

Delaware

State Plan on Aging

October 1, 2024 to September 30, 2028



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Delaware Department of Health and Social Services
Division of Services for Aging and Adults with Physical Disabilities

State Plan on Aging
2024 – 2028

Governor John Carney
Cabinet Secretary Josette D. Manning, Esq.
Director Melissa A. Smith



DELAWARE HEALTH AND SOCIAL SERVICES

Division of Services for Aging and Adults with Physical Disabilities

Verification of Intent

The State Plan on Aging is hereby submitted for the State of Delaware for the period of October 1, 2024, through September 30, 2028. It includes all assurances and plans to be conducted by the Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) under the provisions of the Older Americans Act (the Act) as amended, during the period identified above.

DSAAPD, Delaware’s State Unit on Aging, has been given the authority to develop and administer the State Plan on Aging in accordance with all requirements of the Act. DSAAPD is primarily responsible for the coordination of all State activities related to the purposes of the Act, including the development of comprehensive and coordinated service systems and nutrition services, and to serve as the effective and visible advocate for aging Delawareans.

This plan is hereby approved by the Secretary of the Delaware Department of Health and Social Services, on behalf of the Governor and constitutes authorization to proceed with activities under the plan upon approval by the Assistant Secretary on Aging.

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

Melissa A. Smith, Director
Division of Services for Aging and
Adults with Physical Disabilities

Date

Josette D. Manning, Esq., Cabinet Secretary
Delaware Department of Health and Social Services

Date

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Mission & Vision

Delaware Department of Health & Social Services

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

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

Division of Services for Aging & Adults with Physical Disabilities

Mission: Promote dignity, respect, and inclusion for older adults and people with disabilities.

Vision: Inclusive healthy communities that promote the engagement of older adults and individuals with disabilities.

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Executive Summary

The Delaware Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) in accordance with the Older Americans Act of 1965 (OAA) is required to develop and administer a State Plan on Aging. As the State Unit on Aging, DSAAPD is responsible for coordinating all activities related to both the State Plan and the Older Americans Act. This plan on aging is effective October 1, 2024, through September 30, 2028.

The Older Americans Act supports a wide range of social services and programs for individuals aged 60 years or older. Title III services are available to all persons aged 60 and older but are targeted to those with the greatest economic or social need, particularly low-income and minority persons, older individuals with limited English proficiency, and older persons residing in historically underserved or hard to reach areas. This State Plan emphasizes DSAAPD's mission to promote dignity, respect, and inclusion for older adults and people with disabilities, and describes how DSAAPD and its partners will provide services to address the needs of aging Delawareans, with particular emphasis on the need to meet our aging population where they are. This Plan promotes healthy, vibrant aging, and supports and encourages our older adults to age in place where, and how, they choose. Over the next four years, DSAAPD is committed to providing innovative programs and services designed to enable individuals to make informed choices that can enrich their lives and support their ability to effectively participate in their communities.

The State Plan on Aging functions as DSAAPD's contract with the Administration for Community Living (ACL). It allows the State of Delaware to receive funding under Titles III and VII of the OAA. Titles III and VII provide for funding for important services for older Delawareans, known as "core" programs, such as:

- Personal Care
- Respite
- Adult Day Services
- Legal Services
- Personal Emergency Response Systems
- Case Management
- Congregate and Home-Delivered Meals
- Preventative Care
- Long Term Care Ombudsman Program
- Adult Protective Services

As a Single Planning and Service Area (PSA), DSAAPD serves as a State Unit on Aging (SUA). It 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. To carry out these activities, DSAAPD maintains strong partnerships with organizations within the aging and disabilities networks.

Americans are currently living longer than ever with 10,000 people per day turning 65. Delaware specifically is currently aging at a rate that is outpacing most of the nation; from 2010 to 2020, the population of adults over the age of 65 increased by 52%. 20% of the total

population in Delaware is currently over the age of 65 which means that roughly 1 in 4 Delawareans is eligible for Older Americans Act (OAA) programs and services. That number will only continue to rise; by 2030, Delaware is projected to have the 9th highest proportion of persons aged 65+ among all states. As Delaware's aging population continues to grow, so will the demand for critical core services funded by Title III and Title VII of the OAA. DSAAPD will use the strategies outlined in this plan to meet the growing and changing needs of older adults and individuals with physical disabilities.

The 2024 – 2028 State Plan on Aging focuses on five key areas: Older Americans Act Core Programs, COVID-19, Home and Community Based Services, Equity, and Caregiving. This plan includes nine goals that reflect the Division's goals over the next four years:

Goal 1: Promote Excellence in the delivery of Older Americans Act Core Programs through modernized service delivery and resource allocation.

Goal 2: Support and enhance multidisciplinary responses to elder abuse, neglect, and exploitation.

Goal 3: Promote programs that address social isolation, provide trauma informed services, and enhance supports in place to maintain healthy emotional wellbeing..

Goal 4: Increase accessibility of emergency preparedness resources and services.

Goal 5: Update protocols and expectations for reviewing and monitoring contractor's emergency preparedness plans and responses through collaboration with stakeholders and providers.

Goal 6: Support Delaware's aging population with in-home services and supports that allow them to age in place where and how they choose.

Goal 7: Create and sustain community partnerships to enhance aging network partners business acumen and expand home and community-based services.

Goal 8: Continue stakeholder engagement to reach new partners to understand unmet needs in the community, identify individuals and communities with the highest economic and social need, and build and expand person-centered service delivery.

Goal 9: Enhance services and supports for Family Caregivers by implementing recommendations and best practices from the Delaware Caregiver Action Network (DCAN), Delaware Caregiver Taskforce, RAISE Family Caregiver Advisory Council, other organizations that support family caregivers and in coordination with the National Technical Assistance Center on Grandfamilies and Kinship Families.

The plan also includes the Division's objectives and strategies for each goal and provides performance measures so that continuous improvement can be made in reaching these goals.

