.6%	112.7%
Persons aged 85+	6,591	8,320	9,700	10,576	11,886	12,649	13,504	16,385
% change*	NA	26.2%	47.2%	60.5%	80.3%	91.9%	104.9%	148.6%
Kent Co.								
Persons aged 60+	20,037	23,495	26,513	28,215	32,437	37,988	43,296	46,156
% change*	NA	17.3%	32.3%	40.8%	61.9%	89.6%	116.1%	130.4%
Persons aged 75+	6,465	7,679	8,669	9,188	10,127	11,332	13,306	15,322
% change*	NA	18.8%	34.1%	42.1%	56.6%	75.3%	105.8%	137.0%
Persons aged 85+	1,557	1,940	2,282	2,505	2,892	3,304	3,553	3,999
% change*	NA	24.6%	46.6%	60.9%	85.7%	112.2%	128.2%	156.8%
Sussex Co.								
Persons aged 60+	39,059	47,082	52,767	56,574	66,021	76,398	85,970	90,653
% change*	NA	20.5%	35.1%	44.8%	69.0%	95.6%	120.1%	132.1%
Persons aged 75+	12,205	16,336	18,950	20,237	23,229	26,586	31,276	35,987
% change*	NA	33.8%	55.3%	65.8%	90.3%	117.8%	156.3%	194.9%
Persons aged 85+	2,627	3,824	4,785	5,516	7,186	8,386	9,266	10,512
% change*	NA	45.6%	82.1%	110.0%	173.5%	219.2%	252.7%	300.2%

*Percent change from the year 2000 Source: Delaware Population Consortium Annual Population Projections, October 23, 2007, Version 2007.0

**A PROFILE OF PERSONS SERVED THROUGH
TITLE III PROGRAMS
STATE OF DELAWARE
FISCAL YEAR 2006**

	Number of Persons (Unduplicated Count)	Percent
Total Persons Served	23,848	100.0
Persons by Race and Hispanic Origin		
African American	5,946	24.9
American Indian/Native Alaskan	13	.1
Asian	170	.7
White	9,983	41.9
Other	67	.3
Hispanic	464	1.9
Minority Persons	6,203	26.0
Persons Living in Rural Areas	7,519	31.5
Persons Below the Poverty Level	3,990	16.7
Minority Persons Below the Poverty Level	53	.9 As a percent of all minority clients

Appendix E: Mission and Vision Statements

MISSION STATEMENTS

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

To improve the quality of life for Delaware's citizens by promoting health and well-being, fostering self-sufficiency, and protecting vulnerable populations.

DIVISION OF SERVICES FOR AGING AND ADULTS WITH PHYSICAL DISABILITIES

To improve or maintain the quality of life for Delawareans who are at least 18 years of age with physical disabilities or who are elderly. The Division is committed to the development and delivery of consumer-driven services which maximize independence through individual choice, enable individuals to continue living active and productive lives and protect those who may be vulnerable and at risk.



DELAWARE HEALTH AND SOCIAL SERVICES

Division of Services for Aging and
Adults with Physical Disabilities

VISION STATEMENTS

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

Together we provide quality services as we create a better future for the people of Delaware.

DIVISION OF SERVICES FOR AGING AND ADULTS WITH PHYSICAL DISABILITIES

As we move into the future, Delaware Health and Social Services' Division of Services for Aging and Adults with Physical Disabilities will continue to focus on our core mission, and at the same time, plan for meeting the challenges that lie ahead. We must prepare to serve succeeding generations of diverse populations, whose needs may require uniquely different strategies and resources. We will focus on innovative approaches to advocacy, education, partnering, service delivery and technology. These approaches will enhance our capacity to: support customers and their caregivers; encourage healthy lifestyles; teach skills necessary for making informed life choices; facilitate greater community integration and participation; promote self-determination; and foster independence.



DELAWARE HEALTH AND SOCIAL SERVICES

Division of Services for Aging and
Adults with Physical Disabilities

Appendix F: DSAAPD Services

**Division of Services for Aging and Adults with Physical Disabilities
(DSAAPD)
Services and Programs**

Following is a list of the services and programs operated or funded by DSAAPD.