Aging in place is a key focus in DSAAPD's goal of promoting excellence in the delivery of Older Americans Act Core Programs through modernized service delivery and resource allocation. To reach this goal, DSAAPD will implement new Older Americans Act (OAA) Regulations. This updated regulation emphasizes the reinforcement and clarification of policies and expectations, the promotion of appropriate stewardship of OAA resources, and the integration of lessons learned during the COVID-19 pandemic. Notably, the final rule introduces new sections that provide comprehensive guidance on emergency and disaster requirements under the Act. This enhancement from the limited guidance previously available reflects a thoughtful consideration of the evolving nature of emergencies and disasters, their unique effects on vulnerable populations, and the optimal ways to support the needs of OAA grantees and participants. Incorporating these insights, our project is poised to address the nuanced challenges of disaster preparedness in our communities, ensuring that our strategies are inclusive, comprehensive, and responsive to the diverse needs of older adults and their caregivers.

DSAAPD will enact the OAA rules change to align with current state and federal statutes, shift the current antiquated system of care to use modern assessments and service delivery systems by implementing cost-sharing procedures and interfacing with the Division of Medicaid and Medical Assistance (DMMA) to support and streamline the Long Term Medicaid application submission process. The Division will also continue to provide outreach and communication to external stakeholders regarding systems change, increase business acumen for aging network partners to create efficient and effective programming for older Delawareans, and support local community organizations to expand access to programming and support healthy aging.

Millions of older Americans experience abuse, neglect, exploitation, or discrimination each year. Under Title VII of the Older Americans Act, the State Unit on Aging is required to be a leader in programs for the prevention of elder abuse, neglect, and exploitation. To ensure that aging Delawareans are protected, DSAAPD will build on the success of its "Make the Call" multimedia campaign to support and enhance multidisciplinary responses to elder abuse, neglect, and exploitation. The Division will collaborate with housing programs, long term care, law enforcement, health care, and elder law agencies to ensure participant safety, remove barriers to services, improve quality of life, and support aging in place. DSAAPD also plans to increase information and resources regarding self-neglect and seeks to enhance and educate members of the public about Adult Protective Services (APS) and supports through media campaigns, community information sessions, and trainings. Outreach efforts will specifically target residents of isolated and unincorporated communities.

This plan also includes efforts to protect vulnerable adults in times of public health emergencies or emerging health threats. The COVID-19 pandemic highlighted a need for proactive emergency preparedness and an increased accessibility to programs and services dedicated to public health emergencies, emerging health threats, and the physical and emotional challenges that can come with them. This plan outlines ways in which the Division will enhance policies, procedures, and public facing documents to engage and support members of the aging

population in personal emergency preparedness and back-up plans as well as increasing accessibility of emergency preparedness resources and services. This includes updating protocols and expectations for reviewing and monitoring contractor's emergency preparedness plans and responses through collaboration with stakeholders and providers, and addressing community needs and risks. Older adults, especially LGBTQIA+ adults, often have a higher risk of social isolation and face barriers to accessing services and supports. DSAAPD will focus on enhancing trauma informed services, and getting supports in place to address and maintain healthy emotional wellbeing.

DSAAPD is committed to ensuring that aging Delawareans can age in place where and how they choose. That not only includes ensuring excellence in OAA programming and in committing to addressing community needs, but also to ensuring that aging adults have safe, accessible, and affordable housing. Through DSAAPD's home modification program, community partnerships, and continued stakeholder engagement, we can enhance our Home and Community Based Services (HCBS) to allow individuals to remain safe and healthy in their own homes and to remain independent and engaged in their communities.

By supporting individuals as they age in place, DSAAPD helps foster inclusive and healthy communities. Through this Plan, DSAAPD will continue working with stakeholders and community members to identify and support individuals with the greatest economic and social need, and to support culturally and linguistically appropriate programs and services. DSAAPD will advance cultural competency, diversity, equity, and inclusion by implementing recommendations and best practices from local, state, and national taskforces and councils, and by focusing on increasing the knowledge of aging network services and supports in historically underserved communities and communities that have been difficult to reach with the current array of services. This includes the Hispanic/Latinx, LGBTQIA+, and Caregiver communities, as well as older adults affected by HIV/AIDS.

DSAAPD is committed to ensuring good stewardship of funds provided through the Older Americans Act. The Division provides dedicated oversight of how funds are spent through the division's Provider Relations unit and contractor compliance reviews, and the Department of Health and Social Services Procurement unit.

The implementation of the goals, objectives, strategies, and performance measures in this State Plan represent the foundation that the Delaware Division of Services for Aging and Adults with Physical Disabilities will use to strengthen and enhance services and supports for aging Delawareans. This foundation will continue to support aging in place and promote dignity, respect, and inclusion.

Delaware's Older Adults

Current population data estimates indicate that there are approximately 290,180 individuals aged 60 and older residing in the State of Delaware. Of that, 18,872 are 85 years and older. It is estimated that by the year 2050, the older population will make up approximately 34% of the state's total population.

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Delaware's Aging Network and Long-Term Care System Organization

A brief outline of DSAAPD, our aging network partners, and an outline of services and programs will be added to this section.

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Goals, Objectives, Strategies, & Performance Measures

Older Americans Act Core Programs Focus Area		
Goal #1: Promote Excellence in the delivery of Older Americans Act core programs through modernized service delivery and resource allocation.		
Objective	Strategy	Measure
Objective 1.1 Implement new Older Americans Act (OAA) Regulations to align with current state and federal statutes.	Utilize the technical assistance and training provided by the Administration for Community Living for OAA Rule Change Updates to support both the changes within the Division and to assist in supporting those changes that aging network partners will need to implement.	Meet OAA Implementation Deadline of October 1, 2025.
Objective 1.2 Translate federal direction and disseminate information regarding OAA rules change and funding information.	Conduct robust stakeholder feedback and information sessions based on ACL technical assistance.	Quarterly information sessions throughout implementation.
Objective 1.3 Shift antiquated system of care to use modern assessments and services delivery system by implementing cost-sharing procedures and interface with Medicaid applications.	Implement cost-sharing policies and procedures and comprehensive health assessments and screening tools.	Complete full implementation and integration of these tools and procedures by 2028.
Objective 1.4 Provide outreach and communication to external stakeholders regarding systems change.	Provide technical assistance, feedback, and information sessions regarding cost-sharing and new screening tools.	Host monthly provider meetings before, during, and after systems change.
Objective 1.5 Prioritization of supports for individuals to align with the appropriate funding source to meet their needs.		
Goal #2: Support and enhance multidisciplinary responses to elder abuse, neglect, and exploitation.		
Objective	Strategy	Measure

Objective 2.1 Collaborate with housing programs, long term care, law enforcement, health care, and elder law agencies to ensure participant safety, remove barriers to services, improve quality of life, and support aging in place.		
Objective 2.2 Enhance and educate members of the public about Adult Protective Services (APS) and supports through media campaigns, community information sessions, and trainings.	Launch a comprehensive multimedia marketing campaign to educate Delawareans on the scope and purpose of Adult Protective Services (APS).	Receive at least three requests for information sessions.
	Host at least one APS public information session in each county.	See an increase in APS referral calls statewide and by 50% in Sussex County.
	Identify and support isolated, unincorporated, and underreporting communities across the state.	See an increase in APS referral calls and information sessions in identified communities.
COVID-19 Focus Area		
Goal #3: Promote programs that address social isolation, provide trauma informed services, and enhance supports in place to maintain healthy emotional wellbeing.		
Objective	Strategy	Measure
Objective 3.1 Conduct surveys and outreach at the grassroots level to address community needs.		Hold at least one public listening session in each county to understand unmet community needs by 2025.
Objective 3.2 Create community engagement plans to promote health services specific to public health emergencies and emerging health threats.	Identify and implement an evidence-based emergency preparedness survey.	Complete at least one emergency preparedness and response survey in each county by 2025.
Goal #4: Increase accessibility of emergency preparedness resources and services.		
Objective	Strategy	Measure

Objective 4.1 Translate emergency preparedness information and toolkits into other languages as identified in historically underserved populations and hard to reach communities throughout the State.		
Objective 4.2 Connect individuals with other agencies and assistive technology resources to assist in personal emergency preparedness.		
Objective 4.3 Create innovative services to increase access to those with mobility and transportation issues, those in historically underserved communities, and those we have been unable to reach with our current array of services.		
Goal #5: Update protocols and expectations for reviewing and monitoring contractor’s emergency preparedness plans and responses through collaboration with stakeholders and providers.		
Objective	Strategy	Measure
Objective 5.1 Enhance policies, procedures, and public facing documents to engage and support members of the aging population in personal emergency preparedness and back-up plans.	Provide cloud-based trainings (CBTs) and online resources for contractors and providers specific to emergency preparedness and response.	Have emergency backup plans place in place for 100% of participants.
Objective 5.2 Promote Community Emergency Response Teams (CERT), Delaware Emergency Response Network (DENS), and emergency planning and preparedness in the event of future public health emergencies and emerging health threats.	Increase the use and visibility of DENS and CERT in Sussex County.	See an increase in DENS and CERT use and engagement statewide.
		100% of DSAAPD case management participants educated in DENS and local CERTs as part of emergency planning.
Home and Community Based Services (HCBS) Focus Area		
Goal #6: Support Delaware’s aging population with in-home services and supports that allow them to age in place where and how they choose.		
Objective	Strategy	Measure

Objective 6.1 Implement innovative programming to allow older Delawareans to remain healthy and safe in their own homes.	Hold community information sessions about the home modification, Healthy Homes, and other programs.	Host at least one information session per quarter.
		Increase participation in the home modification program by 100%.
Objective 6.2 Collaborate with stakeholders to establish a centralized infrastructure for home modifications.		
Goal #7: Create and sustain community partnerships to enhance aging network partners business acumen and expand home and community-based services.		
Objective	Strategy	Measure
Objective 7.1 Build business capacity and support aging network partners with data collection and reporting.	Host a statewide training for community-based organizations and DSAAPD providers to increase business acumen, expand business strategies, and increase data collection and reporting.	See a 25% increase in data reporting from providers.
Objective 7.2 Create efficient and effective programming for older Delawareans and support local community organizations to expand access to healthy aging programs.		
Objective 7.3 Provide technical assistance to communities seeking age friendly practices and planning design.		
Equity Focus Area		
Goal #8: Continue stakeholder engagement to reach new partners to understand unmet needs in the community, identify individuals and communities with the highest economic and social need, and build and expand person-centered service delivery.		
Objective	Strategy	Measure
Objective 8.1 Enhance programming and services using recommendations from the Aging in Place Workgroup.	Identify and support individuals with the greatest economic and social need.	Implement two workgroup recommendations by 2028.
	Partner with local community agencies at	See an increase knowledge of aging

	the grassroots level to reach identified populations.	network services and supports among identified populations statewide.
<p>Objective 8.3 Research and expand family caregiver and Alzheimer’s Disease and related dementia (ADRD) caregiver supports to include culturally appropriate services and programming for underserved populations in Delaware including: African American/Black communities, Spanish-speaking and Latino Caregivers and Asian caregivers.</p>	<p>Partner with local community agencies at the grassroots level to reach identified populations.</p>	<p>Implement two culturally appropriate services and/or programs to support family caregivers and caregivers to those living with ADRD by the end of 2028.</p>
		<p>Build on the success of the Innovations in Nutrition Program Services (INNU) Grant to develop and administer culturally and linguistically appropriate programs and services.</p>
<p>Objective 8.4 Partner with community organizations to understand and address the needs of aging adults in the LGBTQIA+ community.</p>	<p>Launch at least one cultural competency training focusing on LGBTQIA+ older adults, their needs, challenges, and how to address them focusing specifically on the risk of social isolation and barriers to services by the end of 2025.</p>	<p>Continuous.</p>
<p>Objective 8.5 Enhance services and supports for older adults living with HIV/AIDS.</p>	<p>Launch at least one cultural competency training focusing on older adults living with HIV/AIDS by the end of 2025.</p>	<p>Continuous.</p>