- Adult Day Services
- Adult Foster Care
- Adult Protective Services
- Alzheimer's Day Treatment
- Assisted Living
- Assistive Devices
- Attendant Services
- Case Management
- Cognitive Services
- Congregate Meals
- Day Habilitation
- Delaware Money Management Program
- Delaware Senior Medicare Patrol Program
- Hispanic Outreach
- Home Delivered Meals
- Home Modification
- Housekeeping
- Information and Assistance
- Joining Generations
- Legal Services
- Long Term Care Ombudsman Program
- Medicaid Waiver for Acquired Brain Injury
- Medicaid Waiver for Assisted Living
- Medicaid Waiver for the Elderly and Disabled
- Medical Transportation
- Nursing Home Transition Program
- Personal Care
- Personal Emergency Response System
- Respite Care
- Senior Community Service Employment Program

Appendix G: Governor's Advisory Council Members



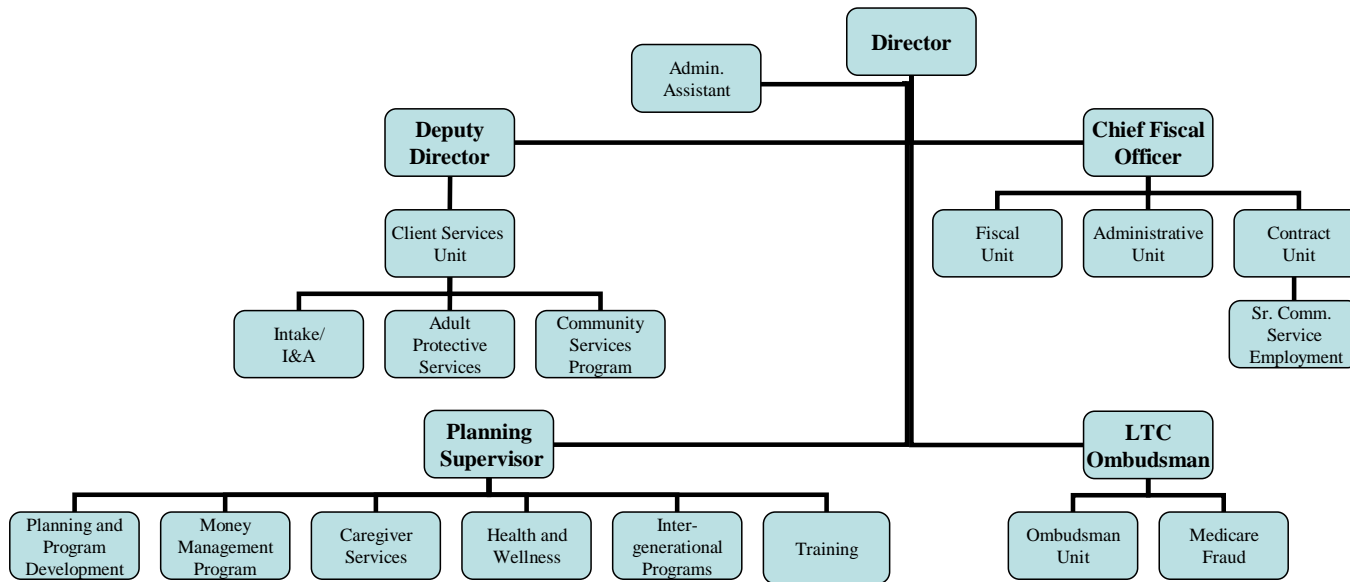
**Governor's Advisory Council
on Services for Aging and Adults
with Physical Disabilities**

Patsy Bennett-Brown
Ester Brennan
Azalia Briggs
Bobby Brown
C. Regina Byers (Chair)
Leonarda Castelli
Katherine Cowperthwait
Julia Gause
Elsie Hawthorne
Evelyn Hayes
Bonnie Hitch
Arthur Johns
Karen Lloyd (Co-Chair)
LaVaida Owens-White
William Payne
Lelia Perkins
Gloria Price
Mary Ann Teller