Caregiving Focus Area		
<p>Goal #9: Enhance services and supports for Family Caregivers by implementing recommendations and best practices from the Delaware Caregiver Action Network (DCAN), Delaware Caregiver Taskforce, RAISE Family Caregiver Advisory Council, other organizations that support family caregivers and in coordination with the National Technical Assistance Center on Grandfamilies and Kinship Families.</p>		
Objective	Strategy	Measure
<p>Objective 9.1 Using the 2022 National Strategy to Support Family Caregivers and the RAISE Act State Policy Roadmap as a guide, understand and implement national best practices for caregiver support.</p>	<p>Implement an evidence-based caregiver assessment and an evidence-based/evidence-informed family caregiver support program.</p>	<p>Implement caregiver assessment by 2026. Implement caregiver support program by 2028.</p>
<p>Objective 9.2 Enhance programs and policy to support family caregivers within Delaware.</p>	<p>Use recommendations from DCAN, the Delaware Caregiver Taskforce and other similar groups to identify recommendations on policy and programs.</p>	<p>Implement two taskforce recommendations by 2028.</p>
<p>Objective 9.3 Utilize Lifespan Respite enhancement grant funds.</p>	<p>Sustain one successful respite pilot program from the Lifespan Respite enhancement grant by braiding federal and state funding.</p>	<p>Launch and evaluate pilot by 2028.</p>
<p>Objective 9.4 Support the needs of Grandfamily/Kinship Families within Delaware.</p>	<p>Continue to have a representative from DSAAPD attend Grandfamily and Kinship family meetings.</p>	<p>Continuous.</p>
<p>Objective 9.5 Engage in robust community outreach and marketing targeting family caregivers.</p>	<p>Build on the success of the “Are you a Caregiver” campaign and create a public outreach campaign for family caregivers highlighting Caregiver Resource Centers (CRCs).</p>	<p>Launch marketing campaign by 2025.</p>

<p>Objective 9.6 Enhance and expand services and supports for caregivers of individuals living with Alzheimer’s Disease or related dementias (ADRD) and expand community education and partnerships through Dementia Friendly Delaware (DFD).</p>	<p>Develop a comprehensive marketing campaign surrounding early detection and diagnosis of dementia, services and supports available to caregivers and caregivers of individuals living with Alzheimer’s Disease or a related dementia (ADRD) in Delaware.</p>	<p>Launch marketing campaign by 2026.</p>
	<p>Expand sector engagement for Dementia Friendly Delaware efforts.</p>	<p>See an increase in sector engagement by one sector per year until 2028.</p>
	<p>Train local community organization in Dementia Friendly Delaware (DFD).</p>	<p>See an increase in community DFD trainings by 25%.</p>

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Appendix A: Assurances and Required Activities

STATE PLAN ASSURANCES AND REQUIRED ACTIVITIES

Older Americans Act, As Amended in 2020

By signing this document, the authorized official commits the State Agency on Aging to performing all listed assurances and activities as stipulated in the Older Americans Act, as amended in 2020.

Sec. 305, ORGANIZATION

(a) In order for a State to be eligible to participate in programs of grants to States from allotments under this title— . . .

(2) The State agency shall—

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

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

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

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

(G)

(i) set specific objectives, in consultation with area agencies on aging, for each planning and service area for providing services funded under this title to low-income minority older individuals and older individuals residing in rural areas;

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

(iii) provide a description of the efforts described in clause (ii) that will be undertaken by the State agency; . . .

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

(5) in the case of a State specified in subsection (b)(5), the State agency;

and shall provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area. In designating an area agency on aging within the planning and service area or within any unit of general purpose local government designated as a planning and service area the State shall give preference to an established office on aging, unless the State agency finds that no such office within the planning and service area will have the capacity to carry out the area plan.

(d) The publication for review and comment required by paragraph (2)(C) of subsection (a) shall include—

(1) a descriptive statement of the formula's assumptions and goals, and the application of the definitions of greatest economic or social need,

(2) a numerical statement of the actual funding formula to be used,

(3) a listing of the population, economic, and social data to be used for each planning and service area in the State, and

(4) a demonstration of the allocation of funds, pursuant to the funding formula, to each planning and service area in the State.

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

Sec. 306, AREA PLANS

(a) Each area agency on aging designated under section 305(a)(2)(A) shall, in order to be approved by the State agency, prepare and develop an area plan for a planning and service area for a two-, three-, or four-year period determined by the State agency, with such annual adjustments as may be necessary. Each such plan shall be based upon a uniform format for area plans within the State prepared in accordance with section 307(a)(1). Each such plan shall—

(1) provide, through a comprehensive and coordinated system, for supportive services, nutrition services, and, where appropriate, for the establishment, maintenance, modernization, or construction of multipurpose senior centers (including a plan to use the skills and services of older individuals in paid and unpaid work, including multigenerational and older individual to older individual work), within the planning and service area covered by the plan, including

determining the extent of need for supportive services, nutrition services, and multipurpose senior centers in such area (taking into consideration, among other things, the number of older individuals with low incomes residing in such area, the number of older individuals who have 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) residing in such area, the number of older individuals who have 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) residing in such area, the number of older individuals at risk for institutional placement residing in such area, and the number of older individuals who are Indians residing in such area, and the efforts of voluntary organizations in the community), evaluating the effectiveness of the use of resources in meeting such need, and entering into agreements with providers of supportive services, nutrition services, or multipurpose senior centers in such area, for the provision of such services or centers to meet such need;

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

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

(B) in-home services, including supportive services for families of older individuals with 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;

(3) (A) designate, where feasible, a focal point for comprehensive service delivery in each community, giving special consideration to designating multipurpose senior centers (including multipurpose senior centers operated by organizations referred to in paragraph (6)(C)) as such focal point; and

(B) specify, in grants, contracts, and agreements implementing the plan, the identity of each focal point so designated;

(4) (A)

(i)

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

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

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

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

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

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

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

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

(iii) with respect to the fiscal year preceding the fiscal year for which such plan is prepared —

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

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

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

(B) provide assurances that the area agency on aging will use outreach efforts that will—

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

(I) older individuals residing in rural areas;

- (II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
 - (III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
 - (IV) older individuals with severe disabilities;
 - (V) older individuals with limited English proficiency;
 - (VI) older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
 - (VII) older individuals at risk for institutional placement, specifically including survivors of the Holocaust; and
- (ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance; and
 - (C) contain an assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.
- (5) provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities;
 - (6) provide that the area agency on aging will—
 - (A) take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan;
 - (B) serve as the advocate and focal point for older individuals within the community by (in cooperation with agencies, organizations, and individuals participating in activities under the plan) monitoring, evaluating, and commenting upon all policies, programs, hearings, levies, and community actions which will affect older individuals;
 - (C) (i) where possible, enter into arrangements with organizations providing day care services for children, assistance to older individuals caring for relatives who are children, and respite for families, so as to provide opportunities for older individuals to aid or assist on a voluntary basis in the delivery of such services to children, adults, and families;
 - (ii) if possible regarding the provision of services under this title, enter into arrangements and coordinate with organizations that have a proven record of providing services to older individuals, that—

(I) were officially designated as community action agencies or community action programs under section 210 of the Economic Opportunity Act of 1964 (42U.S.C. 2790) for fiscal year 1981, and did not lose the designation as a result of failure to comply with such Act; or

(II) came into existence during fiscal year 1982 as direct successors in interest to such community action agencies or community action programs;

and that meet the requirements under section 676B of the Community Services Block Grant Act; and

(iii) make use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing such services and, if possible, work in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as organizations carrying out Federal service programs administered by the Corporation for National and Community Service), in community service settings;

(D) establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of the business community, local elected officials, providers of veterans' health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan;

(E) establish effective and efficient procedures for coordination of—

(i) entities conducting programs that receive assistance under this Act within the planning and service area served by the agency; and

(ii) entities conducting other Federal programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b), within the area;

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

(G) if there is a significant population of older individuals who are Indians in the planning and service area of the area agency on aging, the area agency on aging shall conduct outreach activities to identify such individuals in such area and shall inform such individuals of the availability of assistance under this Act;

(H) in coordination with the State agency and with the State agency responsible for elder abuse prevention services, increase public awareness of elder abuse, neglect, and exploitation, and remove barriers to education, prevention, investigation, and treatment of elder abuse, neglect, and exploitation, as appropriate; and

(I) to the extent feasible, coordinate with the State agency to disseminate information about the State assistive technology entity and access to assistive technology options for serving older individuals;

(7) provide that the area agency on aging shall, consistent with this section, facilitate the areawide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by—

(A) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care;

(B) conducting analyses and making recommendations with respect to strategies for modifying the local system of long-term care to better—

(i) respond to the needs and preferences of older individuals and family caregivers;

(ii) facilitate the provision, by service providers, of long-term care in home and community-based settings; and

(iii) target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings;

(C) implementing, through the agency or service providers, evidence-based programs to assist older individuals and their family caregivers in learning about and making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals; and

(D) providing for the availability and distribution (through public education campaigns, Aging and Disability Resource Centers, the area agency on aging itself, and other appropriate means) of information relating to—

(i) the need to plan in advance for long-term care; and

(ii) the full range of available public and private long-term care (including integrated long-term care) programs, options, service providers, and resources;

(8) provide that case management services provided under this title through the area agency on aging will—

(A) not duplicate case management services provided through other Federal and State programs;

- (B) be coordinated with services described in subparagraph (A); and
- (C) be provided by a public agency or a nonprofit private agency that—
- (i) gives each older individual seeking services under this title a list of agencies that provide similar services within the jurisdiction of the area agency on aging;
- (ii) gives each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipt by such individual of such statement;
- (iii) has case managers acting as agents for the individuals receiving the services and not as promoters for the agency providing such services; or
- (iv) is located in a rural area and obtains a waiver of the requirements described in clauses (i) through (iii);
- (9) (A) 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 2019 in carrying out such a program under this title;
- (B) funds made available to the area agency on aging pursuant to section 712 shall be used to supplement and not supplant other Federal, State, and local funds expended to support activities described in section 712;
- (10) provide a grievance procedure for older individuals who are dissatisfied with or denied services under this title;
- (11) provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including—
- (A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;
- (B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and
- (C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans;
- (12) provide that the area agency on aging will establish procedures for coordination of services with entities conducting other Federal or federally assisted programs for older individuals at the

local level, with particular emphasis on entities conducting programs described in section 203(b) within the planning and service area.

(13) provide assurances that the area agency on aging will—

(A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;

(B) disclose to the Assistant Secretary and the State agency—

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

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

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

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

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

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

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

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

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

(16) provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care;

(17) 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;

(18) provide assurances that the area agency on aging will collect data to determine—

(A) the services that are needed by older individuals whose needs were the focus of all centers funded under title IV in fiscal year 2019; and

(B) the effectiveness of the programs, policies, and services provided by such area agency on aging in assisting such individuals; and

(19) 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 those individuals whose needs were the focus of all centers funded under title IV in fiscal year 2019.

(b)(1) An area agency on aging may include in the area plan an assessment of how prepared the area agency on aging and service providers in the planning and service area are 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.

(2) Such assessment may include—

(A) the projected change in the number of older individuals in the planning and service area;

(B) 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;

(C) an analysis of how the programs, policies, and services provided by such area agency can be improved, and how resource levels can be adjusted to meet the needs of the changing population of older individuals in the planning and service area; and

(D) an analysis of how the change in the number of individuals age 85 and older in the planning and service area is expected to affect the need for supportive services.

(3) An area agency on aging, in cooperation with government officials, State agencies, tribal organizations, or local entities, may make recommendations to government officials in the planning and service area and the State, on actions determined by the area agency to build the capacity in the planning and service area to meet the needs of older individuals for—

(A) health and human services;

(B) land use;

(C) housing;

(D) transportation;

(E) public safety;

(F) workforce and economic development;

(G) recreation;

- (H) education;
- (I) civic engagement;
- (J) emergency preparedness;
- (K) protection from elder abuse, neglect, and exploitation;
- (L) assistive technology devices and services; and
- (M) any other service as determined by such agency.

(c) Each State, in approving area agency on aging plans under this section, shall waive the requirement described in paragraph (2) of subsection (a) for any category of services described in such paragraph if the area agency on aging demonstrates to the State agency that services being furnished for such category in the area are sufficient to meet the need for such services in such area and had conducted a timely public hearing upon request.

(d)(1) Subject to regulations prescribed by the Assistant Secretary, an area agency on aging designated under section 305(a)(2)(A) or, in areas of a State where no such agency has been designated, the State agency, may enter into agreement with agencies administering programs under the Rehabilitation Act of 1973, and titles XIX and XX of the Social Security Act for the purpose of developing and implementing plans for meeting the common need for transportation services of individuals receiving benefits under such Acts and older individuals participating in programs authorized by this title.