Appendix H: Organizational Charts



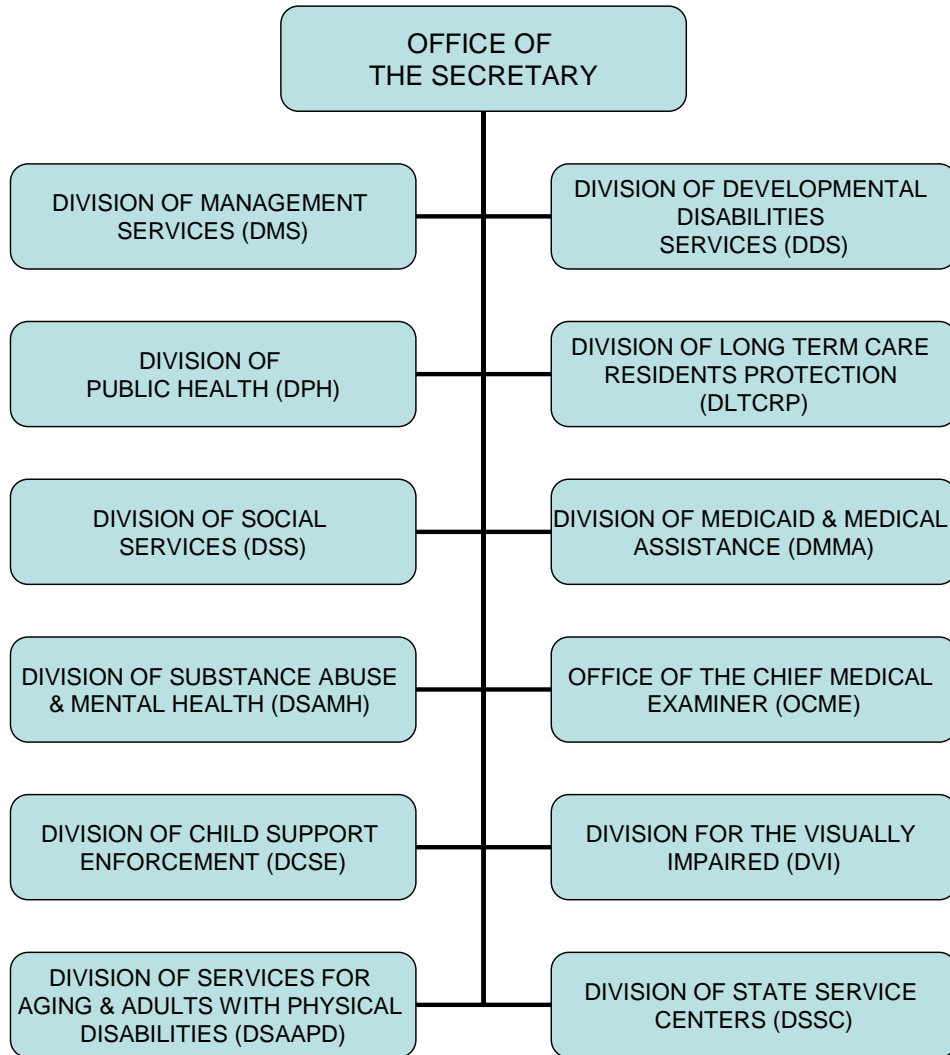
DHSS Division of Services for Aging and Adults with Physical Disabilities Organizational Chart



Total positions: 141



Delaware Health and Social Services Organizational Chart



Appendix I: DSAAPD Contact Information

**DIVISION OF SERVICES FOR AGING AND ADULTS
WITH PHYSICAL DISABILITIES (DSAAPD)
CONTACT INFORMATION**

General Contact Information

Division of Services for Aging and Adults with Physical Disabilities
Herman M. Holloway, Sr. Campus
Main Administration Building
1901 N. DuPont Highway
New Castle, DE 19720

Phone: 1-800-223-9074
TTY: (302) 453-3837
FAX (302) 255-4445
E-mail: DSAAPDinfo@state.de.us
Web: www.dhss.delaware.gov/dsaapd

New Castle County: New Castle Office

Herman M. Holloway, Sr. Campus
Main Administration Building, First Floor Annex
1901 N. DuPont Highway
New Castle, DE 19720

Phone: (302) 255-9390 or 1-800-223-9074
Fax: (302) 255-4445

New Castle County: Newark Office

University Plaza
256 Chapman Road
Oxford Building, Suite 200
Newark, DE 19702

Phone: (302) 453-3820 or 1-800-223-9074
Fax: (302) 453-3836
TTY: (302) 453-3837

Kent/Sussex Counties: Milford Office

Milford State Service Center
18 N. Walnut St., First Floor
Milford, DE 19963

Phone: (302) 424-7310 or 1-800-223-9074
Fax: (302) 422-1346
TTY: (302) 422-1415