(2) In accordance with an agreement entered into under paragraph (1), funds appropriated under this title may be used to purchase transportation services for older individuals and may be pooled with funds made available for the provision of transportation services under the Rehabilitation Act of 1973, and titles XIX and XX of the Social Security Act.

(e) An area agency on aging may not require any provider of legal assistance under this title to reveal any information that is protected by the attorney-client privilege.

(f)(1) If the head of a State agency finds that an area agency on aging has failed to comply with Federal or State laws, including the area plan requirements of this section, regulations, or policies, the State may withhold a portion of the funds to the area agency on aging available under this title.

(2) (A) The head of a State agency shall not make a final determination withholding funds under paragraph (1) without first affording the area agency on aging due process in accordance with procedures established by the State agency.

(B) At a minimum, such procedures shall include procedures for—

- (i) providing notice of an action to withhold funds;

(ii) providing documentation of the need for such action; and

(iii) at the request of the area agency on aging, conducting a public hearing concerning the action.

(3) (A) If a State agency withholds the funds, the State agency may use the funds withheld to directly administer programs under this title in the planning and service area served by the area agency on aging for a period not to exceed 180 days, except as provided in subparagraph (B).

(B) If the State agency determines that the area agency on aging has not taken corrective action, or if the State agency does not approve the corrective action, during the 180-day period described in subparagraph (A), the State agency may extend the period for not more than 90 days.

(g) Nothing in this Act shall restrict an area agency on aging from providing services not provided or authorized by this Act, including through—

(1) contracts with health care payers;

(2) consumer private pay programs; or

(3) other arrangements with entities or individuals that increase the availability of home and community-based services and supports.

Sec. 307, STATE PLANS

(a) Except as provided in the succeeding sentence and section 309(a), each State, in order to be eligible for grants from its allotment under this title for any fiscal year, shall submit to the Assistant Secretary a State plan for a two, three, or four-year period determined by the State agency, with such annual revisions as are necessary, which meets such criteria as the Assistant Secretary may by regulation prescribe. If the Assistant Secretary determines, in the discretion of the Assistant Secretary, that a State failed in 2 successive years to comply with the requirements under this title, then the State shall submit to the Assistant Secretary a State plan for a 1-year period that meets such criteria, for subsequent years until the Assistant Secretary determines that the State is in compliance with such requirements. Each such plan shall comply with all of the following requirements:

(1) The plan shall—

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

(B) be based on such area plans.

(2) The plan shall provide that the State agency will—

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

(B) develop a standardized process to determine the extent to which public or private programs and resources (including volunteers and programs and services of voluntary organizations) that have the capacity and actually meet such need; and

(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 section 306(c) or 316) by such area agency on aging to provide each of the categories of services specified in section 306(a)(2).

(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 intrastate distribution of funds); and

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

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

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

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

(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).

(5) The plan shall provide that the State agency will—

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

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

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

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

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

(B) The plan shall provide assurances that—

(i) no individual (appointed or otherwise) involved in the designation of the State agency or an area agency on aging, or in the designation of the head of any subdivision of the State agency or of an area agency on aging, is subject to a conflict of interest prohibited under this Act;

(ii) no officer, employee, or other representative of the State agency or an area agency on aging is subject to a conflict of interest prohibited under this Act; and

(iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

(8) (A) The plan shall provide that no supportive services, nutrition services, or in-home services will be directly provided by the State agency or an area agency on aging in the State, unless, in the judgment of the State agency—

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

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

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

(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.

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

(9) The plan shall provide assurances that—

(A) 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 2019, and an amount that is not less than the amount expended by the State agency with funds received under title VII for fiscal year 2019; and

(B) funds made available to the State agency pursuant to section 712 shall be used to supplement and not supplant other Federal, State, and local funds expended to support activities described in section 712.

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

(11) The plan shall provide that with respect to legal assistance —

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

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

(C) the State agency will provide for the coordination of the furnishing of legal assistance to older individuals within the State, and provide advice and technical assistance in the provision of legal assistance to older individuals within the State and support the furnishing of training and technical assistance for legal assistance for older individuals;

(D) the plan contains assurances, to the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with

funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals; and

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

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

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

(i) public education to identify and prevent abuse of older individuals;

(ii) receipt of reports of abuse of older individuals;

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

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

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

(C) all information gathered in the course of receiving reports and making referrals shall remain confidential unless all parties to the complaint consent in writing to the release of such information, except that such information may be released to a law enforcement or public protective service agency.

(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 area agencies on aging will provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care.

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

(B) Such assessment may include—

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

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

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

(iv) an analysis of how the change in the number of individuals age 85 and older in the State is expected to affect the need for supportive services.

(28) 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.

(29) 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.

(30) The plan shall contain an assurance that the State shall prepare and submit to the Assistant Secretary annual reports that describe—

(A) data collected to determine the services that are needed by older individuals whose needs were the focus of all centers funded under title IV in fiscal year 2019;

(B) data collected to determine the effectiveness of the programs, policies, and services provided by area agencies on aging in assisting such individuals; and

(C) outreach efforts and other activities carried out to satisfy the assurances described in paragraphs (18) and (19) of section 306(a).

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

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

Sec. 705, ADDITIONAL STATE PLAN REQUIREMENTS

(a) ELIGIBILITY.—In order to be eligible to receive an allotment under this subtitle, a State shall include in the state plan submitted under section 307—

- (1) an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter;
- (2) an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle;
- (3) an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights;
- (4) an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter;
- (5) an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5).
- (6) an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3—
 - (A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for—
 - (i) public education to identify and prevent elder abuse;

(ii) receipt of reports of elder abuse;

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

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

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

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

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

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

(iii) upon court order...

Signature and Title of Authorized Official

Date

Appendix B: Information Requirements

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

Section 305(a)(2)(E)

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

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

- Implemented InterRAI person-centered assessment tool to determine highest service need and priority level.
- Continuing outreach and engagement work.
- 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.
- Programs will be improved or modified to include Culturally and Linguistically Appropriate services and supports.
- DSAAPD will continue to provide a full range of services through the agency office in Southern Delaware, as well as through contractors located in other areas of the State.

Section 306(a)(6)(I)

Describe the mechanism(s) for assuring that each Area Plan will include information detailing how the Area Agency will, to the extent feasible, coordinate with the State agency to disseminate information about the State assistive technology entity and access to assistive technology options for serving older individuals;

Delaware is a single planning and service area. The state agency coordinates with the Delaware Assistive Technology Institute (DATI) at the University of Delaware to access assistive technology options for serving older individuals. DSAAPD routinely

disseminates information regarding options for accessing assistive technology through social media platforms, the DSAAPD website, and the ADRC / No Wrong Door System.

Section 306(a)(17)

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

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 (c) or 316) by such area agency on aging to provide each of the categories of services specified in section 306(a)(2). (Note: those categories are access, in-home, and legal assistance. Provide specific minimum proportion determined for each category of service.)

Delaware is a single planning and service area and therefore does not allocate funds to area agencies on aging. The minimum proportion of funds to carry out that will be expended to provide each of the categories of services is as follows: **Access- %, In-Home - %, and Legal Assistance - %**. The basis for funding levels is historic need and available finding.

Section 307(a)(3)

The plan shall—

...

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

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

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

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

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.

According to the 2020 Rural-Urban Commuting Area Codes (RUCA), Delaware has zero rural tracts however, for the fiscal year preceding the ones in which this plan applies, many outreach activities were used to reach older persons in underserved or hard to reach areas throughout the state. Such outreach activities included the presentation of information in local broadcast media, community newspapers, social media, and the distribution of information through local gatherings including outreach and public information sessions and wellness expos.

DSAAPD maintained a statewide toll-free phone number for information and access to services, as well as a website and email address. In addition, DSAAPD maintained offices in southern Delaware, an area of the State that houses populations that have been difficult to reach with our current array of services.

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.

According to the 2020 Rural-Urban Commuting Area Codes (RUCA), Delaware has zero rural tracts. However, Delaware assures that special needs of older individuals residing in historically underserved areas or areas that have been difficult to reach with our array of services are considered in the planning and provision of services. DSAAPD allocated resources such that services are provided throughout the state. Contractor selection also ensures that provision of services covers all geographic areas of the State. As previously noted, because of the size of the state, resources can be distributed to all geographic areas without additional cost.

Section 307(a)(14)

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

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

Please refer to the population figures presented in the demographic section of this plan for data on race, Hispanic origin, poverty status and language proficiency. In 2022, an

estimated 9.4% of all Delawareans lived below the poverty level. Of that 3.2% were aged 65 years and older.

(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 seeks to support DEI in its service standards as well as emphasizing person and family centered care for all program and service participants.

DSAAPD is engaged in a technical assistance grant with the National Center on Advancing Person-Centered Practices and Systems (NCAPPS) with a focus on DEI. In conjunction with DSAAPD's current stakeholder engagement plan informed by the NCAPPS work, the Division will build an additional plan to address how to engage those who may not have historically been service recipients. This includes translating information and resources into other languages, and working with community agencies to support culturally and linguistically appropriate programs and services.

Section 307(a)(21)

The plan shall —

...

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

Delaware has state-recognized Native American tribes, but no federally identified Native American tribes, and no reservations in the state. The 2020 Census indicates that .4% of all Delawareans reported themselves to be Native American. Approximately 42% of Delaware's Native Americans live in New Castle 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 (including, but not limited to, senior centers, nutrition sites, and federally qualified health centers) and will include Native Americans in minority targeting initiatives.

Section 307(a)(27)

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

(B) Such assessment may include—

- (i) the projected change in the number of older individuals in the State;
- (ii) an analysis of how such change may affect such individuals, including individuals with low incomes, individuals with greatest economic need, minority older individuals, older individuals residing in rural areas, and older individuals with limited English proficiency;
- (iii) an analysis of how the programs, policies, and services provided by the State can be improved, including coordinating with area agencies on aging, and how resource levels can be adjusted to meet the needs of the changing population of older individuals in the State; and
- (iv) an analysis of how the change in the number of individuals age 85 and older in the State is expected to affect the need for supportive services

DSAAPD will utilize Delaware Population Consortium data to project changes in the number of older individuals and older individuals over the age of 85, as well as the needs of those individuals with greatest economic need, minority older individuals, older individuals residing in historically underserved, hard to reach, and unincorporated areas, and older individuals with limited English proficiency. DSAAPD will adjust services and allocation of resources based on Delaware Population Consortium data and based on recommendations from the legislative Aging in Place Working Group, the Caucus on Aging, and through an understanding of community needs through stakeholder engagement conducted statewide.

Section 307(a)(28)

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: establishing procedures for reviewing and monitoring contractor's emergency preparedness plans, incorporating an evaluation of emergency preparedness into DSAAPD participant assessments and strengthening protocols for individual back-up plans, promoting emergency preparedness among older persons and persons with physical disabilities through ongoing outreach activities, and coordinating with local and state Emergency Operations Centers to develop a standard emergency preparedness protocol for aging citizens especially those in areas with limited accessibility and high flood risk areas.

Section 307(a)(29)

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 has representation in the State Health Operations Center and participates in development of the state-wide COOP. In addition, all contracted providers are required to have a long-range emergency preparedness plan in place for Older Americans Act services. 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 emergency preparedness 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) ELIGIBILITY —

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

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

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

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

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

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. Programs include Adult Protective Services (APS), Long Term Care Ombudsman Program (LTCOP), and legal assistance development. A full list of services provided within Delaware, including program description, eligibility criteria, and contact information can be found on the agency's website, 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. An extensive stakeholder feedback campaign was launched to gather input in preparation for the development of State Plan goals and objectives. Views of older individuals are obtained regarding DSAAPD's elder abuse prevention and legal development activities. Older individuals are appointed to DSAAPD's Council on Services for Aging and Adults with Physical Disabilities. This council meets monthly ten months out of the calendar year and advises DSAAPD leadership regarding DSAAPD's elder justice programming and services. Please see Appendix G of this plan for additional information on these state plan feedback and information sessions.

(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 Department of Justice 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 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. Each of these elder rights protection activities is described briefly below:

- Oversight of the Long Term Care Ombudsman Program which 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 management.
- DSAAPD contracts with Community Legal Aid Society, Inc. to operate the Elder Law Program.
- DSAAPD coordinates with other organizations (such as the Division of Health Care Quality, 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 the above detailed provisions. The APS program complies with all provisions of the Older Americans Act regarding 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 provides education on elder abuse prevention to community organizations and partner agencies throughout the state, in addition to outreach and education provided through non-traditional avenues. 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.

APS has policies in place to refer individuals to other assistance, and routinely works with partner agencies to ensure that individual needs are addressed. APS State Code prohibits the involuntary or coerced participation in protective services, with the exception of participants who lack capacity.

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Appendix C: Intrastate Funding Formula (IFF)

The State of Delaware is a single planning and service area and is not required to have an intrastate funding formula. DSAAPD utilizes the best available data, including county-specific demographic information, to identify where the need for services is greatest. Additionally, the following data sources are considered:

- [2022 U.S. Census Bureau Data](#)
- [2022 Delaware Population Consortium Annual Population Projections](#)

Federal funds are allocated for services that best address the needs of the following targeted demographic groups in each county:

- Population age 60 and older
- Minority
- LGBTQIA+
- Individuals with the greatest economic and social need
- Individuals in historically underserved populations and communities

The resource allocation plan for Delaware is included as Appendix D of this plan.

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Appendix D: Resource Allocation Plan

FY 2024

To be provided by fiscal.

Funding Source	Amount
State General Funds	
Total State General Funds	
Federal Funds	
Social Services Block Grant (SSBG)	
Medicaid	
Older Americans Act Title III	
Older Americans Act Title V	
Older Americans Act Title VII	
Nutrition Services Incentive Program	
Total Federal Funds	
Other Funds	
Discretionary Grants	
Civil Money Penalty Fund	
Grant-in-Aid Funds	
Senior Trust Fund	
Tobacco Settlement Funds	
Total Other Funds	
Total Amount of Funding	
Grand Total	

Appendix E: Information About Persons Served

Service	Persons Served
Title III-B Supportive Services	
Adult Day Health	199
Assisted Transportation	N/A
Case Management	2,569
Homemaker	N/A
Personal Care	729
Legal Services	
Title III-C Nutrition Services	
Congregate Meals	4,872
Home Delivered Meals	4,721
Nutrition Counseling	726
Title III-E Caregiver Supports	
Counseling	1,609
Support Groups	229
Caregiver Training	1,995
Respite Care	100
Supplemental Services	N/A
Total	
Total Estimated Unduplicated Persons Served	17,749

Appendix F: Demographic Information

A Profile of Older Delawareans – 2022 Estimates

	Number	Percent
Age Group (Age 60+)		
60-64	78,000	26.9%
65-69	69,310	23.9%
70-74	57,686	19.9%
75-79	41,828	14.4%
80-84	24,484	8.4%
85+	18,872	6.5%
Total 60+	290,180	100%
County of Residence		
New Castle	137,056	47.2%
Kent	47,616	16.4%
Sussex	105,508	36.4%
Gender (Age 60+)		
Male	132,315	45.6%
Female	157,865	54.4%
Race and Hispanic/Latino Origin		
White		75.7%
Black or African American		16.1%
American Indian and Alaskan Native		0.2%
Asian		2.7%
Native Hawaiian and Other Pacific Islander		0%
Other		1.1%
Two or More Races		4.2%
Hispanic/Latino Origin		3.5%

Appendix G: Summary of State Plan Public Feedback Sessions

A summary of information and feedback from all seven public feedback sessions across the state will be compiled and added to this section.

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Appendix H: Council on Services for Aging and Adults with Physical Disabilities

Council Member	Constituency Represented
Shannon Costello	Disabled Person – Kent County
Carolyn Fredricks	Aging Public/Non-Profit Agency
Sheila Grant	Aging Public/Non-Profit Agency
Evelyn Hayes	Aging Person/ Caregiver – New Castle County
Suzanne Howell	Disabled Person/Caregiver – New Castle County
David Mariner	Victim Services
LaVaida Owens-White	Disabled Public/Non-Profit Agency
Jacqueline Sullivan, Chairperson	Aging Person/Caregiver – Sussex County
Maggie Webb	Disabled Public/Non-Profit Agency
Jack Young	Aging Public/Non-Profit Agency

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Appendix I: DSAAPD Services & Contact Information

DSAAPD Services

The Delaware Division of Services for Aging and Adults with Physical Disabilities operates and/or funds programs benefitting aging Delawareans and adults with physical disabilities including:

- Adult Day Services
- Adult Foster Care
- Adult Protective Services
- Assistive Devices
- Attendant Services
- Caregiver Resource Centers
- Case Management
- Community Living
- Congregate Meals
- Home Delivered Meals
- Home Modification
- Information and Assistance
- Legal Services
- Lifespan Respite
- Nursing Home Transition Program
- Long Term Residential Care (Facility)
- Options Counseling
- Pathways to Employment
- Personal Care
- Personal Emergency Response System
- Respite Care
- Senior Community Service Employment Program

Contact Information

DSAAPD has office locations in Newark, Milford, Smyrna, and Georgetown. Hours of operation are 8:00am to 4:30pm Monday through Friday. DSAAPD also operates a 24/7 Aging and Disability Resource Center (ADRC).

Delaware Aging and Disability Resource Center

1-800-223-9074

DelawareADRC@delaware.gov

Telecommunications Device for the Deaf (TDD): 302-424-7141

Newark (Administrative Office)

Christiana Executive Campus
240 Continental Drive, Suite 101
Newark, DE. 19703
1-800-223-9074
Fax: 302-781-3548

Milford

Milford State Service Center
18 N. Walnut Street, 1st Floor
Milford, DE. 19963
1-800-223-9074
Fax: 302-422-1346

Georgetown

26351 Patriots Way
Georgetown, DE. 19947
1-800-223-9074
Fax: 302-933-3467

Smyrna

100 Sunnyside Road
Smyrna, DE. 19977
1-800-223-9074
Fax: 302-223-130

Long-Term Care

DSAAPD is responsible for the operation of one long-term care facility, the Delaware Hospital for the Chronically Ill. Below is the address and phone numbers for this facility.

The Delaware Hospital for the Chronically Ill

100 Sunnyside Road

Smyrna, DE. 19977

302-223-1000

1-800-223-9074

TDD: 302-424-7141

Fax: 302-223-1301

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